

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 Action Committee (NACPAC)

ADDRESS (number and street) 3389 Sheridan St.
#424
 Check if different than previously reported. (ACC)
Hollywood FL 33021

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00147983 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2018 through 06 / 30 / 2018

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 Vogel, Mark, , ,

Signature of Treasurer Vogel, Mark, , , [Electronically Filed] Date 07 / 15 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Action Committee (NACPAC)

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="2018"/>	<input type="text" value="66150.00"/>	<input type="text" value="66150.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33001.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11000.00"/>	<input type="text" value="59510.00"/>
(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="44001.00"/>	<input type="text" value="125660.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16657.00"/>	<input type="text" value="98316.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="27344.00"/>	<input type="text" value="27344.00"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Action Committee (NACPAC)

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).....	9000.00	49510.00
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9000.00	49710.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	9800.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11000.00	59510.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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)).....▶	11000.00	59510.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	11000.00	59510.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8657.00	16316.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8657.00	16316.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	82000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	16657.00	98316.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16657.00	98316.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	11000.00	59510.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11000.00	59510.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8657.00	16316.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8657.00	16316.00

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

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

NAME OF COMMITTEE (In Full)
National Action Committee (NACPAC)

A. Barth, Markus, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1346 Heller Dr.
 City Yardley State PA Zip Code 19067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Optometrist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 30 / 2018**
Transaction ID : SA11AI.10536
 Amount of Each Receipt this Period 250.00
 Memo Item
 Dues

B. Chekanow, Fred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6297 S.W. 102nd St.
 City Miami State FL Zip Code 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baptist Hospital Occupation (for Individual) Security
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 06 / 2018**
Transaction ID : SA11AI.10550
 Amount of Each Receipt this Period 500.00
 Memo Item
 Dues

C. Citrin, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3724 Pinetree Dr.
 City Miami Beach State FL Zip Code 33140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Citrin Financial & Insurance Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 06 / 2018**
Transaction ID : SA11AI.10548
 Amount of Each Receipt this Period 250.00
 Memo Item
 Dues

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 15
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Action Committee (NACPAC)

A. Friedman, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 SW 129th Ave., #408
 City State Zip Code
 Pembroke Pines FL 33027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self CPA
 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
 04 / 30 / 2018
Transaction ID : SA11AI.10537
 Amount of Each Receipt this Period
 300.00
 Memo Item
 Dues

B. Glickstein, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4144 Chase Avenue
 City State Zip Code
 Miami Beach FL 33140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Temple Beth Sholom Rabbi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2018
Transaction ID : SA11AI.10557
 Amount of Each Receipt this Period
 1800.00
 Memo Item
 Dues

C. Hermelin, Doreen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31500 Bingham Rd.
 City State Zip Code
 Bingham Farms MI 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 N/A 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
 05 / 01 / 2018
Transaction ID : SA11AI.10534
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Dues

SUBTOTAL of Receipts This Page (optional).....	2350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<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 Action Committee (NACPAC)

A. Levine, Ira, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 Quayside Terr., #609
 City Miami State FL Zip Code 33138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Medical doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 29 / 2018**
Transaction ID : SA11AI.10546
 Amount of Each Receipt this Period 500.00
 Memo Item
 Dues

B. Levine, Norman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 N.E. 125th St. #107
 City No. Miami State FL Zip Code 33161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) C.P.A.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 30 / 2018**
Transaction ID : SA11AI.10538
 Amount of Each Receipt this Period 500.00
 Memo Item
 Dues

C. Lipoff, Norman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Grove Isle Dr., #1009
 City Miami State FL Zip Code 33133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greenberg Traurig Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 29 / 2018**
Transaction ID : SA11AI.10547
 Amount of Each Receipt this Period 500.00
 Memo Item
 Dues

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 15
<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 Action Committee (NACPAC)

A. Nullman, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2520 Princeton Ct.
 City Weston State FL Zip Code 33327
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Occupation (for Individual) Dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.10549
 Amount of Each Receipt this Period 1900.00
 Memo Item
 Dues

B. Schneider, Bradley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 Revere Dr. #12
 City Northbrook State IL Zip Code 60062
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) US Gov't. Occupation (for Individual) Congressman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 11 / 2018
Transaction ID : SA11AI.10544
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Dues

