

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

Check if different than previously reported. (ACC) ALEXANDRIA VA 22314-1914

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00091561

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) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / 2013 through / / 2013

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 / / 2013

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: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		<input type="text" value="352114.61"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="352114.61"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="281672.21"/>	<input type="text" value="281672.21"/>
(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="633786.82"/>	<input type="text" value="633786.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="307350.94"/>	<input type="text" value="307350.94"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="326435.88"/>	<input type="text" value="326435.88"/>
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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22277.00	22277.00
(ii) Unitemized	258987.28	258987.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	281264.28	281264.28
(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)	281264.28	281264.28
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).....	93.00	93.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	314.93	314.93
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))..... ▶	281672.21	281672.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	281672.21	281672.21

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	181350.94	181350.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	181350.94	181350.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	126000.00	126000.00
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)) ..	307350.94	307350.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	307350.94	307350.94

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)	281264.28	281264.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	281264.28	281264.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	181350.94	181350.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	93.00	93.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	181257.94	181257.94

**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 63
	<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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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. EARL F ALDON

Mailing Address 2937 SANTA CRUZ SE

City	State	Zip Code
ALBUQUERQUE	NM	87106

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.12417

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. Mr. CARL W ANDERSON

Mailing Address 290 GUNDRY DR

City	State	Zip Code
FALLS CHURCH	VA	22046

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : SA11AI.12422

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. Mr. LOUIS K BANGMA

Mailing Address 350 WINDERMERE BLVD

City	State	Zip Code
ALEXANDRIA	LA	71303-3554

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : SA11AI.12258

Amount of Each Receipt this Period
 300.00

CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. Mr. LOUIS K BANGMA
 Full Name (Last, First, Middle Initial)
 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
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12392
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. Mr. MICHAEL F BARTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 JOSEPHINE ST
 City DENVER State CO Zip Code 80206-3722
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12267
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. JAMES B BELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 609 ALLEGHANY ST
 City BLACKSBURG State VA Zip Code 24060-5010
 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
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12433
 Amount of Each Receipt this Period
 240.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	740.00
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 8 OF 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MR BRUCE A BENNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 526 SOUTH STREET #E
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12393
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. MR STEPHEN C BENTLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 S 22ND STREET
 City ARLINGTON State VA Zip Code 22202-2721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12272
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. WILLIAM C BESSELIEVRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5032 HICKORY PLACE
 City CHEYENNE State WY Zip Code 82009-5129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12425
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. WILLIAM BRINEY		Date of Receipt
Mailing Address 1406 HIGHLAND		M M / D D / Y Y Y Y Y Y 03 / 31 / 2013
City	State	Zip Code
ROSWELL	NM	88201-2147
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.12275
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		200.00
Name of Employer		CONTRIBUTION
RETIRE	Occupation	
RETIRE	RETIRE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		200.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. JOHN J BRODERICK		Date of Receipt
Mailing Address 4940 CENTERWOOD ST		M M / D D / Y Y Y Y Y Y 06 / 30 / 2013
City	State	Zip Code
LAKE OSWEGO	OR	97035
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.12427
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		200.00
Name of Employer		CONTRIBUTION
RETIRE	Occupation	
RETIRE	RETIRE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		200.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JAMES B CARPENTER		Date of Receipt
Mailing Address 11611 MARBLE ARCH DR		M M / D D / Y Y Y Y Y Y 03 / 31 / 2013
City	State	Zip Code
SANTA ANA	CA	92705-2916
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.12283
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		250.00
Name of Employer		CONTRIBUTION
RETIRE	Occupation	
RETIRE	RETIRE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		250.00
<input type="checkbox"/> Other (specify) ▼		

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: (check only one)	PAGE 10 OF 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. BRUCE P CHAMBERS
Full Name (Last, First, Middle Initial)
Mailing Address 2453 W CRESTVIEW
City ROSEBURG State OR Zip Code 97470
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 31 / 2013
Transaction ID : SA11AI.12254
Amount of Each Receipt this Period 500.00
CONTRIBUTIONS

B. Late Jacquelyn D Clark
Full Name (Last, First, Middle Initial)
Mailing Address c/o Theodore A. Erk
945 East Paces Ferry Rd # 2220
City Atlanta State GA Zip Code 30326
FEC ID number of contributing federal political committee. **C**
Name of Employer Deceased Occupation Deceased
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 01 / 02 / 2013
Transaction ID : SA11AI.12203
Amount of Each Receipt this Period 5000.00
Bequest

