

**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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)			
ADDRESS (number and street)		606 NORTH WASHINGTON STREET	
<input type="checkbox"/>	Check if different than previously reported. (ACC)	ALEXANDRIA	VA 22314-1914
2. FEC IDENTIFICATION NUMBER ▼		CITY ▲	STATE ▲ ZIP CODE ▲
C C00091561			
3. IS THIS REPORT		<input checked="" type="checkbox"/> NEW (N) OR	<input type="checkbox"/> AMENDED (A)
4. TYPE OF REPORT (Choose One)			
(a) Quarterly Reports:		(b) Monthly Report Due On:	
<input type="checkbox"/>	April 15 Quarterly Report (Q1)	<input type="checkbox"/>	Feb 20 (M2)
<input checked="" type="checkbox"/>	July 15 Quarterly Report (Q2)	<input type="checkbox"/>	May 20 (M5)
<input type="checkbox"/>	October 15 Quarterly Report (Q3)	<input type="checkbox"/>	Aug 20 (M8)
<input type="checkbox"/>	January 31 Year-End Report (YE)	<input type="checkbox"/>	Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/>	July 31 Mid-Year Report (Non-election Year Only) (MY)	<input type="checkbox"/>	Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/>	Termination Report (TER)	<input type="checkbox"/>	Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:		<input type="checkbox"/>	Primary (12P)
		<input type="checkbox"/>	General (12G)
		<input type="checkbox"/>	Runoff (12R)
		<input type="checkbox"/>	Convention (12C)
		<input type="checkbox"/>	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:		<input type="checkbox"/>	General (30G)
		<input type="checkbox"/>	Runoff (30R)
		<input type="checkbox"/>	Special (30S)
Election on		M M M / D D D / Y Y Y Y Y Y	in the State of
5. Covering Period			
04 / 01 / 2014		06 / 30 / 2014	
through			

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

Type or Print Name of Treasurer Mr. RICHARD THISSEN

Signature of Treasurer Mr. RICHARD THISSEN

[Electronically Filed]

Date

07 / 15 / 2014

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		285548.56
(b) Cash on Hand at Beginning of Reporting Period.....	397734.48	
(c) Total Receipts (from Line 19)	70705.74	269142.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	468440.22	554690.87
7. Total Disbursements (from Line 31)	89772.87	176023.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	378667.35	378667.35
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2014

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

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).....

7790.00

16690.00

(ii) Unitemized

62655.71

252052.14

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

70445.71

268742.14

(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)

70445.71

268742.14

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).....

165.00

165.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

95.03

235.17

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))..... ▶

70705.74

269142.31

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

70705.74

269142.31

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	45272.87	51023.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45272.87	51023.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44500.00	125000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	89772.87	176023.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	89772.87	176023.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	70445.71	268742.14
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70445.71	268742.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	45272.87	51023.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	165.00	165.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	45107.87	50858.52

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Mr. LOUIS K BANGMA

Mailing Address 350 WINDERMERE BLVD

City

ALEXANDRIA

State

LA

Zip Code

71303-3554

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12963

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. JAMES B BELL

Mailing Address 3200 LAKE JOHANNA BLVD
APT 173

City

ARDEN HILLS

State

MN

Zip Code

55112-7944

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12991

Amount of Each Receipt this Period

240.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. MR BRUCE A BENNETT

Mailing Address 544 PACIFIC ST
#211

City

SAN LUIS OBISPO

State

CA

Zip Code

93401

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12967

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

790.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 35

(check only one)

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Mr. ROBERT J BINDER

Mailing Address 2118 EDENTON DRIVE

City

FORT WAYNE

State

IN

Zip Code

46804-5830

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12997

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. JOHN BRODERICK

Mailing Address 21252 CAVE BAY ROAD

City

WORLEY

State

ID

Zip Code

83876

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12980

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Mr. JOHN B CURRY

Mailing Address 512 TELLURIDE DR

City

WACO

State

TX

Zip Code

76712-8770

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12976

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

600.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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PAGE 8 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Ms PATRICIA D EKLUND

