

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. 12FE4M5
National Committee to Preserve Social Security & Medicare PAC

ADDRESS (number and street) 10 G St. NE
Suite 600
Washington DC 20002-4215
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C 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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 09 / 01 / 2012 through 09 / 30 / 2012

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 Ms. Christine Kim [Electronically Filed] Date 10 / 17 / 2012

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 Committee to Preserve Social Security & Medicare PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="91845.11"/>	<input type="text" value="91845.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="557514.84"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="310253.57"/>	<input type="text" value="1195551.72"/>
(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="867768.41"/>	<input type="text" value="1287396.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="491520.68"/>	<input type="text" value="911149.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="376247.73"/>	<input type="text" value="376247.73"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

Report Covering the Period: From: 09 / 01 / 2012 To: 09 / 30 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15801.00	37916.00
(ii) Unitemized	294430.25	1157379.19
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	310231.25	1195295.19
(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)	310231.25	1195295.19
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.).....	22.32	256.53
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))..... ▶	310253.57	1195551.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	310253.57	1195551.72

DETAILED SUMMARY PAGE
of Disbursements

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	360839.60	511272.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	360839.60	511272.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	128826.86	394500.95
24. Independent Expenditures (use Schedule E)	854.22	2073.50
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	1000.00	3302.28
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)) ..	491520.68	911149.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	491520.68	911149.10

DETAILED SUMMARY PAGE
of Disbursements

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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)	310231.25	1195295.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	310231.25	1195295.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	360839.60	511272.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	360839.60	511272.37

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 76
(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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)
A. Ms Beatrice R Putnam

Mailing Address
225 Putnam Rd

City State Zip Code
Newbury VT 05051-9504

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20408456

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Mr Frank Kapitan

Mailing Address
31 Bungalow Park

City State Zip Code
Stamford CT 06902-4305

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
515.00

Date of Receipt
09 / 06 / 2012
Transaction ID : 20408509

Amount of Each Receipt this Period
210.00

Full Name (Last, First, Middle Initial)
C. Mr John A Munoz

Mailing Address
800 Riverside Dr Apt 2J

City State Zip Code
New York NY 10032

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
09 / 11 / 2012
Transaction ID : 20408593

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 510.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

A. Ms Elizabeth Clark
Full Name (Last, First, Middle Initial)

Mailing Address
40 W Mosholu Pkwy S Apt 14A

City: Bronx State: NY Zip Code: 10468

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

Name of Employer: Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20408612

Amount of Each Receipt this Period
143.00

B. Ms Eleanor Palermo
Full Name (Last, First, Middle Initial)

Mailing Address
9318 Northgate Dr

City: Allison Park State: PA Zip Code: 15101-1915

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

Name of Employer: Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 19 / 2012
Transaction ID : 20408760

Amount of Each Receipt this Period
100.00

C. Mr Glen M Pensinger
Full Name (Last, First, Middle Initial)

Mailing Address
5221 Royal Dr

City: Mechanicsburg State: PA Zip Code: 17055-3513

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

Name of Employer: Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 10 / 2012
Transaction ID : 20408797

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	318.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr Milan Blaha
Full Name (Last, First, Middle Initial)

Mailing Address
21014 Courtland Village Dr

City Leesburg State VA Zip Code 20175-8896

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
09 / 05 / 2012
Transaction ID : 20408913

Amount of Each Receipt this Period
150.00

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

Mailing Address
4011 24th PI

City Temple Hills State MD Zip Code 20748

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20408921

Amount of Each Receipt this Period
75.00

c. Ms Inge Rompf
Full Name (Last, First, Middle Initial)

Mailing Address
5322 Pooks Hill Rd

City Bethesda State MD Zip Code 20814

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
09 / 11 / 2012
Transaction ID : 20408928

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00

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 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)
A. Mr Fletcher Perry

Mailing Address
 1720 Sells Rd

City Salisbury State NC Zip Code 28144

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 09 / 04 / 2012
Transaction ID : 20409052

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Mrs Ona F Lester

Mailing Address
 1101 Humphries Rd NW

City Conyers State GA Zip Code 30012-2015

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 429.00

Date of Receipt
 09 / 13 / 2012
Transaction ID : 20409097

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. Mr & Mrs Ralph W Theis

Mailing Address
 711 Erie St

City Delphos State OH Zip Code 45833-2040

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 09 / 05 / 2012
Transaction ID : 20409326

Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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 76
<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 Committee to Preserve Social Security & Medicare PAC

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

Mailing Address
1147 Heron Ave
City Audubon State IA Zip Code 50025-7408

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 06 / 2012
Transaction ID : 20409455

Amount of Each Receipt this Period
125.00

B. Miss Lorraine E Eklund
Full Name (Last, First, Middle Initial)

Mailing Address
2932 34th Ave S Apt 8
City Minneapolis State MN Zip Code 55406-1772

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
289.00

Date of Receipt
09 / 10 / 2012
Transaction ID : 20409533

Amount of Each Receipt this Period
139.00

C. L Whit Marks
Full Name (Last, First, Middle Initial)

Mailing Address
900 Enz Dr
City Edmond State OK Zip Code 73034

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
09 / 12 / 2012
Transaction ID : 20409764

Amount of Each Receipt this Period
135.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 399.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

A. Raymond A Cochrane
 Full Name (Last, First, Middle Initial)
 Mailing Address: 1723 S Crest Dr
 City: Los Angeles State: CA Zip Code: 90035-4218
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 07 / 2012
Transaction ID : 20409978
 Amount of Each Receipt this Period: 130.00
 Aggregate Year-to-Date: 255.00

B. Mrs Claudia Good
 Full Name (Last, First, Middle Initial)
 Mailing Address: 409 N Eucla Ave
 City: San Dimas State: CA Zip Code: 91773
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20410031
 Amount of Each Receipt this Period: 175.00
 Aggregate Year-to-Date: 205.00

