Image# 15950159540				_	PAGE 1 / 7
FEC FORM 3X	REPORT C AND DISB For Other Than An	URSEM	ENTS	Office	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Exampl over the	e: If typing, type	12FE4M5	
National Association	for Fixed Annuities			e (NAFA PAC)	
ADDRESS (number and street)	1155 F St NW				
Check if different	Suite 1050				
than previously reported. (ACC)	Washington			DC 200	
2. FEC IDENTIFICATION	NUMBER V	CITY 🔺		STATE 🔺	ZIP CODE
C C00528166		3. IS THIS REPORT	× (N) OF	AMENDE (A)	ED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	May 20 (M Jun 20 (M6 Jul 20 (M7)	s) Sep 20 (M	9) Dec 20 (M12) (Non-Election Year Only)
Quarterly Report July 15 Quarterly Report October 15 Quarterly Report	t (Q2) (C) 12-Day PRE-Election Report for	on	nary (12P) avention (12C)	General (12G) Special (12S)	Runoff (12R)
× January 31 Year-End Report		Election on		Y Y Y Y Y	in the State of
July 31 Mid-Yea Report (Non-elea Year Only) (MY)	r (d) 30-Day	the second se	neral (30G)	Runoff (30R)	Special (30S)
Termination Rep (TER)	ort	Election on	/ D D /	Y = Y = Y = Y	in the State of
5. Covering Period		2014 t	hrough 12		2014
I certify that I have examined	I this Report and to the b	est of my knowled	lge and belief it is	true, correct and com	olete.
Type or Print Name of Trease	urer Chris Johnson				
Signature of Treasurer	hris Johnson	[Ele	ctronically Filed]		30 / Y Y Y Y Y 2015
NOTE: Submission of false, en	roneous, or incomplete infor	mation may subject	t the person signing	this Report to the pen	alties of 2 U.S.C. §437g.
Office Use Only				FE	EC FORM 3X Rev. 12/2004

01/30/2015 08 : 36

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

National Association for Fixed Annuities Political Action Committee (NAFA PAC)

R	Report Covering the Period: From:	1 25 2014 T	b: 12 31 / Y Y Y Y 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		4380.00
	(b) Cash on Hand at Beginning of Reporting Period	13839.50	
	(c) Total Receipts (from Line 19)	1000.00	11001.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	14839.50	15381.00
7.	Total Disbursements (from Line 31)	35.00	576.50
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14804.50	14804.50
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

Г	DETAILED SUMMARY PAGE of Receipts	Г
FEC Form 3X (Rev. 06/2004)		Page 3
Write or Type Committee Name		
National Association for Fixed	d Annuities Political Action Committee (N	NAFA PAC)
Report Covering the Period: From:	11 25 2014 To:	12 / D D / Y Y Y Y Y Y 12 31 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From	n:	
 (a) Individuals/Persons Other Than Political Committees 		
(i) Itemized (use Schedule A)	1000.00	11000.00
()		
(ii) Unitemized		1.00
(iii) TOTAL (add		11001.00
Lines 11(a)(i) and (ii)	1000.00	11001.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)		0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1000.00	11001.00
12. Transfers From Affiliated/Other		
Party Committees		0.00
	0.00	
13. All Loans Received		0.00
	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 		0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		0.00
16. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees 17. Other Federal Receipts		0.00
(Dividends, Interest, etc.)		0.00
18. Transfers from Non-Federal and Levin		
(a) Non-Federal Account		
(from Schedule H3)		0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5).		0.00
(c) Total Transfers (add 18(a) and 18	3(b)) 0.00	0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	► 1000.00	11001.00
20. Total Federal Receipts	1000.00	44004.00
(subtract Line 18(c) from Line 19)	1000.00	11001.00

Image# 15950159542

DETAILED SUMMARY PAGE

	COLUMN A	COLUMN B
II. Disbursements	Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.0
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	35.00	576.5
(c) Total Operating Expenditures	7 7 7	
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	35.00	576.5
Committees Contributions to	0.00	0.0
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	0.00	0.0
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d))		
(use Schedule F)	0.00	0.0
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Delition Darty Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees		
(such as PACs)	0.00	0.0
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))►		0.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6)		0.00
(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	0.0
 (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))► 	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	35.00	576.5
	33.00	576.5
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	35.00	576.50

FE6AN026

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	1000.00	11001.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1000.00	11001.00
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	35.00	576.50
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	35.00	576.50

