FEC FORM 3X	AN	ID DISB	OF REC URSEM An Authorize	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		ample:If typing er the lines	, type			
	e to Preserve So	ocial Security & M	Medicare PAC					
ADDRESS (number and	street)	0 G St. NE						
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than previousl reported. (AC	× ، ۷	ashington					20002	4215
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		S	TATE 🛋	ZIPCODE	<b>A</b>
C00172296	• • • •		3. IS THIS REPOR		NEW N) <b>OR</b>	AME (A)	ENDED	
4. <b>TYPE OF REPC</b> (Choose One) (a) Quarterly Rep		(b) Monthly Report Due On:	Feb 20 (M2 X Mar 20 (M3		May 20 (M5) Jun 20 (M6)	Aug 2 Sep 2		ov 20 (M11) Non-Election ear Only) ec 20 (M12) Non-Election ear Only)
July 15 Quarterly October Quarterly January 3	Report(Q3)	(c) 12-Day <b>PRE</b> -El Report		) Primary (12P Convention (*	′	General (12 Special (12	2G) (M10) J. 2G) R G) in the	unoff (12R)
July 31 M Report(N Year Only	lid-Year on-election	(d) 30-Day <b>Post</b> -E Report	Election	General (30G	a)	Runoff (30	R) In the State of	pecial (30S)
5. Covering Period	02	012	007	through	02	28	2007	
I certify that I have exam Type or Print Name of T		t and to the best Ms. Christine Kir		and belief it is	true, correct a	nd complete.		
Signature of Treasurer	Electronically	y Filed by Ms.	Christine Kim		Da	te 03	19 2	007
NOTE : Submission of f	alse, erroneous	, or incomplete i	nformation may s	ubject the perso	on signing this	Report to the p	enalties of 2 U.S.C	; 437g.
Office Use Only							FEC FORM (Rev. 02/2003)	

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name National Committee to Preserve Social Security & Medicare PAC

F	eport Covering the Period: From:	Y Y W Y 2007	To:
_		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 <sup>Y</sup> 2007 <sup>Y Y</sup>		824562.50
	(b) Cash on Hand at Begining of Reporting Period	731292.80	
	(c) Total Receipts (from Line 19)	367.13	3013.93
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	731659.93	827576.43
7.	Total Disbursements (from Line 31)	32958.47	128874.97
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	698701.46	698701.46
9.	Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS	Page 3
Write or Type Committee Name National Committee to Preserve Social	Security & Medicare PAC	
Report Covering the Period: From:		-o: 0 2 0 0 7
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Contributions (other than loans) From:</li> <li>(a) Individuals/Persons Other</li> </ol>		
<ul> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> <li>(i) Itemized (use Schedule A)</li> </ul>	0.00	0.00
(ii) Unitemized	338.00	2950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	338.00	2950.00
(b) Political Party Committees	0.00	0.00
<ul> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> <li>(d) Total Contributions (add Lines</li> </ul>	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	338.00	2950.00
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
<ol> <li>Refunds of Contributions Made to Federal candidates and Other Political Committees</li> </ol>	0.00	0.00
<ol> <li>Other Federal Receipts (Dividends, Interest, etc.)</li> </ol>	29.13	63.93
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
<ol> <li>Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))</li> </ol>	367.13	3013.93
<ol> <li>Total Federal Receipts (subtract Line 18(c) from Line 19)</li> </ol>	367.13	3013.93

## **DETAILED SUMMARY PAGE**

	COLUMN A	COLUMN B
II. DISBURSEMENTS	Total This Period	Calendar Year-to-Date
. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	20458.47	54474.97
<ul> <li>(c) Total Operating Expenditures</li> <li>(add 21(a)(i), (a)(ii) and (b))</li> </ul>	20458.47	54474.97
. Transfers to Affiliated/Other Party Committees	0.00	0.00
. Contributions to Federal Candidates/Committees and Other Political Committees	12500.00	72500.00
(use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
. Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
<ul><li>(b) Political Party Committees</li></ul>	0.00	0.00
<ul> <li>(c) Other Political Committees</li> <li>(such as PACs)</li> </ul>	0.00	0.00
(d) Total Contribution Refunds		0.00
(add Lines 28(a), (b), and (c))	0.00	1900.00
Other Disbursements	0.00	1900.00
<ul> <li>Federal Election Activity (2 U.S.C 431(20))</li> <li>(a) Shared Federal Election Activity</li> </ul>		
(from Schedule H6) (i) Federal Share	0.00	0.0
(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	0.0
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	32958.47	128874.9
Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	32958.47	128874.9

## DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	338.00	2950.00		
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	338.00	2950.00		
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20458.47	54474.97		
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	20458.47	54474.97		