C. Mr Daniel M Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address: 612 W Escalon Ave
 City: Clovis State: CA Zip Code: 93612-5738
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 12 / 2012
Transaction ID : 20410083
 Amount of Each Receipt this Period: 100.00
 Aggregate Year-to-Date: 328.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 405.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 76
	<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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial) A. Mr Robert I Long		Date of Receipt MM / DD / YYYY 09 / 12 / 2012 Transaction ID : 20410138
Mailing Address Apt 1145 2000 Atrium Pkwy		Amount of Each Receipt this Period 500.00
City Napa	State CA	
Zip Code 94559-4841		Aggregate Year-to-Date ▼ 1200.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mr G Makuaole		Date of Receipt MM / DD / YYYY 09 / 11 / 2012 Transaction ID : 20410195
Mailing Address 87 252 Laiku St		Amount of Each Receipt this Period 350.00
City Waianae	State HI	
Zip Code 96792-3692		Aggregate Year-to-Date ▼ 700.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mr Henry F Hanson		Date of Receipt MM / DD / YYYY 09 / 05 / 2012 Transaction ID : 20410419
Mailing Address 1585 Perch Way		Amount of Each Receipt this Period 150.00
City Willits	State CA	
Zip Code 95490		Aggregate Year-to-Date ▼ 450.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Marguerite V Simonian
 Full Name (Last, First, Middle Initial)
 Mailing Address
 87 Lincoln St
 City State Zip Code
 Newton Highlands MA 02461-1541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20410664
 Amount of Each Receipt this Period
 160.00

B. Miss Anne Fuglsang
 Full Name (Last, First, Middle Initial)
 Mailing Address
 3556 El Verdado Ct
 City State Zip Code
 Naples FL 34109-1300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2012
Transaction ID : 20410994
 Amount of Each Receipt this Period
 100.00

C. Barbara Thompson
 Full Name (Last, First, Middle Initial)
 Mailing Address
 981 Sawyer St
 City State Zip Code
 Pensacola FL 32534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2012
Transaction ID : 20411450
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 510.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)
A. Mrs Constance Riley

Mailing Address
7767 Orion St

City Arvada State CO Zip Code 80007

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 12 / 2012
Transaction ID : 20411584

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms Alta I Mainer

Mailing Address
5121 44th St NW

City Washington State DC Zip Code 20016-4038

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20411729

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Ms Lois E Jones

Mailing Address
6501 Westland Rd

City Bethesda State MD Zip Code 20817

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
214.00

Date of Receipt
09 / 11 / 2012
Transaction ID : 20411737

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial) A. Thomas M Bohannon		Date of Receipt MM / DD / YYYY 09 / 11 / 2012 Transaction ID : 20411810
Mailing Address 6027 Stanbrook Dr		Amount of Each Receipt this Period 150.00
City Richmond	State VA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 275.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Nadine Whiton		Date of Receipt MM / DD / YYYY 09 / 06 / 2012 Transaction ID : 20411950
Mailing Address Apt 1505 8100 Connecticut Ave		Amount of Each Receipt this Period 100.00
City Chevy Chase	State MD	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Dennis J Mc Carthy		Date of Receipt MM / DD / YYYY 09 / 04 / 2012 Transaction ID : 20412476
Mailing Address 19852 Eagle Trace Ct		Amount of Each Receipt this Period 138.00
City N Fort Meyers	State FL	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 213.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	388.00
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 76
<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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial) A. Mr Daniel J Mangini		Date of Receipt MM / DD / YYYY 09 / 05 / 2012 Transaction ID : 20412525
Mailing Address 32 Rogers Ln City: Middletown RI Zip Code: 02842-4527		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C	Name of Employer Occupation: Retired	Aggregate Year-to-Date 206.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Margaret K Bruce		Date of Receipt MM / DD / YYYY 09 / 04 / 2012 Transaction ID : 20412640
Mailing Address 58 Washburn Rd City: Mount Kisco NY Zip Code: 10549		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C	Name of Employer Occupation: Retired	Aggregate Year-to-Date 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Eugene Davis		Date of Receipt MM / DD / YYYY 09 / 10 / 2012 Transaction ID : 20413701
Mailing Address 1730 Huntington Dr Unit 212 City: Duarte CA Zip Code: 91010-2540		Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C	Name of Employer Occupation: Retired	Aggregate Year-to-Date 325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 76
	<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 Committee to Preserve Social Security & Medicare PAC

A. Mr Emory C Manning
 Full Name (Last, First, Middle Initial)
 Mailing Address: 1439 Manning Rd
 City: Iva State: SC Zip Code: 29655
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20413730
 Amount of Each Receipt this Period: 200.00

B. Mr Noel Moyer
 Full Name (Last, First, Middle Initial)
 Mailing Address: Apt A, 307 Hollywood Hts Rd
 City: Caseyville State: IL Zip Code: 62232-1109
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 438.00

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20413766
 Amount of Each Receipt this Period: 188.00

C. Ms Agnes Heleniak
 Full Name (Last, First, Middle Initial)
 Mailing Address: 812 E Elm St
 City: Conshohocken State: PA Zip Code: 19428
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 220.00

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20414266
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional).....	488.00
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 18 OF 76
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Ms Virginia T Rudasill
 Full Name (Last, First, Middle Initial)
 Mailing Address
 19 Fairmount Ave
 City Wakefield State MA Zip Code 01880-2241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 09 / 11 / 2012
Transaction ID : 20414306
 Amount of Each Receipt this Period
 150.00

B. Ms Jocelyne Jueneman
 Full Name (Last, First, Middle Initial)
 Mailing Address Unit 103
 4305 Owens St
 City Corona State CA Zip Code 92883-0804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 09 / 04 / 2012
Transaction ID : 20414552
 Amount of Each Receipt this Period
 250.00

C. Mr & Mrs Robert A Resnik
 Full Name (Last, First, Middle Initial)
 Mailing Address Apt 109
 3122 Gracefield Rd No 109
 City Silver Spring State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 09 / 06 / 2012
Transaction ID : 20414560
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
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 19 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)
A. Mrs Nora W Shattuck