C. Mr. RICHARD G COCHRAN
Full Name (Last, First, Middle Initial)
Mailing Address 1530 ELLIOTT DR
City VALLEJO State CA Zip Code 94589-1512
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 03 / 31 / 2013
Transaction ID : SA11AI.12261
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **5750.00**
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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mr. CHARLES M CROCKER Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 230 SPRING VALLEY CT SW
 City HUNTSVILLE State AL Zip Code 35802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US AIRFORCE Occupation US AIRFORCE
 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
 06 / 30 / 2013
Transaction ID : SA11AI.12390
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

B. Mr. RAY DAMESEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1187 E LA LOMA AVE
 City SOMIS State CA Zip Code 93066-9722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12255
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTIONS

C. Mrs. JANIS S DETTERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 713 SENZ ROAD
 City SEQUIM State WA Zip Code 98382-7906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12260
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Mrs. JANIS S DETTERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 713 SENZ ROAD
 City SEQUIM State WA Zip Code 98382-7906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12409
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. CAROL R EK
 Full Name (Last, First, Middle Initial)
 Mailing Address 907 SYCAMORE PL
 City MCPHERSON State KS Zip Code 67460-5804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12442
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. ANTHONY FILARDI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2124 PARKLYN ST
 City PITTSBURGH State PA Zip Code 15234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12420
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. Mr. EDWARD E FLECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4614 PLAYER COURT
 City TAMPA State FL Zip Code 33624-4517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12259
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTIONS

B. Mr. EDWARD E FLECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4614 PLAYER COURT
 City TAMPA State FL Zip Code 33624-4517
 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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12396
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Ms HELEN W GJESSING
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 301844
 City ST THOMAS State VI Zip Code 00803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12398
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mr. CHARLES A GUERIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 HAMPTON PL
 City POMPTON PLAINS State NJ Zip Code 07444
 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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12410
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. GLEN B HALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 SE 2 ST #122
 City HALLANDALE State FL Zip Code 33009-5613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12382
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. WAYNE HAMMER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8217 TRANQUIL DR
 City SPRING HILL State FL Zip Code 34606-6530
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12277
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. Mr. ROBERT L HELFRICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6717 REVERE LN
 City INDIANAPOLIS State IN Zip Code 46237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNITED POSTAL SERVICE Occupation UNITED POSTAL SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12400
 Amount of Each Receipt this Period
 295.00
 CONTRIBUTION

B. Mr. JAMES L HENDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3007 BERRYWOOD DR
 City HUMBOLDT State TN Zip Code 38343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12443
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. THOMAS N HOBGOOD Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5612 DEBLYN AVENUE
 City RALEIGH State NC Zip Code 27612-2606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12408
 Amount of Each Receipt this Period
 222.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	717.00
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 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. FRANK L HUNTSMAN
 Full Name (Last, First, Middle Initial)
 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 General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12397

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

B. Mr. WILLIAM JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 98

City NUTRIOSO	State AZ	Zip Code 85932
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12384

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Mr. DENNIS JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4876 GLEN ISLE DR

City LOVELAND	State CO	Zip Code 80538-6208
------------------	-------------	------------------------

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 / 2013
Transaction ID : SA11AI.12407

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. Mr. LOUIS J JURUS		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		30		2013
M M	/	D D	/	Y Y Y Y								
06		30		2013								
Mailing Address 3745 MT AUGUSTUS AVE		Transaction ID : SA11Al.12438										
City SAN DIEGO	State CA	Zip Code 92111-3843										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00										
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00											

Full Name (Last, First, Middle Initial) B. Mr. RAYMOND S KENDALL Jr.		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		30		2013
M M	/	D D	/	Y Y Y Y								
06		30		2013								
Mailing Address 116 GRANDCOVE LANE		Transaction ID : SA11Al.12445										
City OAKRIDGE	State TN	Zip Code 37830-5636										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.00										
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00											

Full Name (Last, First, Middle Initial) C. STEPHEN KLINE		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		30		2013
M M	/	D D	/	Y Y Y Y								
06		30		2013								
Mailing Address P. O. BOX 51 1166		Transaction ID : SA11Al.12388										
City PUNTA GORDA	State FL	Zip Code 33951-1166										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00										
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00											

SUBTOTAL of Receipts This Page (optional).....▶	730.00
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 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. JOHN M LAWRENCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7078 WHIPPLE AVE
 City SAN DIEGO State CA Zip Code 92122-2836
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12278
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