ITEMIZED DISBURSEMENTS       for each catagory of the bealaid summary Page       (client of you help yeach and summary Page)       (client of you help yeach and yeach and summary Page)       (client of you help yeach and yeach and	S	CHEDULE B (FEC Form 3X)	Use seperate	schedule(s)		NE NUMBER: PAGE 6/11						
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee         NAME CF COMMITTEE (in Full)         National Committee to Preserve Social Security & Medicare PAC         Full Name (Last, First, Middle Initial)         A         SUNTRUST BANK         Mailing Address         145 NEW YORK AVENUE, NW         City         Otip         City         State         Zip Code         WASHINGTON         DC         Cardidate Name         Office Sought:         President         Disbursement For:         President         Distruct:         Purpose of Disbursement         Office Sought:         Purpose of Disbursement         Other (specify)         State:         Disbursement         Void - SUNTRUST BANK         Mailing Address         1445 NEW YORK AVENUE, NW         City         Mailing Address         1445 NEW YORK AVENUE, NW         City         Mailing Address         1445 NEW YORK AVENUE, NW         City         State:       Disbursement For: <th>IT</th> <th>EMIZED DISBURSEMENTS</th> <th>for each categ</th> <th>gory of the</th> <th>X 21b</th> <th>22 23</th> <th></th> <th></th> <th>26 301</th>	IT	EMIZED DISBURSEMENTS	for each categ	gory of the	X 21b	22 23			26 301			
NAME OF COMMITTEE (in Full)         NAME OF COMMITTEE (in Full)         National Committee to Preserve Social Security & Medicare PAC         Full Name (Last, First, Middle Initial)         Assunt Rust         Mailing Address         1445 NEW YORK AVENUE, NW         Oty         WASHINGTON         DC       20005         Purpose of Disbursement Bank Fees         Cardidate Name         Office Sought:       House         Disbursement For:         State:       Disbursement For:         President       Other (specify) ▼         Bank Fees         Cardidate Name       Other (specify) ▼         Bank Fees         Cardidate Name       Disbursement For:         State:       Disbursement For:         President       Other (specify) ▼         Bank Fees       Disbursement For:         Other (specify) ▼       Amount of Each Disbursement this Period         Other (specify) ▼       Code         Mailing Address       1445 NEW YORK AVENUE, NW         Other (specify) ▼       Amount of Each Disbursement this Period         Other (specify) ▼       Code         Mailing Address       10 G Street, NE         State:       Dis												
A       SUNTRUST BANK       Date of Debursement         Mailing Address       1445 NEW YORK AVENUE, NW       DC         City       State       Zip Code         WASHINGTON       DC       20005         Purpose of Dibbursement       001         Bank Fees       001         Candidate Name       001         Office Sought:       House         President       Disbursement For:         President       Other (specify) ▼         Bank Fees       001         Full Name (Last, First, Middle Initia)       Transaction ID: 13880128         Butresement       Other (specify) ▼         Bank Fees       01         General       Other (specify) ▼         Bank Fees       01         SUNTRUST BANK       Transaction ID: 13880128         Mailing Address       1445 NEW YORK AVENUE, NW         City       State       Zip Code         Void - SUNTRUST BANK       Oother (specify) ▼         Office Sought:       House       Disbursement For:         Office Sought:       House       Disbursement For:       Yppe         Office Sought:       House       Disbursement For:       Yppe         Office Sought:       House       D		NAME OF COMMITTEE (In Full)										
City       State       Zip Code       Amount of Each Disbursement His Period         Deuropse of Disbursement Bank Fees       001       Category       103.78         Office Sought:       House       Disbursement For:       Bank Fees         State:       District       Other (specify)       Bank Fees         Full Name (Last, First, Middle Initial)       B. SUNTRUST BANK       Transaction ID: 13880128         B. SUNTRUST BANK       Disbursement       Other (specify)       Amount of Each Disbursement         Mailing Address       1445 NEW YORK AVENUE, NW       Other (specify)       Amount of Each Disbursement         City       State       Zip Code       Amount of Each Disbursement this Period         Void - SUNTRUST BANK       Other (specify)       Amount of Each Disbursement this Period         Void - SUNTRUST BANK       Other (specify)       Amount of Each Disbursement this Period         City       Sante       Disbursement For:       Other (specify)         State:       Distresement       Other (specify)       Amount of Each Disbursement         Mailing Address       10 G Street, NE       Other (specify)       Amount of Each Disbursement         City       Sante       Disbursement       Other (specify)       Amount of Each Disbursement         City       Santa	Α.					Date of Disb	ursement	-	Y			