Mailing Address
231 Forge Hill Rd

City Lincoln State VT Zip Code 05443-9184

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20414747

Amount of Each Receipt this Period
150.00

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

Mailing Address
515 W 1st St

City Minden State NE Zip Code 68959-1404

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20415624

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Ms Betty Wojcik

Mailing Address
32 Edward St

City Amsterdam State NY Zip Code 12010-5036

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20415671

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial) A. Anna L Basarich		Date of Receipt MM / DD / YYYY 09 / 07 / 2012 Transaction ID : 20415699
Mailing Address 405 Hillcrest Ave		Amount of Each Receipt this Period 100.00
City Grosse Pointe	State MI	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 275.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Pearl S Walker		Date of Receipt MM / DD / YYYY 09 / 12 / 2012 Transaction ID : 20415896
Mailing Address 941 S Fremont Ave		Amount of Each Receipt this Period 225.00
City Springfield	State MO	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 225.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs Kathryn H Mott		Date of Receipt MM / DD / YYYY 09 / 12 / 2012 Transaction ID : 20416022
Mailing Address 309 Kendal Dr		Amount of Each Receipt this Period 150.00
City Kennett Square	State PA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	475.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Christine S Folino
Full Name (Last, First, Middle Initial)

Mailing Address
61 Sunnyridge Ln

City State Zip Code
Dayton OH 45429-5428

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
09 / 05 / 2012
Transaction ID : 20416116

Amount of Each Receipt this Period
150.00

B. Mr Ira Deal Jr
Full Name (Last, First, Middle Initial)

Mailing Address
10821 Whipple St

City State Zip Code
Chicago IL 60655

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20416182

Amount of Each Receipt this Period
100.00

C. Mr Harold Love
Full Name (Last, First, Middle Initial)

Mailing Address
3217 E Leverett Ct

City State Zip Code
Alton IL 62002-4066

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 07 / 2012
Transaction ID : 20416345

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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 22 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr Edward Corlew
 Full Name (Last, First, Middle Initial)
 Mailing Address
 2095 Whipple Rd
 City State Zip Code
 Bates City MO 64011-8149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2012
Transaction ID : 20416528
 Amount of Each Receipt this Period
 100.00

B. Mr Donald G Evans
 Full Name (Last, First, Middle Initial)
 Mailing Address
 11403 Kedleston Rd
 City State Zip Code
 Glenn Dale MD 20769-2020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012
Transaction ID : 20416801
 Amount of Each Receipt this Period
 150.00

C. Reverend Robert L Baughan Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address
 77 Magaw Ave
 City State Zip Code
 Carlisle PA 17015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2012
Transaction ID : 20416811
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 23 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr & Mrs Leroy Swoyer

Full Name (Last, First, Middle Initial)

Mailing Address
1248 Harbor Town Way

City Venice State FL Zip Code 34292-3121

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20416882

Amount of Each Receipt this Period
150.00

B. Ms Bonnie Russell

Full Name (Last, First, Middle Initial)

Mailing Address
1917 Richcreek Rd

City Austin State TX Zip Code 78757

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20416916

Amount of Each Receipt this Period
123.00

C. Mrs Anne F Arrington

Full Name (Last, First, Middle Initial)

Mailing Address
105 Allen Rd SE

City Floyd State VA Zip Code 24091-2839

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20417426

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 473.00

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 24 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr Jerry E Bican
 Full Name (Last, First, Middle Initial)
 Mailing Address
 4178 Ivywood Dr
 City State Zip Code
 Brooklyn OH 44144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012
Transaction ID : 20417452
 Amount of Each Receipt this Period
 50.00

B. Georgene Ference
 Full Name (Last, First, Middle Initial)
 Mailing Address
 4944 Barat Cir
 City State Zip Code
 Anchorage AK 99508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2012
Transaction ID : 20417663
 Amount of Each Receipt this Period
 250.00

C. Mr Lynn Schermerhorn
 Full Name (Last, First, Middle Initial)
 Mailing Address
 PO Box 923
 City State Zip Code
 Topock AZ 86436-0923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 20417690
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 25 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial) A. Bi Agnes Heleniak		Date of Receipt
Mailing Address 812 E Elm St		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City State Zip Code Conshohocken PA 19428		Transaction ID : 20418164
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Eugene C Cade		Date of Receipt
Mailing Address PO Box 7881		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City State Zip Code Olympia WA 98507		Transaction ID : 20418456
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Vaughn Hooper		Date of Receipt
Mailing Address 5517 Sheffield Dr		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City State Zip Code Donalsonville GA 39845		Transaction ID : 20418564
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 26 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr Dean P Hanson
Full Name (Last, First, Middle Initial)

Mailing Address
169 East St NE

City State Zip Code
Vienna VA 22180

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20418712

Amount of Each Receipt this Period
200.00

B. Mrs Lydia L Jimenez
Full Name (Last, First, Middle Initial)

Mailing Address
962 J Street

City State Zip Code
Brawley CA 92227

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20418825

Amount of Each Receipt this Period
90.00

C. Mr Christian L Mast
Full Name (Last, First, Middle Initial)

Mailing Address
5921 Private Road 633

City State Zip Code
Millersburg OH 44654-8207

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 05 / 2012
Transaction ID : 20419041

Amount of Each Receipt this Period
140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 430.00

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 27 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. T Pappas
Full Name (Last, First, Middle Initial)

Mailing Address
25 Park Pl Apt 30

City State Zip Code
Great Neck NY 11021

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 05 / 2012
Transaction ID : 20419060

Amount of Each Receipt this Period
125.00

B. Ms Sondra Fear
Full Name (Last, First, Middle Initial)

Mailing Address
2703 Happy Landing Dr

City State Zip Code
Springfield IL 62711-9476

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20419143

Amount of Each Receipt this Period
150.00

C. Mr John R Ryan
Full Name (Last, First, Middle Initial)

Mailing Address
2003 Silverpine Ct

City State Zip Code
Toledo OH 43615-9160

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20419380

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....	525.00
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 28 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr Charles Tuhacek
Full Name (Last, First, Middle Initial)