B. DUANE C LEITER
 Full Name (Last, First, Middle Initial)
 Mailing Address 9115 ACUFF LANE
 City LENEXA State KS Zip Code 66215-3058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12426
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. HARRY LELAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 493 SKY TRAIL RD
 City BOULDER State CO Zip Code 80302-9462
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12280
 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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mr. DAVID LINDELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 E BODINE AVE
 City CLINTON State MO Zip Code 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12435
 Amount of Each Receipt this Period
 240.00
 CONTRIBUTION

B. Mr. JOHN W LOTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 26748 PRESTON PLACE DR
 City ABINGDON State VA Zip Code 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12431
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Mr. ROGER MAILLET
 Full Name (Last, First, Middle Initial)
 Mailing Address 10101 GROSVENOR PL #2004
 City NORTH BETHESDA State MD Zip Code 20852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEPT OF TRANSPORTATION Occupation DEPT OF TRANSPORTATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12429
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	740.00
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 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. Mr. PETER MARIOLIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2997 FRAZIER COURT
 City DECATUR State GA Zip Code 30033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEPT OF HEALTH & HUMAN Occupation DEPT OF HEALTH & HUMAN
 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
 06 / 30 / 2013
Transaction ID : SA11AI.12394
 Amount of Each Receipt this Period
 400.00
 CONTRIBUTION

B. Mr. N. J. MARKOV
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 14855
 City COLUMBUS State OH Zip Code 43214-0855
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12265
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. JAMES F MARTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8411 BLAKISTON LN
 City ALEXANDRIA State VA Zip Code 22308
 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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12414
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

A. WILLIAM F MARTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 LAKEWOOD LANDING
 City BUMPASS State VA Zip Code 23024-4603
 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 ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12252
 Amount of Each Receipt this Period
 530.00
 CONTRIBUTIONS

B. Mr. JAMES A MCQUEEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2116 MYTHEWOOD CIRCLE SW
 City HUNTSVILLE State AL Zip Code 35803-1410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12389
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

C. Mr. GARY W NICKELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 G AVE
 City CORONADO State CA Zip Code 92118
 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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12404
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1080.00
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 22 OF 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mrs. MAXINE S REON NICKELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 G AVE
 City CORONADO State CA Zip Code 92118
 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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12402
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. WILLIAM OGDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 QUAKER HILL LN APT 316
 City PORTSMOUTH State RI Zip Code 02871-4075
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12284
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. DOUGHLAS PHILLIPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 12898 SAPPHIRE PKWY
 City HOLLAND State MI Zip Code 49424-8229
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12269
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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: (check only one)	PAGE 23 OF 63
	<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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

Full Name (Last, First, Middle Initial) A. LAURENCE H REMBOLD		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td>/</td> <td>30</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	06	/	30	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
06	/	30	/	2013								
Mailing Address 225 REBECCA DR #449		Transaction ID : SA11AI.12386										
City ALAMO	State TX	Zip Code 78516-2582										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00										
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00											

Full Name (Last, First, Middle Initial) B. RUTH E RHODES		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>06</td> <td>/</td> <td>30</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	06	/	30	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
06	/	30	/	2013								
Mailing Address 7415 MAHALO HUI DR		Transaction ID : SA11AI.12424										
City DIAMONDHEAD	State MS	Zip Code 39525-3825										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00										
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00											

Full Name (Last, First, Middle Initial) C. JAMES A SAXMAN		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>31</td> <td>/</td> <td>2013</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	31	/	2013
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	31	/	2013								
Mailing Address 9875 CHERRYLEAF DRIVE APT 303		Transaction ID : SA11AI.12266										
City INDIANAPOLIS	State IN	Zip Code 46268-3905										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00										
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00											

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 24 OF 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Mr. HARVEY SOMERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2129 AUTUMN HILL DR
 City ANN ARBOR State MI Zip Code 48103-2177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12263
 Amount of Each Receipt this Period
 220.00
 CONTRIBUTION

B. Mr. RAYMOND H SUEOKA
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 EDMONDSON AVE
 City BALTIMORE State MD Zip Code 21228-4209
 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 M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12282
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Mr. ALAN TALBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 SUNNYSIDE RD
 City SILVER SPRING State MD Zip Code 20910-5465
 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 ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : SA11AI.12251
 Amount of Each Receipt this Period
 800.00
 CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional)..... ▶ 1220.00
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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Mr. ARTHUR L TRACY Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 214

City SHELTON	State WA	Zip Code 98584-0214
-----------------	-------------	------------------------

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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12416

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

B. PHILIP W TREADWAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2103 GRACE AVE

City NEW BERN	State NC	Zip Code 28560-5335
------------------	-------------	------------------------