Mailing Address 36 WHITE OAK WAY

City
NOVATO

State
CA

Zip Code
94949-7227

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12972

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. CARL F ENGLERTH

Mailing Address 829 TIMBER DR

City

NEW BRAUNFELS

State

TX

Zip Code

78130-6628

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12974

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. ANDREW M FINDLAY

Mailing Address 2500 TAYLOR AVE

City

ALEXANDRIA

State

VA

Zip Code

22302-2905

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12982

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

600.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) A. WALEED K GOSAYNIE</p> <p>Mailing Address 402 WEST 31ST ST</p> <p>City State Zip Code HOLLAND MI 49423-6956</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : SA11AI.12960</p> <p>Amount of Each Receipt this Period 300.00</p> <p>CONTRIBUTION</p>		
<p>Full Name (Last, First, Middle Initial) B. WAYNE HAMMER</p> <p>Mailing Address 8217 TRANQUIL DR</p> <p>City State Zip Code SPRING HILL FL 34606-6530</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : SA11AI.12985</p> <p>Amount of Each Receipt this Period 200.00</p> <p>CONTRIBUTION</p>		
<p>Full Name (Last, First, Middle Initial) C. Mr. THOMAS N HOBGOOD Jr.</p> <p>Mailing Address 5612 DEBLYN AVENUE</p> <p>City State Zip Code RALEIGH NC 27612-2606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2014 Transaction ID : SA11AI.12993</p> <p>Amount of Each Receipt this Period 220.00</p> <p>CONTRIBUTION</p>		
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>720.00</p>		
<p>TOTAL This Period (last page this line number only)..... ▶</p>			<p></p>		

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PAUL HUDAK

Mailing Address 2 SWALLOW LN

City

BELLAVISTA

State

AZ

Zip Code

72714-3238

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12999

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. FRANK L HUNTSMAN

Mailing Address PO BOX 1359

City

EVERGREEN

State

CO

Zip Code

80437-1359

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12966

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Mr. STEPHEN HUZA

Mailing Address 7340 MOSSY BRINK CT

City

COLUMBIA

State

MD

Zip Code

21045-5009

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12989

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

700.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 11 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LYLE E JENSEN

Mailing Address 1817 SW ATHENS AVE

City
PENDLETON

State Zip Code
OR 97801-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12968

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. CAROLYN S KLEIN

Mailing Address 23445 WATER CIR

City
BOCA RATON

State Zip Code
FL 33486-8548

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12971

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Mr. VANCE J KLEIN

Mailing Address 23445 WATER CIR

City
BOCA RATON

State Zip Code
FL 33486-8548

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12961

Amount of Each Receipt this Period

300.00

CONTRIBUTION

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

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

750.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. STEPHEN KLINE

Mailing Address P. O. BOX 51 1166

City
PUNTA GORDA

State Zip Code
FL 33951-1166

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12962

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. ARTHUR G LEMKE

Mailing Address 4557 KIRKWOOD CIRCLE

City
SAINT PAUL

State Zip Code
MN 55123-1909

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12988

Amount of Each Receipt this Period

270.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Mr. DAVID LINDELL

Mailing Address 410 E BODINE AVE

City
CLINTON

State Zip Code
MO 64735

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.13001

Amount of Each Receipt this Period

200.00

CONTRIBUTION

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

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

770.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. Mr. JOHN W LOTZ

Mailing Address 26748 PRESTON PLACE DR

City State Zip Code
 ABINGDON VA 24211

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.13002

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. PETER MARIOLIS

Mailing Address 2997 FRAZIER COURT

City State Zip Code
 DECATUR GA 30033

FEC ID number of contributing
federal political committee.