Mailing Address
6480 State Rd Unit F11

City State Zip Code
Parma OH 44134-4198

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 20419516

Amount of Each Receipt this Period

B. Ms Marian R Hammond
Full Name (Last, First, Middle Initial)

Mailing Address Apt 272
609 Frederick St

City State Zip Code
Santa Cruz CA 95062-2234

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 20419610

Amount of Each Receipt this Period

C. Ms Dianne Burton
Full Name (Last, First, Middle Initial)

Mailing Address
12400 Us Hwy 101 N Spc 974

City State Zip Code
Smith River CA 95567-9426

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : 20419770

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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. Mr Dwight F Hastings
 Full Name (Last, First, Middle Initial)
 Mailing Address: 13801 York Rd Apt F11
 City: Cockeysville State: MD Zip Code: 21030-1896
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 06 / 2012
Transaction ID : 20419948
 Amount of Each Receipt this Period: 114.00
 Aggregate Year-to-Date: 228.00

B. Ms Louise Tulleken
 Full Name (Last, First, Middle Initial)
 Mailing Address: 248 S Camac St Apt 3C
 City: Philadelphia State: PA Zip Code: 19107-5681
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20420076
 Amount of Each Receipt this Period: 100.00
 Aggregate Year-to-Date: 250.00

C. Mr Robert M Mohr
 Full Name (Last, First, Middle Initial)
 Mailing Address: 16 Viejo Way
 City: Novato State: CA Zip Code: 94945-1338
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20420104
 Amount of Each Receipt this Period: 100.00
 Aggregate Year-to-Date: 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 314.00
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 30 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial) A. Ms Mary Szyslak		Date of Receipt MM / DD / YYYY 09 / 05 / 2012
Mailing Address 11829 Kiowa Ave Apt 2		Transaction ID : 20420179
City Los Angeles	State CA	Zip Code 90049-6014
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr John M Fraser		Date of Receipt MM / DD / YYYY 09 / 12 / 2012
Mailing Address 9 Oakwood Ave		Transaction ID : 20420252
City Ocean View	State DE	Zip Code 19970-9154
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr Stanley Hardy		Date of Receipt MM / DD / YYYY 09 / 04 / 2012
Mailing Address PO Box 657		Transaction ID : 20420758
City Humarock	State MA	Zip Code 02047
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 666.00	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 741.00	

SUBTOTAL of Receipts This Page (optional).....▶	1066.00
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 31 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mrs Margaret Jenkinson
 Full Name (Last, First, Middle Initial)
 Mailing Address: 702 W Mulberry Ave
 City: Enid State: OK Zip Code: 73701-2546
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 11 / 2012
Transaction ID : 20420808
 Amount of Each Receipt this Period: 60.00
 Aggregate Year-to-Date: 235.00

B. Mr Justice Hyde
 Full Name (Last, First, Middle Initial)
 Mailing Address: 221 Lilac Cir
 City: Franklin State: TN Zip Code: 37064-4733
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 06 / 2012
Transaction ID : 20420817
 Amount of Each Receipt this Period: 175.00
 Aggregate Year-to-Date: 275.00

C. Mr Dean Holland
 Full Name (Last, First, Middle Initial)
 Mailing Address: 1105 Colony Dr Apt 510
 City: Westerville State: OH Zip Code: 43081
 FEC ID number of contributing federal political committee: C
 Name of Employer: Occupation: Retired
 Receipt For: Primary General Other (specify)

Date of Receipt: 09 / 04 / 2012
Transaction ID : 20420844
 Amount of Each Receipt this Period: 150.00
 Aggregate Year-to-Date: 350.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 385.00
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 32 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Ms Margie Tumblin
 Full Name (Last, First, Middle Initial)
 Mailing Address
 1150 N Glebe Rd Apt 104
 City State Zip Code
 Arlington VA 22201-4750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20420913
 Amount of Each Receipt this Period
 100.00

B. Mr James Lichford
 Full Name (Last, First, Middle Initial)
 Mailing Address
 5501 Seminary Rd Apt 2009
 City State Zip Code
 Falls Church VA 22041-3910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20420933
 Amount of Each Receipt this Period
 100.00

C. Mr & Mrs A C E Phinney
 Full Name (Last, First, Middle Initial)
 Mailing Address
 4520 Phinney Rd
 City State Zip Code
 Mereta TX 76940-9723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20421057
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 33 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr & Mrs Richard W Oertel
 Full Name (Last, First, Middle Initial)
 Mailing Address
 3550 SW Bond Ave Unit 1003
 City State Zip Code
 Portland OR 97239-4716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2012
Transaction ID : 20421113
 Amount of Each Receipt this Period
 125.00

B. Mr Clifford O Perkins
 Full Name (Last, First, Middle Initial)
 Mailing Address
 PO Box 17
 City State Zip Code
 Ava OH 43711-0017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20421335
 Amount of Each Receipt this Period
 225.00

C. Ms Paula Renz
 Full Name (Last, First, Middle Initial)
 Mailing Address
 636 Road 4800
 City State Zip Code
 Hardy NE 68943-8825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20421395
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
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 34 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Mr Charles Logan
 Full Name (Last, First, Middle Initial)
 Mailing Address
 4905 Desert Poppy Dr
 City State Zip Code
 Las Vegas NV 89130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2012
Transaction ID : 20421526
 Amount of Each Receipt this Period
 50.00

B. Mr Darryl Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address
 4204 Emory Rd
 City State Zip Code
 El Paso TX 79922-1236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2012
Transaction ID : 20421702
 Amount of Each Receipt this Period
 100.00

C. Mr Oscar Sida
 Full Name (Last, First, Middle Initial)
 Mailing Address
 15477 Oak Springs Rd
 City State Zip Code
 Chino Hills CA 91709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2012
Transaction ID : 20421964
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 35 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

A. Mr Robert Dalton
Full Name (Last, First, Middle Initial)

Mailing Address Apt D
120 Meadow Lake Dr

City Mooresville State IN Zip Code 46158-1848

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 06 / 2012
Transaction ID : 20422253

Amount of Each Receipt this Period
150.00

B. O V Stewart
Full Name (Last, First, Middle Initial)

Mailing Address
550 E Ann Arbor Ave

City Dallas State TX Zip Code 75216-6718

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20422258

Amount of Each Receipt this Period
500.00

C. Mr Lucious Stevenson Sr
Full Name (Last, First, Middle Initial)

Mailing Address
9741 SE Highway 464C

City Ocklawaha State FL Zip Code 32179

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20422434

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶	775.00
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 36 OF 76
<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 Committee to Preserve Social Security & Medicare PAC