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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12441

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

C. ALDEN D VANWINKLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 COUNTRY VIEW ST

City VIRDEN	State IL	Zip Code 62690
----------------	-------------	-------------------

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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12439

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mr. TERRY WAMBAUGH		Date of Receipt
Mailing Address 48 KINGSBURY CIR		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
CROSSVILLE	TN	38558
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.12256
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTIONS
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. TERRY WAMBAUGH		Date of Receipt
Mailing Address 48 KINGSBURY CIR		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
CROSSVILLE	TN	38558
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.12387
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) C. ED WESTMEYER		Date of Receipt
Mailing Address 6341 MARQUITA		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
DALLAS	TX	75214-3327
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.12273
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	CONTRIBUTION
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="200.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
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: PAGE 27 OF 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Mr. HENRY O WHITNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1209 BLUEBELL LN
 City CUSTER State SD Zip Code 57730
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12412
 Amount of Each Receipt this Period
 350.00
 CONTRIBUTION

B. Mr. HERMAN B ZIMMERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1337 NE STANTON ST
 City PORTLAND State OR Zip Code 97212-3239
 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 M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : SA11AI.12419
 Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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).....▶	550.00
TOTAL This Period (last page this line number only).....▶	22277.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 63
(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. INTERNAL REVENUE SERVICE CENTER
 Mailing Address PHILADELPHIA
 City PHILADELPHIA State PA Zip Code 19255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 61.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2013
Transaction ID : SA15.12332
 Amount of Each Receipt this Period
 61.00
 Refund on Income tax IRS

Full Name (Last, First, Middle Initial)
B. VIRGINIA DEPARTMENT OF TAXATION
 Mailing Address POST OFFICE BOX1500
 City RICHMOND State VA Zip Code 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 ▼
 32.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2013
Transaction ID : SA15.12333
 Amount of Each Receipt this Period
 32.00
 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 Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	93.00
TOTAL This Period (last page this line number only).....▶	93.00

**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 29 OF 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 56.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013

Transaction ID : SA17.12168

Amount of Each Receipt this Period
 56.29

INTEREST INCOME

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 107.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2013

Transaction ID : SA17.12205

Amount of Each Receipt this Period
 51.37

INTEREST INCOME

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 160.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : SA17.12227

Amount of Each Receipt this Period
 52.65

INTEREST INCOME

SUBTOTAL of Receipts This Page (optional).....▶	160.31
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 211.27

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2013

Transaction ID : SA17.12287

Amount of Each Receipt this Period
 50.96

INTEREST INCOME

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 263.95

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2013

Transaction ID : SA17.12313

Amount of Each Receipt this Period
 52.68

INTEREST INCOME

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 314.93

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : SA17.12334

Amount of Each Receipt this Period
 50.98

INTEREST INCOME

SUBTOTAL of Receipts This Page (optional).....▶	154.62
TOTAL This Period (last page this line number only).....▶	314.93

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGES

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B.12174

Amount of Each Disbursement this Period

28.95

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B.12180

Amount of Each Disbursement this Period

371.50

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGES

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2013

Transaction ID : SB21B.12208

Amount of Each Disbursement this Period

453.88

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

854.33

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2013

Transaction ID : **SB21B.12216**

Amount of Each Disbursement this Period

322.61

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2013

Transaction ID : **SB21B.12228**

Amount of Each Disbursement this Period

308.26

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGES/CHECK ODER FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2013

Transaction ID : **SB21B.12226**

Amount of Each Disbursement this Period

317.03

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

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

947.90

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.12290**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CREDIT CARD CHARGES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.12292**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.12315**

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

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

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2013

Transaction ID : **SB21B.12318**

Amount of Each Disbursement this Period

932.62

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CREDIT CARD CHARGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013

Transaction ID : **SB21B.12339**

Amount of Each Disbursement this Period

419.67

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 17 / 2013

Transaction ID : **SB21B.12338**

Amount of Each Disbursement this Period

393.99

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

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

1746.28

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. DELUXE FOR BUSINESS FORMS & SUPPLIES

Mailing Address PO BOX 74572

City CINCINNATI State OH Zip Code 45274-2572

Purpose of Disbursement
PAC LASER BLANK CHECKS

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2013

Transaction ID : SB21B.12346

Amount of Each Disbursement this Period

120.70

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
LOCKBOX CHARGES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B.12183

Amount of Each Disbursement this Period

8.65

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
LOCKBOX CHARGES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B.12188