C

Name of Employer

DEPT OF HEALTH & HUMAN

Occupation

DEPT OF HEALTH & HUMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12964

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Ms CYNTHIA MAZUR

Mailing Address 400 MADISON ST
 APT 2006

City State Zip Code
 ALEXANDRIA VA 22314-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12969

Amount of Each Receipt this Period

210.00

CONTRIBUTION

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

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

710.00

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

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

FOR LINE NUMBER: PAGE 14 OF 35
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. RAYMOND MEYER

Mailing Address 3411 SLADE CT

City

FALLS CHURCH

State

VA

Zip Code

22042-3918

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12986

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. DAVID H MOULTON

Mailing Address 186 HARMONY LANE

City

MILLERS CREEK

State

NC

Zip Code

28651-8693

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12983

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Mr. GORDON K RIEL

Mailing Address 1210 BAY VIEW CT

City

EDGEWATER

State

MD

Zip Code

21037-4313

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11AI.12957

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

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

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

1400.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 35

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)
A. Mr. CLIFFORD K TAMANAHA

Mailing Address 7324 NUULOLO ST

City
HONOLULU

State Zip Code
HI 96825-2540

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12996

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. Mr. TERRY WAMBAUGH

Mailing Address 48 KINGSBURY CIR

City
CROSSVILLE

State Zip Code
TN 38558

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12959

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. Mr. HENRY O WHITNEY

Mailing Address 1209 BLUEBELL LN

City
CUSTER

State Zip Code
SD 57730-2455

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.12994

Amount of Each Receipt this Period

250.00

CONTRIBUTION

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

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

750.00

7790.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 35

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. INTERNAL REVENUE SERVICE CENTER

Mailing Address PHILADELPHIA

City State Zip Code
 PHILADELPHIA PA 19255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 28 / 2014

Transaction ID : SA15.12902

Amount of Each Receipt this Period

140.00

Refund on Income tax IRS

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPARTMENT OF TAXATION

Mailing Address POST OFFICE BOX1500

City State Zip Code
 RICHMOND VA 23218-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : SA15.12903

Amount of Each Receipt this Period

25.00

Refund on Income tax VA

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

165.00

165.00

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

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

FOR LINE NUMBER: PAGE 17 OF 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. NARFE PREMIER FEDERAL CREDIT UNION

Mailing Address 6462 LITTLE RIVER TURNPIKE

City	State	Zip Code
ALEXANDRIA	VA	22312-1444

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

186.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA17.12889

Amount of Each Receipt this Period

46.74

INTEREST INCOME

Full Name (Last, First, Middle Initial)

B. NARFE PREMIER FEDERAL CREDIT UNION

Mailing Address 6462 LITTLE RIVER TURNPIKE

City	State	Zip Code
ALEXANDRIA	VA	22312-1444

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2014

Transaction ID : SA17.12905

Amount of Each Receipt this Period

48.29

INTEREST INCOME

Full Name (Last, First, Middle Initial)

C.

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)..... ►

95.03

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

95.03

<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

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

A. BANK OF AMERICA

Category/
Type

568.41

State: District:

B. BANK OF AMERICA

04 / 01 / 2014

Category/
Type

333.01

State: District:

C. BANK OF AMERICA

Category/
Type

614.79

State: District:

1516.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2014

Transaction ID : SB21B.12892

Amount of Each Disbursement this Period

1099.88

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2014

Transaction ID : SB21B.12908

Amount of Each Disbursement this Period

687.07

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : SB21B.12907

Amount of Each Disbursement this Period

387.51

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

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

2174.46

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL PROCESSORS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		17		2014

Mailing Address 1150 CONRAD COURT

City	State	Zip Code
HAGERSTOWN	MD	21740

Purpose of Disbursement
LOCKBOX CHARGES

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : SB21B.12895

Amount of Each Disbursement this Period

859.06

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

Mailing Address 1150 CONRAD COURT

City	State	Zip Code
HAGERSTOWN	MD	21740

Purpose of Disbursement
PO BOX/PERMIT FEES

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : SB21B.12896

Amount of Each Disbursement this Period

3341.00

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2014

Mailing Address 1150 CONRAD COURT

City	State	Zip Code
HAGERSTOWN	MD	21740

Purpose of Disbursement
LOCKBOX CHARGES

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : SB21B.12909

Amount of Each Disbursement this Period

114.23

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

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

4314.29

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ENVELOPES UNLIMITED

Mailing Address 649 NORTH HORNERS LANE

City	State	Zip Code
ROCKVILLE	MD	20850-1299

Purpose of Disbursement
STORAGE FEES

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Transaction ID : SB21B.12898