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

Mailing Address
71407 Biskra Rd

City Rancho Mirage State CA Zip Code 92270-4221

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
09 / 04 / 2012
Transaction ID : 20422441

Amount of Each Receipt this Period
175.00

B. Ms Hazel Ivey
Full Name (Last, First, Middle Initial)

Mailing Address
8281 S Placita Del Plantio

City Tucson State AZ Zip Code 85747

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
09 / 13 / 2012
Transaction ID : 20423288

Amount of Each Receipt this Period
150.00

C. Ms Viola Doud
Full Name (Last, First, Middle Initial)

Mailing Address Spc 107
5100 N Highway 99

City Stockton State CA Zip Code 95212-1114

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
09 / 05 / 2012
Transaction ID : 20423546

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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 37 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Dr Norman S Wolf
 Full Name (Last, First, Middle Initial)
 Mailing Address
 7557 35th Ave NE
 City State Zip Code
 Seattle WA 98115-4810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012
Transaction ID : 20423954
 Amount of Each Receipt this Period
 500.00

B. Ms Thea A Pakele
 Full Name (Last, First, Middle Initial)
 Mailing Address
 238 Mala St
 City State Zip Code
 Wahiawa HI 96786-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2012
Transaction ID : 20424469
 Amount of Each Receipt this Period
 500.00

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

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

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	15801.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Federal Election Commission

Mailing Address Attn: Accounting/Finance Office
999 E Street, NW Room 820

City Washington State DC Zip Code 20463

Purpose of Disbursement
CIVIL PENALTY:ADR 615

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2012

Transaction ID : 20345269

Amount of Each Disbursement this Period

7500.00

CIVIL PENALTY:ADR 615

Full Name (Last, First, Middle Initial)

B. DMH MARKETING PARTNERS

Mailing Address 12101 WESTPORT ROAD

City LOUISVILLE State KY Zip Code 40245

Purpose of Disbursement
NO EXPRESS ADVOCACY, POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2012

Transaction ID : 20345270

Amount of Each Disbursement this Period

247.95

NO EXPRESS ADVOCACY, POSTAGE

Full Name (Last, First, Middle Initial)

C. DMH MARKETING PARTNERS

Mailing Address 12101 WESTPORT ROAD

City LOUISVILLE State KY Zip Code 40245

Purpose of Disbursement
NO EXPRESS ADVOCACY, PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

006
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2012

Transaction ID : 20345271

Amount of Each Disbursement this Period

1090.53

NO EXPRESS ADVOCACY, PRINTING

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

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

8838.48

**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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. DMH MARKETING PARTNERS

Mailing Address 12101 WESTPORT ROAD

City LOUISVILLE State KY Zip Code 40245

Purpose of Disbursement
NO EXPRESS ADVOCACY, POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2012

Transaction ID : 20345272

Amount of Each Disbursement this Period

131.40

NO EXPRESS ADVOCACY, POSTAGE

Full Name (Last, First, Middle Initial)

B. DMH MARKETING PARTNERS

Mailing Address 12101 WESTPORT ROAD

City LOUISVILLE State KY Zip Code 40245

Purpose of Disbursement
POSTAGE, NO EXPRESS ADVOCACY

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367334

Amount of Each Disbursement this Period

96.75

POSTAGE, NO EXPRESS ADVOCACY

Full Name (Last, First, Middle Initial)

C. METRICS MEDIA

Mailing Address 24 QUAKER LANE
ATTN: BARBARA CASSIDY

City DOVER State NH Zip Code 03820

Purpose of Disbursement
Prepaid Independent Expenditure

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

004
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367336

Amount of Each Disbursement this Period

352227.00

Prepaid Independent Expenditure

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

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

352455.15

**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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. PERKINS COIE

Mailing Address CLIENT ACCOUNTING
1201 THIRD AVENUE, 40TH FLOOR

City SEATTLE State WA Zip Code 98101-3099

Purpose of Disbursement
LEGAL FEES

Candidate Name

001
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367337

Amount of Each Disbursement this Period

2391.00

LEGAL FEES

Full Name (Last, First, Middle Initial)

B. NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2012

Transaction ID : 20400899

Amount of Each Disbursement this Period

-1095.59

ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2012

Transaction ID : 20400916

Amount of Each Disbursement this Period

-1012.01

ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

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

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

283.40

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. ROY ARAGON

Mailing Address 4817 BROOKWOOD NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement
IN-KIND CONTRIBUTION

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 20400949

Amount of Each Disbursement this Period

1	0	1	2	.	0	1
---	---	---	---	---	---	---

IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ROY ARAGON

Mailing Address 4817 BROOKWOOD NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement
Void - ROY ARAGON

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 20400952

Amount of Each Disbursement this Period

-	1	0	1	.	2	6
---	---	---	---	---	---	---

Void - ROY ARAGON

Full Name (Last, First, Middle Initial)

C. NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	2

Transaction ID : 20429762

Amount of Each Disbursement this Period

-	1	2	1	.	2	6
---	---	---	---	---	---	---

ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

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

-	1	2	1	.	2	6
---	---	---	---	---	---	---

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

-	1	2	1	.	2	6
---	---	---	---	---	---	---

**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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 730 15th Street, NW
DC1-701-02-02, 2nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 20439712

Amount of Each Disbursement this Period

Bank Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. John Tierney for Congress

Mailing Address 133 Washington Street

City Salem State MA Zip Code 01970

Purpose of Disbursement Contribution

011

Candidate Name

JOHN TIERNEY

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2012

Transaction ID : 20323332

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Elizabeth For Ma Inc

Mailing Address PO Box 290568

City Boston State MA Zip Code 02129

Purpose of Disbursement Contribution

011

Candidate Name

Ms. Elizabeth Warren

Category/
Type

Office Sought: House Senate President
State: MA District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2012

Transaction ID : 20323333

Amount of Each Disbursement this Period

3000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Searchlight Leadership Fund