Amount of Each Disbursement this Period

7.72

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

137.07

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
LOCKBOX CHARGES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2013

Transaction ID : **SB21B.12230**

Amount of Each Disbursement this Period

6.09

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
LOCKBOX CHARGES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2013

Transaction ID : **SB21B.12298**

Amount of Each Disbursement this Period

2.81

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
PO BOX SERVICE

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2013

Transaction ID : **SB21B.12299**

Amount of Each Disbursement this Period

1975.00

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

1983.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
LOCKBOX CHARGES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.12323**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS INC

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
LOCKBOX CHARGES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.12320**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ENVELOPES UNLIMITED

Mailing Address 649 NORTH HORNERS LANE

City ROCKVILLE State MD Zip Code 20850-1299

Purpose of Disbursement
STORAGE FEES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.12232**

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 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
PAC STORAGE SERVICE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2013

Transaction ID : SB21B.12301

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: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2013

Transaction ID : SB21B.12322

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. 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: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : SB21B.12345

Amount of Each Disbursement this Period

50.00

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

150.00

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

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

Full Name (Last, First, Middle Initial)

A. INTERACTIVE SYSTEM INC

Mailing Address 2101 GAITHER ROAD
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement
PAC MBR DATABASE MGMT FEE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B.12181

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. INTERACTIVE SYSTEM INC

Mailing Address 2101 GAITHER ROAD
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement
PAC MBR DATABASE MGMT FEE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2013

Transaction ID : SB21B.12210

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. INTERACTIVE SYSTEM INC

Mailing Address 2101 GAITHER ROAD
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement
PAC MBR DATABASE MGMT FEE

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2013

Transaction ID : SB21B.12231

Amount of Each Disbursement this Period

250.00

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

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

750.00

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

Full Name (Last, First, Middle Initial)

A. INTERACTIVE SYSTEM INC

Mailing Address 2101 GAITHER ROAD
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement
PAC MBR DATABASE MGMT FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.12293

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. INTERACTIVE SYSTEM INC

Mailing Address 2101 GAITHER ROAD
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement
PAC MBR DATABASE MGMT FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.12324

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. INTERACTIVE SYSTEM INC

Mailing Address 2101 GAITHER ROAD
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement
PAC MBR DATABASE MGMT FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.12347

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 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. INTERNAL REVENUE SERVICE CENTER

Mailing Address PHILADELPHIA

City PHILADELPHIA State PA Zip Code 19255

Purpose of Disbursement
1ST QTR. EST. INCOME TAX-FORM 1120

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
04		09		2013

Transaction ID : SB21B.12296

Amount of Each Disbursement this Period

315.00

Full Name (Last, First, Middle Initial)

B. LINDENMEYR MUNROE

Mailing Address PO BOX 416977

City BOSTON State MA Zip Code 02241-6977

Purpose of Disbursement
PAPER

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
02		15		2013

Transaction ID : SB21B.12221

Amount of Each Disbursement this Period

270.82

Full Name (Last, First, Middle Initial)

C. PACEMAKERS PRESS INV

Mailing Address 6797 BOUMANS CROSSING

City FREDERICK State MD Zip Code 21703

Purpose of Disbursement
NARFE PAC MAGAZINE COVERWRAPS

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
02		07		2013

Transaction ID : SB21B.12211

Amount of Each Disbursement this Period

8436.06

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

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

9021.88

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAY FLOW PRO

Mailing Address 6201 POWERS FERRY ROAD
3RD FLOOR

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2013

Transaction ID : SB21B.12209

Amount of Each Disbursement this Period

119.90

Full Name (Last, First, Middle Initial)

B. PAY FLOW PRO

Mailing Address 6201 POWERS FERRY ROAD
3RD FLOOR

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2013

Transaction ID : SB21B.12300

Amount of Each Disbursement this Period

119.90

Full Name (Last, First, Middle Initial)

C. PAY FLOW PRO

Mailing Address 6201 POWERS FERRY ROAD
3RD FLOOR

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2013

Transaction ID : SB21B.12316

Amount of Each Disbursement this Period

59.95

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

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

299.75

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAY FLOW PRO

Mailing Address 6201 POWERS FERRY ROAD
3RD FLOOR

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

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	6		0	7		2	0	1	3

Transaction ID : SB21B.12340

Amount of Each Disbursement this Period

5	9	.	9	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. PAYMENT SOLUTIONS INC

Mailing Address PO BOX 30217

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

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	1		1	5		2	0	1	3

Transaction ID : SB21B.12178

Amount of Each Disbursement this Period

2	1	9	.	2	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. PAYMENT SOLUTIONS INC