WASHINGTON       DC       20005         Purpose of Disbursement Bank Fees       001         Candidate Name       01         Office Sought:       House         State:       Disbursement For:         President       Other (specify)         Full Name (Last, First, Middle Initial)         B. SUNTRUST BANK         Mailing Address       1445 NEW YORK AVENUE, NW         City       State:         Office Sought:       House         Disbursement       001         Cardidate Name       001         City       State:         Office Sought:       House         State:       Disbursement         Office Sought:       House         Disbursement       001         City       State         State:       Disbursement         Office Sought:       In G Street, NE         State:       Disbursement         Office Sought:       G State         Office Sought:       Disbursement         Office Sought:       Disbursement         Outer (specify)       Inter (specify)         Mailing Address       10 G Street, NE         State:       Disbursement         Office		Mailing Address 1445 NEW YORK AVEN	UE, NW			02	22	2007				
Purpose of Disbursement Res       001         Candidate Name       001         Candidate Name       001         Office Sought:       House         State:       Disbursement For:         President       Other (specify) ▼         B. SUNTRUST BANK       Disbursement For:         Mailing Address       1445 NEW YORK AVENUE, NW         City       State         Purpose of Disbursement       DC         Void - SUNTRUST BANK       001         City       State         Purpose of Disbursement       DC         Office Sought:       House         President       Disbursement For:         Office Sought:       House         President       Disbursement For:         Office Sought:       House         President       Disbursement For:         Other (specify) ▼       Void - SUNTRUST BANK         Mailing Address       10 G Street, NE         State       Disbursement For:         President       Disbursement For:         President       Disbursement For:         Purpose of Disbursement       Other (specify) ▼         Mailing Address       10 G Street, NE         Suite 600       City		WÁSHINGTON				Amount of E	ach Disbursem					
Office Sought:       House Senate President       Disbursement For: Other (specify) ▼       Bank Fees         State:       District:       Transaction ID: 13880128 Date of Disbursement         Mailing Address       1445 NEW YORK AVENUE, NW       District:         City       State       Zip Code 20005       Amount of Each Disbursement this Period         Purpose of Disbursement Void - SUNTRUST BANK       O01 Category/ Type       -103.78         Office Sought:       House Senate       Disbursement For: Other (specify) ▼       Void - SUNTRUST BANK         Candidate Name       Oother (specify) ▼       Void - SUNTRUST BANK         Office Sought:       House Senate       Disbursement For: Other (specify) ▼       Void - SUNTRUST BANK         C       Full Name (Last, First, Middle Initial)       Transaction ID: 13772117 Date of Disbursement         State:       Disbursement Disbursement       Other (specify) ▼         Mailing Address       10 G Street, NE Suite 600       Zip Code 20002         Chy Washington       DC       Zip Code 20002       Amount of Each Disbursement this Period         Office Sought:       House Senate       Disbursement For: Other (specify) ▼       Other (specify) ▼         Office Sought:       House Senate       Disbursement For: Senate       Other (specify) ▼         Office Sought:		Bank Fees			Category/		<u> </u>	103.78	5			
B. SUNTRUST BANK       Mailing Address       1445 NEW YORK AVENUE, NW         City       State       Zip Code         WASHINGTON       DC       20005         Purpose of Disbursement       001         Cardidate Name       Disbursement For:         President       Disbursement For:         President       Other (specify)         State:       Disbursement         Mailing Address       10 G Street, NE         Suite 600       City         City       State         Mailing Address       10 G Street, NE         Suite 600       City         Variation       DC         City       State         Variation       DC         City       State         Suite 600       City         City       State         Office Sought:       House         Pace of Disbursement       001         Cardidate Name       001         Cardidate Name       001         Cardidate Name       001         Office		Senate President	Primary		Туре	Bank Fees						