Mailing Address 426 C Street, NE
Rear Building

City Washington State DC Zip Code 20002

Purpose of Disbursement 2012 Calendar Year

011

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337925

Amount of Each Disbursement this Period

1000.00

2012 Calendar Year

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Hirschbiel For Congress

Mailing Address PO Box 8728

City Virginia Beach State VA Zip Code 23450

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Mr. Paul Hirschbiel

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 02

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337927

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Hastings For Congress

Mailing Address P.O. Box 100277

City Ft. Lauderdale State FL Zip Code 33310

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Rep. Alcee L. Hastings

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 23

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337928

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Braley For Congress

Mailing Address PO Box 390

City Waterloo State IA Zip Code 50704

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Mr. Bruce Braley

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337929

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)

<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

Full Name (Last, First, Middle Initial)

A. Ellison For Congress

Mailing Address PO Box 6072

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Keith Ellison

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District: 05

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337930

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Horsford For Congress

Mailing Address 6100 Elton Ave Suite 1000

City Las Vegas State NV Zip Code 89107

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Steven Horsford

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District: 04

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337931

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Chris Murphy

Mailing Address PO Box 127

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Christopher Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337932

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)

<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

Full Name (Last, First, Middle Initial)

A. Pascrell for Congress

Mailing Address 38 Ivy St, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Bill Pascrell

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337933

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Lois Frankel For Congress

Mailing Address P.O. Box 775

City West Palm Beach State FL Zip Code 33402

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Ms. Lois Frankel

Office Sought: House
 Senate
 President
State: FL District: 22

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337934

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Stabenow For Us Senate

Mailing Address P.O. Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Sen. Debbie Stabenow

Office Sought: House
 Senate
 President
State: MI District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : 20337935

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)

<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

Full Name (Last, First, Middle Initial)

A. Montanans For Tester

Mailing Address PO Box 3171

City Billings State MT Zip Code 59103

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Jon Tester

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MT District:

Date of Disbursement

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

Transaction ID : 20337936

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Contribution

Full Name (Last, First, Middle Initial)

B. Bill Owens For Congress

Mailing Address PO Box 1575

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Bill Owens

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

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

Transaction ID : 20337937

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Contribution

Full Name (Last, First, Middle Initial)

C. SCHAKOWSKY FOR CONGRESS

Mailing Address PO Box 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement
Contribution

011

Candidate Name

JAN SCHAKOWSKY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 09

Date of Disbursement

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

Transaction ID : 20337938

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Contribution

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Larson for Congress

Mailing Address c/o 4C Partners, LLC
718 7th Street, NW, Ste 300

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
John Larson

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2012

Transaction ID : 20349112

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Levin for Congress

Mailing Address 209 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Sander Levin

Office Sought: House
 Senate
 President
State: MI District: 12

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2012

Transaction ID : 20349113

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Tim Bishop For Congress

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Mr. Tim Bishop

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2012

Transaction ID : 20349114

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)
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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ROSA DELAURO

Mailing Address 12 Trumbull Street
2nd Floor

City New Haven State CT Zip Code 06511

Purpose of Disbursement
Contribution

Candidate Name

ROSA DELAURO

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349115

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Elizabeth Esty

Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Contribution

Candidate Name

Ms. Elizabeth Esty

Office Sought: House
 Senate
 President
State: CT District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349117

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Marc Veasey Congressional Campaign Committee

Mailing Address PO Box 50084

City Fort Worth State TX Zip Code 76105

Purpose of Disbursement
Contribution

Candidate Name

Mr. Marc Veasey

Office Sought: House
 Senate
 President
State: TX District: 33

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349118

Amount of Each Disbursement this Period

1000.00

Contribution

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

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

3000.00

**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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Mark Pocan For Congress

Mailing Address 309 N Baldwin St

City Madison State WI Zip Code 53703

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Mark Pocan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District: 02

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349119

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Joseph Donnelly

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349120

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
Contribution

011

Candidate Name

Tammy Baldwin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349121

Amount of Each Disbursement this Period

2000.00

Contribution

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. McCaskill For Missouri

Mailing Address PO Box 300077

City St Louis State MO Zip Code 63130

Purpose of Disbursement
Contribution

Candidate Name
Claire McCaskill

Office Sought: House Senate President
State: MO District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349127
Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. Adam Schiff for Congress

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Adam Schiff

Office Sought: House Senate President
State: CA District: 29

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349129
Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C. Loeb sack For Congress

Mailing Address PO Box 3013

City Iowa City State IA Zip Code 52244

Purpose of Disbursement
Contribution

Candidate Name
Rep. David Wayne Loeb sack

Office Sought: House Senate President
State: IA District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349137
Amount of Each Disbursement this Period

Contribution

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Blumenauer for Congress

Mailing Address 830 NE Holladay
#105

City Portland State OR Zip Code 97232

Purpose of Disbursement
Contribution

Candidate Name

Earl Blumenauer

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 20349138

Amount of Each Disbursement this Period

Contribution

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

James Langevin

Office Sought: House
 Senate
 President
State: RI District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 20349139

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C. 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

Office Sought: House
 Senate
 President
State: CT District: 02

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 20349140

Amount of Each Disbursement this Period

Contribution

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Garamendi For Congress

Mailing Address C/O California Political Law, Inc.
3605 Long Beach Blvd., Ste. 426

City Long Beach State CA Zip Code 90807

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. John Garamendi

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349141

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mark Critz For Congress Committee

Mailing Address 647 Main Street
Suite 110

City Johnstown State PA Zip Code 15901

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Mark Critz

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 12

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349143

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Pete Stark Re-Election Committee

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement
Contribution

011

Candidate Name

Pete Stark

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 13

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349145

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)

<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

Full Name (Last, First, Middle Initial)

A. Ron Barber For Congress

Mailing Address PO Box 57715

City Tucson State AZ Zip Code 85732

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Ronald Barber

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349146

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Anna Eshoo for Congress

Mailing Address PO Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement
Contribution

011

Candidate Name

Anna Eshoo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 14

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349147

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Betty Sutton For Congress

Mailing Address PO Box 14693

City Copley State OH Zip Code 44321

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Betty Sutton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 13