Mailing Address PO BOX 30217

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

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	2		0	5		2	0	1	3

Transaction ID : SB21B.12212

Amount of Each Disbursement this Period

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

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAYMENT SOLUTIONS INC

Mailing Address PO BOX 30217

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2013

Transaction ID : SB21B.12229

Amount of Each Disbursement this Period

226.00

Full Name (Last, First, Middle Initial)

B. PAYMENT SOLUTIONS INC

Mailing Address PO BOX 30217

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2013

Transaction ID : SB21B.12291

Amount of Each Disbursement this Period

228.20

Full Name (Last, First, Middle Initial)

C. PAYMENT SOLUTIONS INC

Mailing Address PO BOX 30217

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2013

Transaction ID : SB21B.12341

Amount of Each Disbursement this Period

239.60

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

693.80

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PAYMENT SOLUTIONS INC

Mailing Address PO BOX 30217

City State Zip Code
BETHESDA MD 20824

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2013

Transaction ID : SB21B.12342

Amount of Each Disbursement this Period

261.80

Full Name (Last, First, Middle Initial)

B. PITNEY BOWES

Mailing Address POST OFFICE BOX 85390

City State Zip Code
LOUISVILLE KY 40285-5390

Purpose of Disbursement
REPLENISH PAC METER

003
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2013

Transaction ID : SB21B.12184

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Mr. ALAN TALBERT

Mailing Address 111 SUNNYSIDE RD

City State Zip Code
SILVER SPRING MD 20910-5465

Purpose of Disbursement
REQUESTED REFUND OF CONTRIBUTION

010
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2013

Transaction ID : SB21B.12450

Amount of Each Disbursement this Period

600.00

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

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

5861.80

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. THE AD ANSWER

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement
NAVY BLUE BALL CAPS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B.12185

Amount of Each Disbursement this Period

64443.75

Full Name (Last, First, Middle Initial)

B. THE AD ANSWER

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement
LAPEL PINS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2013

Transaction ID : SB21B.12236

Amount of Each Disbursement this Period

52758.41

Full Name (Last, First, Middle Initial)

C. THE AD ANSWER

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement
NAVY BLUE BALL CAPS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2013

Transaction ID : SB21B.12319

Amount of Each Disbursement this Period

5166.50

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

122368.66

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. THE AD ANSWER

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement
NAVY BLUE BALL CAPS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2013

Transaction ID : SB21B.12344

Amount of Each Disbursement this Period

11233.96

Full Name (Last, First, Middle Initial)

B. THE AD ANSWER

Mailing Address 121 CONGRESSIONAL LANE
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement
NAVY BLUE BALL CAPS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2013

Transaction ID : SB21B.12343

Amount of Each Disbursement this Period

2466.12

Full Name (Last, First, Middle Initial)

C. UNITED PARCEL SERVICE

Mailing Address PO BOX 7247-0244

City PHILADELPHIA State PA Zip Code 19170-0001

Purpose of Disbursement
POSTAGE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2013

Transaction ID : SB21B.12234

Amount of Each Disbursement this Period

136.24

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

13836.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPARTMENT OF TAXATION

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2013

Mailing Address POST OFFICE BOX1500

Transaction ID : SB21B.12297

City Richmond State VA Zip Code 23218-1500

Amount of Each Disbursement this Period

55.00

Purpose of Disbursement
1ST QTR. EST. INCOME TAX

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPARTMENT OF TAXATION

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		17		2013

Mailing Address POST OFFICE BOX1500

Transaction ID : SB21B.12303

City Richmond State VA Zip Code 23218-1500

Amount of Each Disbursement this Period

421.80

Purpose of Disbursement
JAN., FEB. & MAR. SALES & USE TAX

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. WINCHESTER PRINTERS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2013

Mailing Address 212 INDEPENDENCE DRIVE

Transaction ID : SB21B.12213

City WINCHESTER State VA Zip Code 22606

Amount of Each Disbursement this Period

17125.50

Purpose of Disbursement
BIND IN EVELOPES FOR MAGAZINE

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

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

17602.30

181158.44

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. ALAN LOWENTHAL FOR CONGRESS

Mailing Address 228 SECOND STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
ALAN LOWENTHAL

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 47

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB23.12359**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ALASKANS FOR BEGICH 2014

Mailing Address 303 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
MARK BEGICH

Category/
Type

Office Sought: House
 Senate
 President
State: AK District: 00

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : **SB23.12237**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. BONAMICI FOR CONGRESS