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. ENVELOPES UNLIMITED

Mailing Address 649 NORTH HORNERS LANE

City	State	Zip Code
ROCKVILLE	MD	20850-1299

Purpose of Disbursement
STORAGE FEES

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		17		2014

Transaction ID : SB21B.13005

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. JOHN HATTON

Mailing Address 606 N WASHINGTON STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
PAC DCCC CONFERENCE TRAVEL

003

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : SB21B.12913

Amount of Each Disbursement this Period

733.24

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

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

833.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. RR DONNELLEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		15		2014

Mailing Address PO BOX 905151

City	State	Zip Code
CHARLOTTE	NC	28290

Transaction ID : SB21B.12897Purpose of Disbursement
PRINTING PAC COVER WRAPS

003

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

22907.45

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. THE AD ANSWER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2014

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City	State	Zip Code
ROCKVILLE	MD	20852

Transaction ID : SB21B.12894Purpose of Disbursement
HATS

003

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

339.19

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. THE AD ANSWER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City	State	Zip Code
ROCKVILLE	MD	20852

Transaction ID : SB21B.13006Purpose of Disbursement
HATS

003

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

9523.27

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

32769.91

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. THE AD ANSWERMailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement
HATS

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2014

Transaction ID : SB21B.13004

Amount of Each Disbursement this Period

2211.56

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) ▼

Date of Disbursement

M M M	/	D 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) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2211.56

45229.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. AIMEE BELGARD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address PO BOX 35

City	State	Zip Code
WILLINGBORO	NJ	08046

Transaction ID : SB23.12917

Purpose of Disbursement
CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

AIMEE BELGARD

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NJ District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

B. ALISON FOR KENTUCKYMailing Address 236 MASSACHUSETTS AVE NE
SUITE 207

City	State	Zip Code
WASHINGTON	DC	20002

Transaction ID : SB23.12940

Purpose of Disbursement
CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

ALISON LUNDERGAN GRIMES

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

C. A WHOLE LOT OF PEOPLE FOR GRIJALVA

Mailing Address P.O. BOX 1242

City	State	Zip Code
TUCSON	AZ	85702

Transaction ID : SB23.12936

Purpose of Disbursement
CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

Rep. RAUL M GRIJALVA

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AZ District: 07

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

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BRALEY FOR IOWAMailing Address C/O 4C PARTNERS LLC
501 3RD STREET NW STE 210

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BRUCE BRALEY

Office Sought: ☒ House
☐ Senate
☐ President
State: IA District: 01Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SB23.12924

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address PO BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CAROL SHEA-PORTER

Office Sought: ☒ House
☐ Senate
☐ President
State: NH District: 01Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SB23.12948

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR ELEANOR HOLMES NORTONMailing Address 499 S CAPITOL ST SW
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Rep. ELEANOR HOLMES-NORTON

Office Sought: ☒ House
☐ Senate
☐ President
State: DC District: 00Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SB23.12937

Amount of Each Disbursement this Period

1000.00

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

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

5000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT ALAN GRAYSON

Mailing Address 228 SECOND STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

ALAN MARK GRAYSON

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2014

Transaction ID : SB23.12915

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT CONGRESSMAN CHRIS SMITH

Mailing Address PO BOX 3184

City
HAMILTONState
NJZip Code
08619Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. CHRISTOPHER H SMITH

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

Transaction ID : SB23.12929

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CROWLEY FOR CONGRESSMailing Address 410 1ST STREET SE
SUITE 310City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. JOSEPH CROWLEY

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SB23.12931

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CUMMINGS FOR CONGRESSMailing Address 2901 DRUID PARK DRIVE
SUITE 203

City BALTIMORE State MD Zip Code 21215

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ELIJAH E CUMMINGS

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SB23.12928

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DENNY HECK FOR CONGRESSMailing Address 233 PENNSYLVANIA AVE SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DENNIS HECK