City       State       Zip Code         WASHINGTON       DC       20005         Purpose of Disbursement       001         Void - SUNTRUST BANK       001         Candidate Name       O01         Office Sought:       House         State:       Disbursement For:         President       Other (specify) ▼         Void - SUNTRUST BANK       Void - SUNTRUST BANK         Void - SUNTRUST BANK       Other (specify) ▼         Void - SUNTRUST BANK       Other (specify) ▼         Void - SUNTRUST BANK       Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial)       C         C NCPSSM       Transaction ID: 13772117         Mailing Address       10 G Street, NE         Suite 600       DC         City       State         Vashington       DC         Purpose of Disbursement       DO         PAC Travel Reimbursement       Other (specify) ▼         Office Sought:       House         Senate       President         Office Sought:       House         Senate       Primary         General       Other (specify) ▼         PAC Travel Reimbursement	В.					Date of Disb	ursement		Y			
WÁSHINGTON       DC       20005         Purpose of Disbursement Void - SUNTRUST BANK       001       -103.78         Candidate Name       001       Category/ Type       -103.78         Office Sought:       House       Disbursement For:       Other (specify)         State:       District:       Void - SUNTRUST BANK         State:       District:       Void - SUNTRUST BANK         Mailing Address       10 G Street, NE Suite 600       Transaction ID: 13772117 Date of Disbursement         Mailing Address       10 G Street, NE Suite 600       Transaction ID: 13772117 Date of Disbursement         Mailing Address       10 G Street, NE Suite 600       Amount of Each Disbursement this Period         PAC Travel Reimbursement PAC Travel Reimbursement       001 Category/ Type       3054.22         Office Sought:       House       Disbursement For: Senate       Primary         Office Sought:       House       Disbursement For: Other (specify) ▼       PAC Travel Reimbursement         State:       District:       Other (specify) ▼       PAC Travel Reimbursement		Mailing Address 1445 NEW YORK AVEN	UE, NW				22	2007	<u> </u>			
Void - SUNTRUST BANK       001         Candidate Name       001         Candidate Name       Disbursement For:         President       Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial)       Transaction ID: 13772117         C. NCPSSM       Disbursement         Mailing Address       10 G Street, NE         Suite 600       DC         City       State         Vages of Disbursement       DC         PAC Travel Reimbursement       001         Category/ Type       Disbursement For:         Office Sought:       House         Disbursement For:       001         Category/ Type       001         Office Sought:       House         Disbursement For:       001         Category/ Type       Disbursement For:         Office Sought:       Disbursement For:         Senate       Primary       General         Other (specify) ▼       PAC Travel Reimbursement		WÁSHINGTON				Amount of E	ach Disbursem					
Office Sought:       House       Disbursement For:       Void - SUNTRUST BANK         State:       District:       Other (specify)       Void - SUNTRUST BANK         Full Name (Last, First, Middle Initial)       Transaction ID: 13772117       Date of Disbursement         Mailing Address       10 G Street, NE       Void - SUNTRUST BANK         Mailing Address       10 G Street, NE       Void - Suite 600         City       State       Zip Code         Washington       DC       20002         Purpose of Disbursement       O01         PAC Travel Reimbursement       001         Candidate Name       Disbursement For:         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       Disbursement For:         Office Sought:       House         Senate       Primary         President       Other (specify)         State:       District:		Void - SUNTRUST BANK			Category/		<u>0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </u>	-103.76	2			
Full Name (Last, First, Middle Initial)       Transaction ID: 13772117 Date of Disbursement         Mailing Address       10 G Street, NE Suite 600       Mailing Address         City       State       Zip Code DC       Amount of Each Disbursement this Period         Purpose of Disbursement PAC Travel Reimbursement       001 Category/ Type       3054.22         Office Sought:       House President       Disbursement For: Other (specify)       Pac Travel Reimbursement         State:       District:       Other (specify)       Pac Travel Reimbursement		Senate President	Primary			Void - SUN	TRUST BAN	К				
