

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

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

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

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

Type or Print Name of Treasurer JON W DOWIE

Signature of Treasurer JON W DOWIE [Electronically Filed] Date  /  /

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

**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="2015"/>		<input type="text" value="418908.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="482264.17"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="418644.15"/>	<input type="text" value="727053.39"/>
(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="900908.32"/>	<input type="text" value="1145961.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="134618.37"/>	<input type="text" value="379671.76"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="766289.95"/>	<input type="text" value="766289.95"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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. 06/2004)

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).....	51499.00	105248.00
(ii) Unitemized .....	366788.95	621164.66
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	418287.95	726412.66
(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) .....	418287.95	726412.66
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).....	36.27	38.27
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	319.93	602.46
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))..... ▶	418644.15	727053.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	418644.15	727053.39

**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 .....	79618.37	213671.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	79618.37	213671.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	166000.00
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)) ..	134618.37	379671.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	134618.37	379671.76

**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) .....	418287.95	726412.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	418287.95	726412.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	79618.37	213671.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	36.27	38.27
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	79582.10	213633.49

**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 125
	<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. Ms JUDY P ABERNETHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 2333  
 City OXFORD State MS Zip Code 38655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL EMPLOYEE Occupation FEDERAL EMPLOYEE  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14269**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mr. LEE E ADAMS Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1306 CLAY AVE  
 City TYRONE State PA Zip Code 16686  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14431**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. PATRICIA ALBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1378 STONEBURNER RD  
 City EDINBURG State VA Zip Code 22824-2901  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14507**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> 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 125
	<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. CHARLES ALLARD Sr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 276 NORWICH L  
 City WEST PALM BEACH State FL Zip Code 33417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14681**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mrs. GAYNEL K ANDRUSKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3178 EASTWOOD CT  
 City BOULDER State CO Zip Code 80304-2986  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14353**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**C. Mrs. E V ATTEBURY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 MIRA MAR AVE #724  
 City MEDFORD State OR Zip Code 97504-8554  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14414**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 125
	<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. Ms JANICE BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2082 PLACITA DE VIDA  
 City SANTA FE State NM Zip Code 87505-5489  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14482**  
 Amount of Each Receipt this Period  
 270.00  
 CONTRIBUTION

**B. Ms JANICE BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2082 PLACITA DE VIDA  
 City SANTA FE State NM Zip Code 87505-5489  
 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 ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14642**  
 Amount of Each Receipt this Period  
 90.00  
 CONTRIBUTION

**C. BETTY F BALLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7610 RIVERDALE ROAD  
 City NEW CARROLLTON State MD Zip Code 20784  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14266**  
 Amount of Each Receipt this Period  
 275.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 635.00  
**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 9 OF 125  
(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. 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 ▼ 200.00

Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11AI.14651**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. GEORGE R BARDWIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 417 E SYCAMORE AVENUE  
 City EL SEGUNDO State CA Zip Code 90245-2435  
 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 ▼ 625.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14260**  
 Amount of Each Receipt this Period 325.00  
 CONTRIBUTION

**C. GEORGE R BARDWIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 417 E SYCAMORE AVENUE  
 City EL SEGUNDO State CA Zip Code 90245-2435  
 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 ▼ 700.00

Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11AI.14263**  
 Amount of Each Receipt this Period 75.00  
 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 10 OF 125
	<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)**

Full Name (Last, First, Middle Initial)  
**A. LESLIE I BEAM**

Mailing Address 2314 SCOTLAND ROAD

City COCOA	State FL	Zip Code 32926
---------------	-------------	-------------------

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 ▼  
 225.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14460**

Amount of Each Receipt this Period  
 225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LESLIE I BEAM**

Mailing Address 2314 SCOTLAND ROAD

City COCOA	State FL	Zip Code 32926
---------------	-------------	-------------------

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 ▼  
 275.00

Date of Receipt  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14717**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mr. JAMES B BELL**

Mailing Address 3200 LAKE JOHANNA BLVD  
 APT 173

City ARDEN HILLS	State MN	Zip Code 55112-7944
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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 ▼  
 360.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14389**