Mailing Address PO BOX 1632

City BEAVERTON State OR Zip Code 97075

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
SUZANNE BONAMICI

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **SB23.12374**

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. CARTWRIGHT FOR CONGRESS

Mailing Address PO BOX 1805

City PLAINS State PA Zip Code 18705

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

MATT MR CARTWRIGHT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: PA District: 17

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2013

Transaction ID : SB23.12307

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR TOM PETRI

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

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. THOMAS E PETRI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: WI District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2013

Transaction ID : SB23.12358

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CUMMINGS FOR CONGRESS

Mailing Address 2901 DRUID PARK DRIVE
SUITE 203

City BALTIMORE State MD Zip Code 21215

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

ELIJAH E CUMMINGS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: MD District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : SB23.12243

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. CUMMINGS FOR CONGRESS

Mailing Address 2901 DRUID PARK DRIVE
SUITE 203

City BALTIMORE State MD Zip Code 21215

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
ELIJAH E CUMMINGS

Category/
Type

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: MD District: 07

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB23.12364

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC CONGRESSIONAL CMPGN. COM

Mailing Address 430 South Capitol Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
BUSINESS COUNCIL, DCCC

011

Candidate Name
DEMOCRATIC CONGRESSIONAL CMPGN. COM

Category/
Type

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼ MBR DUES
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2013

Transaction ID : SB23.12190

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. DEMOCRATIC SENATORIAL CAMPAIGN COM.

Mailing Address 120 MARYLAND AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
LEADERSHIP CIRCLE, DSCC

011

Candidate Name
DEMOCRATIC SENATORIAL CAMPAIGN COM.

Category/
Type

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼ MBR DUES
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2013

Transaction ID : SB23.12192

Amount of Each Disbursement this Period

15000.00

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

31000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. DENNY HECK FOR CONGRESS

Mailing Address PO BOX 235

City OLYMPIA State WA Zip Code 98507

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

DENNIS HECK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	3

Transaction ID : SB23.12250

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. DENNY HECK FOR CONGRESS

Mailing Address 233 PENNSYLVANIA AVE SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

DENNIS HECK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: WA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12379

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. DUCKWORTH FOR CONGRESS

Mailing Address PO BOX 59568

City SCHAUMBURG State IL Zip Code 60159

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. L. TAMMY DUCKWORTH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	3

Transaction ID : SB23.12242

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. DUCKWORTH FOR CONGRESS

Mailing Address PO BOX 59568

City State Zip Code
SCHAUMBURG IL 60159

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. L. TAMMY DUCKWORTH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2013

Transaction ID : SB23.12305

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address 228 2ND STREET SE

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. GEORGE MILLER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2013

Transaction ID : SB23.12304

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK WOLF

Mailing Address 20 F STREET NW
STE 500

City State Zip Code
WASHINGTON DC 20001

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. FRANK PALLONE Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2013

Transaction ID : SB23.12247

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF FRANK WOLF

Mailing Address 20 F STREET NW
STE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. FRANK R WOLF

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2013

Transaction ID : SB23.12356

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF FRANK WOLF

Mailing Address 20 F STREET NW
STE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. FRANK R WOLF

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB23.12375

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK WOLF

Mailing Address 20 F STREET NW
STE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. FRANK R WOLF

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : SB23.12376

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JEANNE SHAHEEN

Mailing Address 1010 VERMONT AVE NW
STE 814

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

JEANNE SHAHEEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NH District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12367

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MICHELLE

Mailing Address 7240 EVANS MILL ROAD

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

MICHELLE LUJAN GRISHAM

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	3

Transaction ID : SB23.12352

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

Full Name (Last, First, Middle Initial)

C. GERRY CONNOLLY FOR CONGRESS

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. GERRY CONNOLLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: VA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	3

Transaction ID : SB23.12248

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
2	5	0	0	0	0	0	0	0	0

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

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

5	5	0	0	0	0	0	0	0	0
5	5	0	0	0	0	0	0	0	0

5	5	0	0	0	0	0	0	0	0
5	5	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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

Full Name (Last, First, Middle Initial)

A. GERRY CONNOLLY FOR CONGRESS

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. GERRY CONNOLLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: VA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2013

Transaction ID : SB23.12357

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GERRY CONNOLLY FOR CONGRESS

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. GERRY CONNOLLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: VA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2013

Transaction ID : SB23.12377

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. HOYER FOR CONGRESS

Mailing Address 499 S CAPITOL STREET
STE 414

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. STENY HOYER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2013