Image# 15950159545

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

7

11	EMIZED RECEIPTS		for each category o Detailed Summary I		X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used	by any pers committee to	on for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) National Association for Fixed A	nnuities	Political Action (Committe	ee (NAFA PAC)
Α.	Full Name (Last, First, Middle Initial) Carl Stern Mailing Address 1437 Santa Lucas Ct				Date of Receipt
	City Solana Beach	State CA	Zip Code 92075		Transaction ID : 13018445 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			1000.00
	Name of Employer Imeriti Financial Network Receipt For: Primary General Other (specify) ▼	Occupation Founder Aggregate	Year-to-Date ▼	00.00	
В.	Full Name (Last, First, Middle Initial)				Date of Receipt
	City FEC ID number of contributing	State	Zip Code	7	Amount of Each Receipt this Period
	federal political committee. Name of Employer	Occupation			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	A	
C.	Full Name (Last, First, Middle Initial)				Date of Receipt
	Mailing Address City	State	Zip Code		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			
	Name of Employer	Occupation	1		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼		
s	UBTOTAL of Receipts This Page (optional)			····· ►	1000.00
Т	OTAL This Period (last page this line number c	only)			1000.00

9 9

ITEMIZED DISBURSEMENTS Use separate schedule(s) breach category of the Detailed Summary Page (check only one) 22 23 24 25 26 Any information copied from such Reports and Statements may not be sold or used by any person for contributions from such committee. NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) Date of Disbursement NAME OF COMMITTEE (in Full) National Association for Fixed Annuities Political Action Committee to solicit contributions from such committee. Mailing Address 1455 Market Street Suite 600 State Zip Code Oify San Francisco CA 94103 Purpose of Dibbursement Credit Card Fees 001 Category/ Type Transaction ID : 13018447 Amount of Each Disbursement for: President Disbursement For: President Credit Card Fees Office Sought: House Disbursement For: President Credit Card Fees City State Zip Code Amount of Each Disbursement this Period Mailing Address City State Zip Code Amount of Each Disbursement this Period Gardidate Name Disbursement For: President Disbursement For: President Amount of Each Disbursement this Period Office Sought: House	SCHEDULE B (FEC Form 3)			E NUMBER:	PAGE	7 OF 7		
Detailed Summary Page 121 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214 221 2214	ITEMIZED DISBURSEMENTS		(s) (check on	y one)				
or for commercial puppess, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) National Association for Fixed Annuities Political Action Committee (NAFA PAC) Full Name (Last, First, Middle Initial) A. Square Inc. Mailing Address City State Zip Code State Zip Code Purpose of Diabursement Candidate Name City State Zip Code Purpose of Diabursement City State City State Zip Code Purpose of Diabursement City State City State Zip Code Purpose of Diabursement City State City State Zip								
National Association for Fixed Annuities Political Action Committee (NAFA PAC) Full Name (Last, First, Middle Initial) A Square Inc. Mailing Address City San Francisco Cardidate Name Cardidate Name Office Sought: House Disbursement Cardidate Name Office Sought: House Disbursement City State: Disbursement City State: Disbursement Disbursement Disbursement Office Sought: House Disbursement City State: Disbursement City State: Disbursement City State: Disbursement City State: Disbursement City Full Name (Last, First, Middle Initial) C. Glicy State:								
Full Name (Last, First, Middle Initial) Date of Disbursement A. Square Inc. Date of Disbursement Mailing Address 1455 Market Street Suite 600 CA City State Zip Code 94103 Purpose of Disbursement Disbursement For: Disbursement 001 Category/ Office Sought: House President Disbursement For: Disbursement For: Disbursement Credit Card Fees Full Name (Last, First, Middle Initial) Date of Disbursement this Period Credit Card Fees City State Zip Code Purpose of Disbursement Disbursement For: Disbursement Date of Disbursement this Period City State Zip Code Purpose of Disbursement Disbursement For: Disbursement For:			C					
A. Square Inc. Date of Disbursement Mailing Address 12 / 02 / 2014 State Size City State Son Francisco CA Gardidate Name Onto Cardidate Name Onto Office Sought: House Disbursement Disbursement For: President Other (specify) ▼ State: Disbursement Office Sought: House Disbursement Credit Card Fees City State Distorement Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City State: Disbursement Office Sought: House President Disbursement For: City State Office Sought: House Senate Disbursement For: President Other (specify) ▼ State: Disbursement For: President Other (specify) ▼ Mailing Address City City State		d Annuities Political Acti	on Commit	iee (NAFA PA	AC)			