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349159

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)

<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

Full Name (Last, First, Middle Initial)

A. Friends of Lois Capps

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Lois Capps

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	2

Transaction ID : 20349164

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Contribution

Full Name (Last, First, Middle Initial)

B. Louise Slaughter Re-Election Committee

Mailing Address P.O. Box 730

City Honeoye State NY Zip Code 14471

Purpose of Disbursement
Contribution

011

Candidate Name

Louise M. Slaughter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 28

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	2

Transaction ID : 20349165

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Contribution

Full Name (Last, First, Middle Initial)

C. Lucille Roybal-Allard for Congress

Mailing Address 6 E Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Lucille Roybal-Allard

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 34

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	2

Transaction ID : 20349166

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Contribution

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

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Bonamici For Congress

Mailing Address 2236 Se 10th Ave

City State Zip Code
Portland OR 97214

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Suzanne Bonamici

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OR District: 01

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349167

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Bera For Congress

Mailing Address Post Office Box 582496

City State Zip Code
Elk Grove CA 95758

Purpose of Disbursement
Contribution

011

Candidate Name

Amerish Bera

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349168

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Kirkpatrick For Arizona

Mailing Address PO Box 12011

City State Zip Code
Casa Grande AZ 85130

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Ann Kirkpatrick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: AZ District: 01

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349170

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)

<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

Full Name (Last, First, Middle Initial)

A. Kuster For Congress, Inc.

Mailing Address P.O. Box 1498

City Concord State NH Zip Code 03302

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Ann Kuster

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NH District: 02

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349175

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Enyart For Congress

Mailing Address PO Box 308

City Belleville State IL Zip Code 62222

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. William Enyart

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 12

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349176

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Bill Foster For Congress Committee

Mailing Address P.O. Box 9104

City Aurora State IL Zip Code 60598

Purpose of Disbursement
Contribution

011

Candidate Name

Bill Foster

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 11

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349177

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)

<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

Full Name (Last, First, Middle Initial)

A. Schneider For Congress

Mailing Address PO Box 1318

City State Zip Code
Deerfield IL 60015

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Bradley Schneider

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349178

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Carol Shea-Porter For Congress

Mailing Address PO Box 453

City State Zip Code
Rochester NH 03866

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Carol Shea-Porter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NH District: 01

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349179

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Cheri Bustos

Mailing Address P.O. Box 77

City State Zip Code
East Moline IL 61244

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Cheri Bustos

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349184

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)

<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

Full Name (Last, First, Middle Initial)

A. Denny Heck For Congress

Mailing Address PO Box 235

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mr. Dennis Heck

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

/ /

Transaction ID : 20349188

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. McDowell For Congress

Mailing Address 10820 Glen Street

City Rudyard State MI Zip Code 49780

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mr. Gary McDowell

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

/ /

Transaction ID : 20349189

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C. Wall For Congress

Mailing Address P.O. Box 1145

City Green Bay State WI Zip Code 54305

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mr. James Wall

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District: 08

Date of Disbursement

/ /

Transaction ID : 20349193

Amount of Each Disbursement this Period

Contribution

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Team Emerson For Jo Ann Emerson

Mailing Address P.O. Box 822
400 Broadway, Suite 501

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Jo Ann Emerson

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349194

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ocegüera For Congress

Mailing Address 3259 E. Warm Springs Road

City Las Vegas State NV Zip Code 89120

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. John Ocegüera

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349195

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jose Hernandez For Congress

Mailing Address PO Box 1667

City Modesto State CA Zip Code 95353

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Jose Hernandez

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349199

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)

<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

Full Name (Last, First, Middle Initial)

A. Healy-Abrams For Congress

Mailing Address 2548 Glenmont Road Nw

City State Zip Code
Canton OH 44708

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Joyce Healy-Abrams

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 07

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349200

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Julia Brownley For Congress

Mailing Address 728 W. Edna Place

City State Zip Code
Covina CA 91722

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Julia Brownley

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349201

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Boockvar For Congress

Mailing Address 73 Old Dublin Pike
Suite 10 #134

City State Zip Code
Doylestown PA 18901

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Kathryn Boockvar

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349202

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)

Form with checkboxes for line numbers 21b through 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Mark Takano For Congress

Mailing Address 728 W. Edna Place

City Covina State CA Zip Code 91722

Purpose of Disbursement Contribution

Category/Type: 011

Candidate Name

Mr. Mark Takano

Office Sought: [X] House [] Senate [] President

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

State: CA District: 41

Date of Disbursement

Date: 09 / 18 / 2012

Transaction ID : 20349203

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Committee To Elect Michelle Lujan Grisham

Mailing Address 2015 Dietz Pl Nw

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement Contribution

Category/Type: 011

Candidate Name

Ms. Michelle Grisham

Office Sought: [X] House [] Senate [] President

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

State: NM District: 01

Date of Disbursement

Date: 09 / 18 / 2012

Transaction ID : 20349204

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Lampson For Congress

Mailing Address PO Box 21500

City Beaumont State TX Zip Code 77720

Purpose of Disbursement Contribution

Category/Type: 011

Candidate Name

Mr. Nicholas Lampson

Office Sought: [X] House [] Senate [] President

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

State: TX District: 14

Date of Disbursement

Date: 09 / 18 / 2012

Transaction ID : 20349205

Amount of Each Disbursement this Period

1000.00

Contribution

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

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

3000.00

**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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Patrick Murphy

Mailing Address 4521 Pga Blvd. #412

City State Zip Code
Palm Beach Gardens FL 33418

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Patrick Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 18

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349206

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Pete Gallego

Mailing Address PO Box 1781

City State Zip Code
San Antonio TX 78296

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Pete Gallego

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349207

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Duckworth For Congress

Mailing Address P.O. Box 59568

City State Zip Code
Schaumburg IL 60159

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. L. Tammy Duckworth

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349208

Amount of Each Disbursement this Period

1000.00

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)
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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Val Demings For Congress

Mailing Address P.O. Box 536926

City Orlando State FL Zip Code 32853

Purpose of Disbursement
Contribution

011

Candidate Name

Valdez Demings

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349210

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Angus King For Us Senate Campaign