Suite 600       State       Zip Code       Amount of Each Disbursement this Period         Washington       DC       20002       3054.22         Purpose of Disbursement       001       Category/ Type       3054.22         Office Sought:       House       Disbursement For:       President         Office Sought:       House       Disbursement For:       President         State:       District:       Other (specify)       ▼	C.	Full Name (Last, First, Middle Initial)				Date of Disb	ursement					
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(chec	k only h	one) ] 22		23	24		25	26
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	NAME OF COMMITTEE (In Full)		CON		10 301		ibutic		11 3001	comm	intico	
$\rangle$	National Committee to Preserve Social Sec	curity & Medicare PAC										
Α.	Full Name (Last, First, Middle Initial) NCPSSM					Date	of Dis	sburse				
	Mailing Address 10 G Street, NE Suite 600					0 <sup>™</sup> 2	M /	<sup>D</sup> 2	<sup>D</sup> <sup>/</sup>	źź	0 ð 7	Ŷ
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	Candidate Name			ategory Type	/							
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в.	Full Name (Last, First, Middle Initial) NCPSSM					Trans Date of			13772 <sup>-</sup> ment	120		
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or	for commercial purposes, other than using the name	e and address of ar	ny political o	com	mitte	e to so	licit contr	ibution	is froi	m such o	comm	ittee	
$ \rangle$	NAME OF COMMITTEE (In Full) National Committee to Preserve Social Ser	ourity & Medicar											
V	National Committee to Preserve Social Sec	curity a medical	erau										
	Full Name (Last, First, Middle Initial)						Trans	actior	ID:	136694	-00		
Α.	Blue Dog PAC							of Disb					_
	Mailing Address 236 Massachusetts Aven Suite 508	ue NE					<sup>™</sup> 2	M /	<sup>D</sup> 0	1	Ź	0 ð 7	Y
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	State: District:	Other (specify)											
	Full Name (Last, First, Middle Initial)						Trans	actior		136693	99		
В.	A Lot of People for Dave Obey							of Disb					
	Mailing Address PO Box 75214						0 <sup>™</sup> 2	M /	<sup>D</sup> 0	D / Y	ź	0 ð 7	Y
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~	Full Name (Last, First, Middle Initial)						Trans	actior	D:	136694	02		
C.	FRIENDS FOR HARRY REID							of Disb					_
	Mailing Address 426 C Street, NE Rear Building						0 2	M /	<sup>D</sup> 0	D / )	Ź	0 ð 7	Y
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S	CHEDULE B (FEC Form 3X)	Use seperate schedul	e(s)	FOR LINE		PAGE 9/11
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	NAME OF COMMITTEE (In Full) National Committee to Preserve Social Sec					
Α.	Full Name (Last, First, Middle Initial) Jerry Weller For Congress Inc.				Transaction ID	sement
	Mailing Address P.O. Box 2368				02 <sup>M</sup> /D	0 1 <sup>P</sup> 2 0 0 7 <sup>Y</sup>
	Joliet	State Zip Code IL 60434			Amount of Eac	h Disbursement this Period
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в.	Full Name (Last, First, Middle Initial) AMERIPAC				Transaction ID Date of Disburs	sement
	Mailing Address 499 South Capitol Street, Suite 414					0 8 <sup>7</sup> <sup>2</sup> 2 0 0 7 <sup>4</sup>
	Washington	State Zip Code DC 20003			Amount of Eac	h Disbursement this Period 1000.00
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C.	State:     District:       Full Name (Last, First, Middle Initial)       Cummings for Congress				Transaction ID	sement
	Mailing Address 2901 Druid Park Drive				02 <sup>M</sup>	0 8 <sup>7</sup> <sup>2</sup> 2 0 0 7 <sup>4</sup>
		State Zip Code MD 21215			Amount of Eac	h Disbursement this Period
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	Candidate Name Elijah E. Cummings		(	Category/ Type		
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	NAME OF COMMITTEE (In Full)	and address of any political	COL	111	intee to s	SOLICI	Contr	DULIC		Such	COLLI	muee		
$\rangle$	National Committee to Preserve Social Sec	curity & Medicare PAC												
Α.	Full Name (Last, First, Middle Initial) RANGEL FOR CONGRESS						Trans Date o		-	137131 ement	88			
	Mailing Address PO Box 5577						0 <sup>M</sup> 2	M /	D 0	<b>B</b> /	Ý Ž	0 ð 7	<b>,</b> Y	
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	Full Name (Last, First, Middle Initial)					+ .	Tuono			137131	07			
В.	Ellison For Congress						Date o		sburse	ement		Y	Y	
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	Mr. Keith Ellison				egory/ /pe									
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C.	Klein For Congress						Date o		sburse	ement	00			
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S	SCHEDULE B (FEC Form 3X) Use seperate schedule(s						FOR LINE	NUMBER: PAGE 11/11	
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	Candidate Name Thomas Allen						ategory/ Type		
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В.	Full Name (Last,	First, Middle Initial) Election Committe	e					Transaction ID: 13772122 Date of Disbursement	_
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