Amount of Each Receipt this Period  
 120.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	395.00
<b>TOTAL</b> 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 125
	<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. JAMES B BELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3200 LAKE JOHANNA BLVD  
 APT 173  
 City ARDEN HILLS State MN Zip Code 55112-7944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14614**  
 Amount of Each Receipt this Period  
 120.00  
 CONTRIBUTION

**B. MR BRUCE A BENNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 544 PACIFIC ST  
 #211  
 City SAN LUIS OBISPO State CA Zip Code 93401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14352**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mr. THEODORE E BIGGIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 1567  
 City KILLEEN State TX Zip Code 76540-1567  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14456**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> 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 12 OF 125  
(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. MARY A BINDER**

Mailing Address 2802 W 40TH AVE

City State Zip Code  
 KENNEWICK WA 99337

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 ▼  
 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14739**

Amount of Each Receipt this Period  
 17.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CHARLES BOOTH**

Mailing Address 8024 RIDGELY OAK RD

City State Zip Code  
 PARKVILLE MD 21234

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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14354**

Amount of Each Receipt this Period  
 300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mr. LOUIS G BORNMAN Jr.**

Mailing Address 12309 W 74TH TER

City State Zip Code  
 SHAWNEE KS 66216

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 ▼  
 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14514**

Amount of Each Receipt this Period  
 35.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 352.00

**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 125
	<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. LOUIS G BORNMAN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12309 W 74TH TER  
 City SHAWNEE State KS Zip Code 66216  
 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 ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14718**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**B. RICHARD BOURDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2151 JAMIESON AVE #910  
 City ALEXANDRIA State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14331**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. WILLIAM BRANDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11511 2125 EAST STREET  
 City PRINCETON State IL Zip Code 61356  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14362**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 14 OF 125  
(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. THOMAS BRIDGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 659 SPRINGWOOD DRIVE  
 City SAN JOSE State CA Zip Code 95129  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14444**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. THOMAS BRIDGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 659 SPRINGWOOD DRIVE  
 City SAN JOSE State CA Zip Code 95129  
 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 ▼ 275.00

Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11AI.14680**  
 Amount of Each Receipt this Period 75.00  
 CONTRIBUTION

**C. Mr. FRED BROADAWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17839 BOND  
 City OLATHE State KS Zip Code 66062-9114  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14330**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 125
	<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. NATHANIEL O BROOKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4004 LAKEWOOD DRIVE  
 City PHENIX CITY State AL Zip Code 36867  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14367**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. JOHN M BROWN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 N LAKEVIEW DRIVE  
 City ROGERS State AR Zip Code 72756  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14336**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. Mrs. BARBARA ANN CAGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6011 WINNWOOD DRIVE SE  
 City OLYMPIA State WA Zip Code 98513-5380  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14696**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	690.00
<b>TOTAL</b> 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 125
	<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. Mrs. KATHRYN A CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4383 THOMPSON PKWY  
 City JOHNSTOWN State CO Zip Code 80534-6420  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14629**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Mr. LLOYD W CARGILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2682 SHERMAN AVE #4  
 City MONTE VISTA State CO Zip Code 81144  
 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 ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14268**  
 Amount of Each Receipt this Period  
 325.00  
 CONTRIBUTION

**C. Mr. BRUCE CASTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1815 GINGERSNAP LANE  
 City LINCOLN State CA Zip Code 95648-8629  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14639**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	725.00
<b>TOTAL</b> 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 125
	<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. BRUCE P CHAMBERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2453 W CRESTVIEW AVE  
 City ROSEBURG State OR Zip Code 97471  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14262**  
 Amount of Each Receipt this Period 300.00  
 CONTRIBUTION