Transaction ID : SB23.12350

Amount of Each Disbursement this Period

3000.00

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. MARK POCAN FOR CONGRESS

Mailing Address 499 S CAPITOL ST SW
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

MARK POCAN

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2013

Transaction ID : SB23.12310

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE COMMITTEE

Mailing Address 420 C STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

MARK LUNSFORD PRYOR

Category/
Type

Office Sought: House
 Senate
 President
State: AR District: 00

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2013

Transaction ID : SB23.12348

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MORAN FOR CONGRESS

Mailing Address 499 SOUTH CAPITOL STREET SW
SUITE 404

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. JIM MORAN

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : SB23.12246

Amount of Each Disbursement this Period

4000.00

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

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. MORAN FOR CONGRESS

Mailing Address 499 SOUTH CAPITOL STREET SW
SUITE 404

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name
Rep. JIM MORAN

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: VA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	3

Transaction ID : SB23.12355

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN CONGRESSNL. COM.

Mailing Address 320 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONGRESSIONAL FORUM, NRCC

Candidate Name
NATIONAL REPUBLICAN CONGRESSNL. COM.

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: District: MBR DUES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	3

Transaction ID : SB23.12191

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUB SENATORIAL COM. (NRSC)

Mailing Address 425 SECOND STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
REPUBLICAN SENATE COUNCIL POLICY BOARD

Candidate Name
NATIONAL REPUB SENATORIAL COM. (NRSC)

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: District: MBR DUES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	3

Transaction ID : SB23.12193

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

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

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

3	1	0	0	0	0	0	0	0	0

3	1	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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

Full Name (Last, First, Middle Initial)

A. PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
Rep. FRANK PALLONE Jr.

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : SB23.12244

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PAUL TONKO FOR CONGRESS

Mailing Address 911 CENTRAL AVENUE
#221

City ALBANY State NY Zip Code 12206

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
PAUL DAVID TONKO

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 21

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : SB23.12373

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR DEREK KILMER

Mailing Address PO BOX 1574

City GIG HARBOR State WA Zip Code 98335

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name
DEREK KILMER

Category/
Type

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2013

Transaction ID : SB23.12249

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR DEREK KILMER

Mailing Address PO BOX 1574

City State Zip Code
GIG HARBOR WA 98335

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

DEREK KILMER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: WA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12378

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

Full Name (Last, First, Middle Initial)

B. PETERS FOR MICHIGAN

Mailing Address PO BOX 226

City State Zip Code
BLOOMFIELD HILLS MI 48303

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

GARY PETERS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: MI District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12365

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

Full Name (Last, First, Middle Initial)

C. SIRES FOR CONGRESS

Mailing Address 625 3RD STREET NE
STE 2

City State Zip Code
WASHINGTON DC 20002

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

ALBIO SIRES

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NJ District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12370

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

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

Full Name (Last, First, Middle Initial)

A. STEPHEN F LYNCH FOR CONGRESS

Mailing Address 105 FARRAGUT ROAD

City BOSTON State MA Zip Code 02127

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

STEPHEN F LYNCH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: MA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2013

Transaction ID : SB23.12306

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. STEVE ISRAEL FOR CONGRESS COMM

Mailing Address PO BOX 777

City DEER PARK State NY Zip Code 11729

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Rep. STEVE J ISRAEL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: NY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2013

Transaction ID : SB23.12245

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. THE MARKEY COMMITTEE

Mailing Address 236 MASSACHUSETTS AVE NE
SUITE 207

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Mr. EDWARD J MARKEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Special-Primary

State: MA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	07	/	2013

Transaction ID : SB23.12349

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. TIM BISHOP FOR CONGRESS

Mailing Address 412 FIRST ST SE
STE 100

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Rep. TIMOTHY BISHOP

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12372

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. UDALL FOR COLORADO

Mailing Address 220 I STREET NE
STE 250

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Rep. MARK UDALL

Office Sought: House
 Senate
 President
State: CO District: 00

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12363

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. UDALL FOR US ALL

Mailing Address 303 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Rep. TOM UDALL

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

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	3

Transaction ID : SB23.12371

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5	0	0	0	0	0	0	0	0	0
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0	0	0	0	0	0	0	0	0	0
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. VAN HOLLEN FOR CONGRESS

Mailing Address 10605 CONCORD STREET

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

CHRIS VAN HOLLEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2013

Transaction ID : SB23.12351

Amount of Each Disbursement this Period

2500.00

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

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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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)..... ▶

2500.00

126000.00