C. Silverman, Louis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 No. Springwood Pl.
 City Port Matilda State PA Zip Code 16870
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2018
Transaction ID : SA11AI.10545
 Amount of Each Receipt this Period 250.00
 Memo Item
 Dues

SUBTOTAL of Receipts This Page (optional).....	3150.00
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 10 OF 15
(check only one)

<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 Action Committee (NACPAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Slade, Jonathan, , ,

Mailing Address 1730 Rhode Island Avenue, Suite 317

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

Name of Employer (for Individual) The Cormac Group	Occupation (for Individual) Lobbyist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	10	/	2018

Transaction ID : SA11AI.10558

Amount of Each Receipt this Period
1000.00

Memo Item
Dues

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	9000.00

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 11 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Action Committee (NACPAC)

A. DNCPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address One Park Row #5

City Providence	State RI	Zip Code 02903
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2018

Transaction ID : SA11C.10539

Amount of Each Receipt this Period
1000.00

Memo Item
Dues

B. Ocean State PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 Hilton Rd.

City Warwick	State RI	Zip Code 02889
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2018

Transaction ID : SA11C.10533

Amount of Each Receipt this Period
1000.00

Memo Item
Dues

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

**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"/> 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 Action Committee (NACPAC)

Full Name (Last, First, Middle Initial) A. Mark R. Vogel, P.A.		Date of Disbursement MM / DD / YYYY 04 / 01 / 2018	
Mailing Address 3389 Sheridan St., #424		FEC Identification Number C [] Transaction ID : SB21B.10570 Amount of Each Disbursement this Period [] 2500.00	
City Hollywood	State FL	Zip Code 33021	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Offices, secr'l, postage, xerox, supplies		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. Mark R. Vogel, P.A.		Date of Disbursement MM / DD / YYYY 04 / 15 / 2018	
Mailing Address 3389 Sheridan St., #424		FEC Identification Number C [] Transaction ID : SB21B.10573 Amount of Each Disbursement this Period [] 1000.00	
City Hollywood	State FL	Zip Code 33021	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Prepare FEC Report		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. Mark R. Vogel, P.A.		Date of Disbursement MM / DD / YYYY 05 / 01 / 2018	
Mailing Address 3389 Sheridan St., #424		FEC Identification Number C [] Transaction ID : SB21B.10571 Amount of Each Disbursement this Period [] 2500.00	
City Hollywood	State FL	Zip Code 33021	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Offices, secr'l, postage, xerox, supplies		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Action Committee (NACPAC)

A. Mark R. Vogel, P.A.

Full Name (Last, First, Middle Initial)

Mailing Address 3389 Sheridan St., #424

City Hollywood State FL Zip Code 33021

Purpose of Disbursement Offices, secr'l, postage, xerox, supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY 06 / 01 / 2018

FEC Identification Number C

Transaction ID : SB21B.10572

Amount of Each Disbursement this Period 2500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	8500.00

**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"/> 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 Action Committee (NACPAC)

A. Donald Norcross for Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 160

City Collingswood State NJ Zip Code 08108

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NJ District: 01

Date of Disbursement: 06 / 20 / 2018

FEC Identification Number: C

Transaction ID : SB23.10565

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Greg Steube Congressional Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 51957

City Sarasota State FL Zip Code 34232

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 17

Date of Disbursement: 06 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB23.10568

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Paul Cook for Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 365

City Yucca Valley State CA Zip Code 92286

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 08

Date of Disbursement: 04 / 20 / 2018

FEC Identification Number: C

Transaction ID : SB23.10562

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5500.00

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"/> 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 Action Committee (NACPAC)

A. Suozzi for Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 669

City: Glen Cove State: NY Zip Code: 11542

Purpose of Disbursement: Contribution

Candidate Name

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

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 06 / 21 / 2018

FEC Identification Number: C
Transaction ID : SB23.10566
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Tina Smith for Minnesota

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 14362

City: St. Paul State: MN Zip Code: 55114

Purpose of Disbursement: Contribution

Candidate Name

Office Sought: House Senate President
State: MN District:

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 06 / 20 / 2018

FEC Identification Number: C
Transaction ID : SB23.10563
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Tony Cardenas for Congress

Full Name (Last, First, Middle Initial)
Mailing Address 410 1st St., S.E.

City: Washington State: DC Zip Code: 20003

Purpose of Disbursement: Contribution

Candidate Name

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

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 04 / 03 / 2018

FEC Identification Number: C
Transaction ID : SB23.10530
Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	8000.00