**B. Mr. DENNIS CHESTERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8304 CURRY PLACE  
 City ADELPHI State MD Zip Code 20783  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14338**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. Mr. ALVIN E CLARK Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19971 AUBURN PLACE  
 City ETHEL State MO Zip Code 63539-2506  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14510**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 125
	<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. Ms BEVERLY CLEMSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6210 OLD VALLEY CT  
 City ALEXANDRIA State VA Zip Code 22310-1540  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14623**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. BENJAMIN CLOUSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 442 FLINT STREET  
 City LAYTON State UT Zip Code 84041  
 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 ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14601**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. DAVID F COLLIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 DISTILLERS DRIVE  
 City BLAIRSVILLE State GA Zip Code 30512  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14387**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	690.00
<b>TOTAL</b> 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 125
	<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. HANNI M CORDES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 138 1/2 S 24TH ST  
 City PITTSBURGH State PA Zip Code 15203-2265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REITRED 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14472**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. Mr. DAVID O COX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 754 CREEKSIDE DRIVE SE  
 City SALEM State OR Zip Code 97306-9333  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14637**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mr. JOSEPH DELORIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1912 BRAD ST  
 City WAUKESHA State WI Zip Code 53188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL EMPLOYEE Occupation FEDERAL EMPLOYEE  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14695**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	540.00
<b>TOTAL</b> 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 125
	<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. WALTER DERIEUX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 N EDGEWOOD STREET  
 City ARLINGTON State VA Zip Code 22201  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14464**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. WILLIAM B DOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 712722  
 City SANTEE State CA Zip Code 92072  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14326**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. NATHANIEL DRAUGHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5917 N CARROLLTON AVE  
 City INDIANAPOLIS State IN Zip Code 46220  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14275**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 125
	<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. CARL D DUNCAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 ZION LEVEL CHURCH ROAD

City SEMORA	State NC	Zip Code 27343
----------------	-------------	-------------------

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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14291**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. PETER DWYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1198 LEDGEWOOD DRIVE

City WILLISTON	State VT	Zip Code 05495
-------------------	-------------	-------------------

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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14283**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C. Mr. WILLIAM P ECHOLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 212 ROSE DRIVE

City COCOA BEACH	State FL	Zip Code 32931-2768
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14481**

Amount of Each Receipt this Period  
 270.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	770.00
<b>TOTAL</b> 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 125
	<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. WILLIAM P ECHOLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 212 ROSE DRIVE  
 City COCOA BEACH State FL Zip Code 32931-2768  
 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 ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14641**  
 Amount of Each Receipt this Period  
 90.00  
 CONTRIBUTION

**B. Mr. ROBERT W EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10325 S TRAFALGAR DR  
 City OKLAHOMA CITY State OK Zip Code 73139-5506  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14707**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

**C. 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 ▼ 760.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14377**  
 Amount of Each Receipt this Period  
 190.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.00
<b>TOTAL</b> 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 23 OF 125  
(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 ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)  
**A. CAROL R EK**

Mailing Address 907 SYCAMORE PL

City State Zip Code  
MCPHERSON KS 67460-5804

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 ▼  
820.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015  
**Transaction ID : SA11AI.14710**

Amount of Each Receipt this Period  
60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. GENE ELLIOTT**

Mailing Address 10 ZANE GREY LN

City State Zip Code  
RENO NV 89523-9688

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 ▼  
700.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015  
**Transaction ID : SA11AI.14258**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mrs. CAROL A ESLINGER**

Mailing Address P. O. BOX 391

City State Zip Code  
GEORGETOWN CO 80444-9997

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 ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2015  
**Transaction ID : SA11AI.14305**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 810.00

**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 125  
(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. JOSEPH H EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7126 STATE ROUTE 534  
 City WEST FARMINGTON State OH Zip Code 44491  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14503**  
 Amount of Each Receipt this Period  
 205.00  
 CONTRIBUTION

**B. JOSEPH H EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7126 STATE ROUTE 534  
 City WEST FARMINGTON State OH Zip Code 44491  
 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 ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14729**  
 Amount of Each Receipt this Period  
 40.00  
 CONTRIBUTION