Mailing Address 1455 Market Street 12 02 2014 Suite 600 CA 24 003 Transaction ID : 1301847 Amount of Each Disbursement Credit Card Fees 001 Category/ Type Amount of Each Disbursement His Period Candidate Name Other (specify) ▼ State Zp Code President Disbursement For: President Credit Card Fees Credit Card Fees Call Senate Disbursement For: Other (specify) ▼ Credit Card Fees State: Disbursement For: President Credit Card Fees Credit Card Fees City State Zp Code Amount of Each Disbursement Mailing Address City State Zp Code Purpose of Disbursement For: District: Disbursement For: Other (specify) ▼ Date of Disbursement his Period State: Disbursement For: District: Other (specify) ▼ Amount of Each Disbursement Category: Type Category: Type Amount of Each Disbursement his Period Category: Type Other (specify) ▼ Category: Type Office Sought: House Disbursement For: District: Amount of Each Disbursement his Period City State				Data of Disbur	comont			
Suite 600 State Zip Code Transaction ID : 13018447 Purpose of Diabursement Oo1 Amount of Each Diabursement his Period Candidate Name Oo1 Credit Card Fees Office Sought: House Diabursement For: Other (specify) ▼ State: District: Other (specify) ▼ Credit Card Fees City State Zip Code Purpose of Diabursement Other (specify) ▼ Amount of Each Diabursement his Period Cardidate Name Diabursement Category/ Office Sought: House Diabursement For: City State Zip Code Purpose of Diabursement Other (specify) ▼ Amount of Each Diabursement his Period Cardidate Name Diabursement For: Other (specify) ▼ Office Sought: House Diabursement For: Purpose of Diabursement Other (specify) ▼ Senate President Diabursement For: Other (specify) ▼ State: Diabursement Category/ Office Sought: House Diabursement For: City State Zip Code Purpose of Diabursement Category/ City State Zip Code Purpose of Diabursement Category/	A Square Inc.					YY		
San Francisco CA 94103 Purpose of Disbursement 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Prisolant Other (specify) Office Sought: House Disbursement State: Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Prisolant Other (specify) Date of Disbursement this Period Candidate Name Category/ Type Date of Disbursement this Period Candidate Name Disbursement City State State: Disbursement Office Sought: House Prisolent Category/ Type Office Sought: House Disbursement For: Primary General Office Sought: House Disbursement Credit (specify) State: Disbursement City State State: Disbursement City State City State City State City State Disbursement Candidate Name Category/ Type Office Sought: House Disbursement Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Candidate	Suite 600							
Purpose of Disbursement Credit Card Fees 001 Cardidate Name Amount of Each Disbursement this Period Office Sought: House President Disbursement For: Disbursement For: Credit Card Fees State: District: Disbursement For: Disbursement Credit Card Fees Full Name (Last, First, Middle Initial) Date of Disbursement Credit Card Fees Mailing Address City State Zip Code Purpose of Disbursement Credit Card Fees Amount of Each Disbursement this Period Cardidate Name Disbursement For: Disbursement Category/ Type Amount of Each Disbursement this Period Cardidate Name Disbursement For: Disbursement Disbursement For: Disbursement For: Disbursement Disbursement for: Disbursement Date of Disbursement C. Full Name (Last, First, Middle Initial) Date of Disbursement Amount of Each Disbursement Cardidate Name City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Cardidate Name Disbursement For: Disbursement Disbursement For: Disbursement For: Disbursement For: President Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbur	-			Transaction ID : 13018447				
Candidate Name Category/ Type Amount of Each Disbursement for: Benate Disbursement For: Disbursement For: Disbursement Credit Card Fees Full Name (Last, First, Middle Initial) Date of Disbursement Date of Disbursement B. Mailing Address City State Zip Code Purpose of Disbursement Disbursement For: District: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement For: Disbursement Amount of Each Disbursement this Period Ctiv State Zip Code Amount of Each Disbursement this Period Candidate Name Disbursement For: Disbursement For: Disbursement For: Disbursement Date of Disbursement this Period Ctiv State Zip Code Purpose of Disbursement Full Name (Last, First, Middle Initial) Date of Disbursement Amount of Each Disbursement Ctiv State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Category/ Type Time Disbursement For: Disbursement Amount of Each Disbursement this Period Ctity State Disbursement For: Disbursement For: Disbursement This Page (optional) Amount of Each Disbursement this Period	Purpose of Disbursement			-				