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SB23.12954

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DONNA EDWARDS FOR CONGRESS

Mailing Address PO Box 441153

City FORT WASHINGTON State MD Zip Code 20749-1153

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DONNA EDWARDS

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SB23.12927

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DUTCH RUPPERSBERGER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

Mailing Address 499 S CAPITOL STREET SW
STE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Rep. DUTCH RUPPERSBERGER

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 02

Transaction ID : SB23.12926

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. ERIN BILBRAY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2014

Mailing Address 236 MASSACHUSETTS AVE NE
SUITE 602

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

ERIN BILBRAY

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 03

Transaction ID : SB23.12951

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DICK DURBIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2014

Mailing Address 236 MASSACHUSETTS AVE NE
SUITE 202

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Sen. RICHARD J DURBIN

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID : SB23.12939

Amount of Each Disbursement this Period

3000.00

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

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

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MARY LANDRIEU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Mailing Address 10 G ST NE
SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

MARY L LANDRIEU

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 00

Transaction ID : SB23.12943

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. HOYER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address 499 S CAPITOL STREET
STE 414

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Rep. STENY HOYER

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 05

Transaction ID : SB23.12916

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. JEFF MERKLEY FOR OREGON

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address 328 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

JEFFREY ALAN MERKLEY

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 00

Transaction ID : SB23.12920

Amount of Each Disbursement this Period

3000.00

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

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

8000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KATHLEEN RICE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Mailing Address 410 1ST STREET SE
#310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Transaction ID : SB23.12932

Amount of Each Disbursement this Period

1000.00

Candidate Name

KATHLEEN RICE

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 04

Full Name (Last, First, Middle Initial)

B. KEEP NICK RAHALL IN CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Mailing Address P O BOX 75214

City WASHINGTON State DC Zip Code 20013-5214

Purpose of Disbursement
CONTRIBUTION

011

Transaction ID : SB23.12956

Amount of Each Disbursement this Period

1000.00

Candidate Name

NICK RAHALL

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: WV District: 03

Full Name (Last, First, Middle Initial)

C. LOBIONDO FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

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

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONTRIBUTION

011

Transaction ID : SB23.12949

Amount of Each Disbursement this Period

2500.00

Candidate Name

Rep. FRANK A, LOBIONDO

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 02

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

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

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MIKE THOMPSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Mailing Address 236 MASSACHUSETTS AVE NE
SUITE 603

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. MIKE THOMPSON

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 01

Transaction ID : SB23.12923

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. MONTANANS FOR LEWIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Mailing Address 410 1ST ST SE
#310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

JOHN LEWIS

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District: 00

Transaction ID : SB23.12944

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR DEREK KILMER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Mailing Address PO BOX 1574

City GIG HARBOR State WA Zip Code 98335

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

DEREK KILMER

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 06

Transaction ID : SB23.12955

Amount of Each Disbursement this Period

2000.00

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

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

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 35

<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

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

NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ROB WITTMAN FOR CONGRESS

Mailing Address PO BOX 999

City	State	Zip Code
MONTROSS	VA	22520

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROBERT J WITTMAN

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SB23.12930

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RON BARBER FOR CONGRESSMailing Address C/O MOLLY ALLEN ASSOCIATES LLC
412 FIRST ST SE STE 100

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RONALD BARBER

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : SB23.12935

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCHNEIDER FOR CONGRESS

Mailing Address 3701 PORTER ST NW

City	State	Zip Code
WASHINGTON	DC	20016

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BRADLEY SCOTT SCHNEIDER

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : SB23.12925

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 35

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. TULSI FOR HAWAII

Mailing Address PO BOX 75561

City
KAPOLEIState
HIZip Code
96907Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

TULSI GABBARD

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: HI District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SB23.12938

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. WALSH FOR MONTANAMailing Address 2201 I ST NE
SUITE 250City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

JOHN E WALSH

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: MT District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : SB23.12945

Amount of Each Disbursement this Period

1000.00

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2000.00

44500.00