**C. ROBERT L EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 832 PONY EXPRESS HWY  
 City MARYSVILLE State KS Zip Code 66508  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14319**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 495.00  
**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 125
	<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. EDWARD L FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9056 E VOLTAIRE DR  
 City State Zip Code  
 SCOTTSDALE AZ 85260-4260  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FAA FEDERAL AVIATION ADMINISTRATION  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14263**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. Mr. EDWARD L FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9056 E VOLTAIRE DR  
 City State Zip Code  
 SCOTTSDALE AZ 85260-4260  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FAA FEDERAL AVIATION ADMINISTRATION  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 875.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14591**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**C. JOHN FRAGALE Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 HIGHBRIDGE XING APT 1113  
 City State Zip Code  
 ASHEVILLE NC 28803  
 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 ▼  
 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14516**  
 Amount of Each Receipt this Period  
 30.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	630.00
<b>TOTAL</b> 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 26 OF 125
	<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)**

Full Name (Last, First, Middle Initial) <b>A. JOHN FRAGALE Jr.</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	12			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
12			31			2015																
Mailing Address 24 HIGHBRIDGE XING APT 1113		<b>Transaction ID : SA11AI.14734</b>																				
City ASHEVILLE	State NC	Zip Code 28803																				
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 ▼ 370.00																					

Full Name (Last, First, Middle Initial) <b>B. Mrs. CHRISTINA R FRIAS</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>09</td><td></td><td></td><td>30</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	09			30			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
09			30			2015																
Mailing Address 3833 KIESTMEADOW DR		<b>Transaction ID : SA11AI.14488</b>																				
City DALLAS	State TX	Zip Code 75233-1619																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00																				
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 ▼ 225.00																					

Full Name (Last, First, Middle Initial) <b>C. Mrs. CHRISTINA R FRIAS</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	12			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
12			31			2015																
Mailing Address 3833 KIESTMEADOW DR		<b>Transaction ID : SA11AI.14685</b>																				
City DALLAS	State TX	Zip Code 75233-1619																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00																				
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																					

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	330.00
<b>TOTAL</b> 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 27 OF 125  
(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. CALVIN H FUCHS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 704 N BOWIE STREET  
 City State Zip Code  
 FREDERICKSBURG TX 78624  
 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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14475**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. PETER G GAUTHIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11355 E OLD SPANISH TRL  
 City State Zip Code  
 TUCSON AZ 85748-8338  
 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 ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14646**  
 Amount of Each Receipt this Period  
 220.00  
 CONTRIBUTION

**C. J GEARY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 170  
 City State Zip Code  
 BOSTON MA 02134  
 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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14341**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 670.00  
**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 28 OF 125
	<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. LINWOOD H GENUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1415 1ST STREET  
 City GLENARDEN State MD Zip Code 20706  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14344**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mr. GASTON L GIANNI Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3816 MULBERRY POINT CT  
 City DUMFRIES State VA Zip Code 22025-1836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14694**  
 Amount of Each Receipt this Period  
 210.00  
 CONTRIBUTION

**C. Mr. DANIEL T GOGGIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3001 VEAZEY TER NW #1513  
 City WASHINGTON State DC Zip Code 20008  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14339**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 710.00  
**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 29 OF 125  
(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. Ms RENIE A GOODWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2201 MONROE ST APT 1201  
 City SANTA CLARA State CA Zip Code 95050-3265  
 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 ▼ 225.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14484**  
 Amount of Each Receipt this Period 225.00  
 CONTRIBUTION

**B. Ms RENIE A GOODWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2201 MONROE ST APT 1201  
 City SANTA CLARA State CA Zip Code 95050-3265  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14686**  
 Amount of Each Receipt this Period 75.00  
 CONTRIBUTION

**C. WALEED K GOSAYNIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 402 WEST 31ST ST  
 City HOLLAND State MI Zip Code 49423-6956  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14610**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 30 OF 125  
(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. FREDRICK C GRABFELDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 136A RUE CHARMILLE RD  
 City State Zip Code  
 FORT WASHINGTON PA 19034-1225  
 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 ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14701**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