Mailing Address 135 Maine Street
PO Box 368

City Brunswick State ME Zip Code 04011

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Angus King

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349211

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Heidi For Senate

Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
Contribution

011

Candidate Name

Ms. Heidi Heitkamp

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ND District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349215

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 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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Martin Heinrich For Senate

Mailing Address P.O. Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement Contribution

011

Candidate Name

Mr. Martin Heinrich

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349216

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Bill Nelson for U.S. Senate

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Bill Nelson

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: FL District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349217

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends of Sherrod Brown

Mailing Address 328 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Sherrod Brown

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349218

Amount of Each Disbursement this Period

3000.00

Contribution

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. DEFAZIO FOR CONGRESS

Mailing Address 228 Second Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

PETER DEFAZIO

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: OR District: 04

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349219

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Steve Israel for Congress

Mailing Address 300 1/2 F Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Steve Israel

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: NY District: 02

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349220

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Becerra for Congress Committee

Mailing Address PO Box 116

City Hyattsville State MD Zip Code 20781-0116

Purpose of Disbursement Contribution

011

Candidate Name

Xavier Becerra

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 31

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : 20349221

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)

<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

Full Name (Last, First, Middle Initial)

A. Heidi For Senate

Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Ms. Heidi Heitkamp

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ND District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	2

Transaction ID : 20367341

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Mr. Joseph Donnelly

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	2

Transaction ID : 20367342

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Friends Of Mazie Hirono

Mailing Address PO Box 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Ms. Mazie Hirono

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	2

Transaction ID : 20367343

Amount of Each Disbursement this Period

2	0	0	0	.	0	0
---	---	---	---	---	---	---

CONTRIBUTION

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

5	5	0	0	.	0	0
---	---	---	---	---	---	---

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

5	5	0	0	.	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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Berkley For Senate

Mailing Address 7437 S Eastern Ave Suite 427

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Ms. Shelley Berkley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367344

Amount of Each Disbursement this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Tammy Baldwin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367345

Amount of Each Disbursement this Period

3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Kaine For Virginia

Mailing Address 2106 Hamilton Street Suite C

City Richmond State VA Zip Code 23230

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Mr. Timothy Kaine

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367346

Amount of Each Disbursement this Period

3500.00

CONTRIBUTION

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

9000.00

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Friends of Sherrod Brown

Mailing Address 328 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Sherrod Brown

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367347

Amount of Each Disbursement this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Pete Stark Re-Election Committee

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Pete Stark

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 20367450

Amount of Each Disbursement this Period

3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Betty Sutton For Congress

Mailing Address PO Box 14693

City Copley State OH Zip Code 44321

Purpose of Disbursement
IN-KIND CONTRIBUTION

011

Candidate Name

Ms. Betty Sutton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 13

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2012

Transaction ID : 20400915

Amount of Each Disbursement this Period

1095.59

IN-KIND CONTRIBUTION

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

6095.59

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 Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Pete Gallego

Mailing Address PO Box 1781

City San Antonio State TX Zip Code 78296

Purpose of Disbursement
IN-KIND CONTRIBUTION

011

Category/
Type

Candidate Name

Mr. Pete Gallego

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

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

Transaction ID : 20400922

Amount of Each Disbursement this Period

1	0	1	2	.	0	1
---	---	---	---	---	---	---

IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Friends Of Mazie Hirono

Mailing Address PO Box 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement
IN-KIND CONTRIBUTION

011

Category/
Type

Candidate Name

Ms. Mazie Hirono

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	2

Transaction ID : 20429782

Amount of Each Disbursement this Period

1	2	1	9	.	2	6
---	---	---	---	---	---	---

IN-KIND CONTRIBUTION

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

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

2	2	3	1	.	2	7
---	---	---	---	---	---	---

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

1	2	8	8	2	6	.	8	6
---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. USAction

Mailing Address 1825 K Street, NW, Suite 210

City Washington State DC Zip Code 20006

Purpose of Disbursement
2012 Annual Leadership Awards

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

012

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 24 / 2012

Transaction ID : 20360339

Amount of Each Disbursement this Period

1000.00

2012 Annual Leadership Awards

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1000.00

1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 75 OF 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Committee to Preserve Social Security & Medicare PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NCPSSM	Nature of Debt (Purpose): POSTAGE, IE DISSEMINATION 08/08/12
Mailing Address 10 G STREET, NE, SUITE 600	
City State Zip Code WASHINGTON DC 20002	

Outstanding Balance Beginning This Period <input type="text" value="792.32"/>	Transaction ID : 20447144	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="792.32"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NCPSSM	Nature of Debt (Purpose): PHOTOCOPY, IE DISSEMINATION 08/08/12
Mailing Address 10 G STREET, NE, SUITE 600	
City State Zip Code WASHINGTON DC 20002	

Outstanding Balance Beginning This Period <input type="text" value="61.90"/>	Transaction ID : 20447145	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="61.90"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Committee to Preserve Social Security & Medicare PAC	FEC IDENTIFICATION NUMBER ▼ C C00172296
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee NCPSSM		Date MM / DD / YYYY 09 / 12 / 2012
Mailing Address 10 G Street, NE Suite 600		Amount 792.32
City Washington	State DC	Zip Code 20002
Purpose of Expenditure POSTAGE- IE DISSEMINATION 08/08/2012	Category/ Type 001	Transaction ID : 20445474
Name of Federal Candidate Supported or Opposed by Expenditure: Tarryl Clark		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 792.32		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee NCPSSM		Date MM / DD / YYYY 09 / 12 / 2012
Mailing Address 10 G Street, NE Suite 600		Amount 61.90
City Washington	State DC	Zip Code 20002
Purpose of Expenditure Photocopy- IE DISSEMINATION 08/08/2012	Category/ Type 006	Transaction ID : 20445476
Name of Federal Candidate Supported or Opposed by Expenditure: Tarryl Clark		Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 854.22		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	854.22
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	854.22

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Christine Kim
[Electronically Filed]
Date

Signature MM / DD / YYYY
10 / 17 / 2012