Category/ Type 35.00 Office Sought: House President Disbursement For: Other (specify) Credit Card Fees Full Name (Last, First, Middle Initial) Date of Disbursement Date of Disbursement City State Zip Code Purpose of Disbursement Category/ Type Amount of Each Disbursement this Period Candidate Name Disbursement For: President Disbursement For: President Date of Disbursement this Period State: Disbursement For: Disbursement Date of Disbursement this Period Date of Disbursement this Period Chardidate Name Disbursement For: Disbursement Each Date of Disbursement Date of Disbursement City State Zip Code Date of Disbursement Date of Disbursement Grid State Disbursement For: Disbursement Date of Disbursement Date of Disbursement City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Office Sought: House Disbursement For: Disbursement For: Disbursement Amount of Each Disbursement this Period State: Disbursement This Page (optional)			-	Amount of Eac				
State: Dresident Dresident Other (specify) Credit Card Fees Full Name (Last, First, Middle Initial) Date of Disbursement Date of Disbursement City State Zip Code Purpose of Disbursement District: Amount of Each Disbursement this Period Office Sought: House Disbursement For: General Office Sought: Disbursement For: General Date of Disbursement Rull Name (Last, First, Middle Initial) Date of Disbursement this Period Date of Disbursement City State Zip Code Date of Disbursement Purpose of Disbursement Credit Card General Date of Disbursement Other (specify) Image: State Date of Disbursement City State Zip Code Purpose of Disbursement Credit Card General Amount of Each Disbursement this Period Cardidate Name Disbursement For: Credit Card General Image: Cardidate Name Office Sought: House Disbursement For: Senate Amount of Each Disbursement this Period Office Sought: House District: District: State: District:			Category/ Type					
Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address Image: City im	Senate President	Primary General		Credit Card Fee	es			
B. Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Amount of Each Disbursement this Period Candidate Name Other (specify) Image: Constraint of the constr								
City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate Disbursement President Other (specify) Date of Disbursement this Period City State Disbursement Category/ Type Other (specify) State: Disbursement For: Senate President Other (specify) State	B.					YY		
Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) Date of Disbursement City State City State Disbursement Candidate Name Disbursement Candidate Name Disbursement City State Disbursement Candidate Name Disbursement For: President Disbursement For: President Disbursement For: President Disbursement For: President Other (specify) State: Disbursements This Page (optional)	Mailing Address	Mailing Address						
Candidate Name Category/ Type Office Sought: House Senate Primary President Other (specify) State: Disbursement For: President Other (specify) City State Purpose of Disbursement Candidate Name Office Sought: House Purpose of Disbursement Candidate Name Office Sought: House Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Senate President Office Sought: House Disbursement For: Senate President Other (specify) State: District:	City	State Zip Code						
Candidate Name Category/ Type Office Sought: House Senate President District: Other (specify) ▼ Date of Disbursement City State City State Purpose of Disbursement Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary President Other (specify) ▼ Substrict: Substrict: State: Disbursement For: Senate Primary President Other (specify) ▼ Substrict: Substrict: Substrict: Substrict:	Purpose of Disbursement	Purpose of Disbursement						
Office Sought: House Disbursement For: State: District: Full Name (Last, First, Middle Initial) C. C. Date of Disbursement Mailing Address Image: City City State Purpose of Disbursement Category/ Type Office Sought: House Disbursement Category/ Type Office Sought: House Disbursement For: Senate President Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District: Substrate District:	Candidate Name							
Full Name (Last, First, Middle Initial) C. Mailing Address City State City Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) Subtrotal of Disbursements This Page (optional)	Senate President	Primary General			,			
C. Date of Disbursement Mailing Address Image: City City State Zip Code Purpose of Disbursement Image: City Candidate Name Category/ Type Office Sought: House President Disbursement For: Senate Primary Other (specify) Image: City State: District:								
Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Amount of Each Disbursement this Period Office Sought: House Disbursement For: Senate Primary General Other (specify) ✓ SUBTOTAL of Disbursements This Page (optional)	C.							
Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Senate Primary President Other (specify) State: District:	Mailing Address							
Candidate Name Category/ Type Amount of Each Disbursement this Period Office Sought: House Disbursement For: Senate Primary General President Other (specify) ✓ State: Disbursements This Page (optional) 35.00	City	State Zip Code						
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District:	Purpose of Disbursement			-				
Senate Primary General President Other (specify) ▼ State: District:	Candidate Name	Category/ Type	Category/		t this Period			
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General						
	State: District:							
				· · · ·	7	1.0.1		