**B. Mr. J CARROLL GRAHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1307 FOREST AVENUE  
 City State Zip Code  
 RICHMOND VA 23229-5805  
 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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14594**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. Ms WILMA GRANT MBA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 BROOKFIELD CIRCLE  
 City State Zip Code  
 STERLING VA 20164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FEDERAL GOVERNMENT FEDERAL EMPLOYEE  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14714**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 690.00  
**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 31 OF 125  
(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. DONALD J GREEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1128 CHESHIRE LANE  
 City ST LOUIS State MO Zip Code 63119-4814  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14424**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. ROBERT F GREEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 7  
 City SINGERS GLEN State VA Zip Code 22850  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14420**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. CRUCITA GROVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14516 RUSTLING LEAVES LANE  
 City CENTREVILLE State VA Zip Code 20121  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14306**  
 Amount of Each Receipt this Period  
 250.00  
 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: PAGE 32 OF 125  
(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. PETER D GUERRANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 352 CLOUDE'S MILL DRIVE  
 City ALEXANDRIA State VA Zip Code 22304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14399**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. Mr. THOMAS A HAGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 EAST WING DRIVE  
 City SEDONA State AZ Zip Code 86336-9700  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14446**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C. Mr. THEODORE M HANNAH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11106 BYBEE STREET  
 City SILVER SPRING State MD Zip Code 20902-3204  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14400**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 33 OF 125
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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. JOHN HARPOLD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2613 11TH ST S  
 City ARLINGTON State VA Zip Code 22204  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14713**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

**B. Ms TERRY P HEIDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 94 DEER SPRING COURT  
 City PALM DESERT State CA Zip Code 92211  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14604**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. EDWARD J HELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1525 HOWZE ST  
 City EL PASO State TX Zip Code 79903-2006  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14430**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	690.00
<b>TOTAL</b> 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 34 OF 125  
(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. EVA HELLER**

Mailing Address **2732 SO GARFIELD STREET**

City State Zip Code  
**DENVER CO 80210**

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 ▼  
**245.00**

Date of Receipt  
**09 / 30 / 2015**  
**Transaction ID : SA11AI.14358**

Amount of Each Receipt this Period  
**245.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. EVA HELLER**

Mailing Address **2732 SO GARFIELD STREET**

City State Zip Code  
**DENVER CO 80210**

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 ▼  
**246.00**

Date of Receipt  
**12 / 31 / 2015**  
**Transaction ID : SA11AI.14743**

Amount of Each Receipt this Period  
**1.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mr. JAMES L HENDERSON**

Mailing Address **3007 BERRYWOOD DR**

City State Zip Code  
**HUMBOLDT TN 38343**

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 ▼  
**275.00**

Date of Receipt  
**09 / 30 / 2015**  
**Transaction ID : SA11AI.14517**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **271.00**

**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 35 OF 125
	<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. JOHN C HETZLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 38

City NORRIS	State TN	Zip Code 37828-0038
----------------	-------------	------------------------

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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14436**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

**B. 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 ▼  
 345.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14441**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**C. Ms TREENA R HOLM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 304

City COLORADO CITY	State AZ	Zip Code 86021-5000
-----------------------	-------------	------------------------

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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14611**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 36 OF 125  
(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. Ms SHIRLEY A HONEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6980 HUNDRED ACRE DR  
 City COCOA State FL Zip Code 32927-2978  
 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 ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14643**  
 Amount of Each Receipt this Period  
 215.00  
 CONTRIBUTION

**B. ALBERT H HORN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1816 SOUTH CT  
 City BRYAN State OH Zip Code 43506  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14469**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. FRANK C IMPINNA Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3604 SERAMONTE DRIVE  
 City HIGHLANDS RANCH State CO Zip Code 80129  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14333**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 665.00  
**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 37 OF 125  
(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. PATRICIA JACK**  
 Mailing Address 4021 DAVID LANE  
 City ALEXANDRIA State VA Zip Code 22311  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14689**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CATHERINE JACKSON**  
 Mailing Address 40809 RAY DRIVE  
 City CLINTON TOWNSHIP State MI Zip Code 48038  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14375**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. WILLIAM C JENKINS**  
 Mailing Address 4442 36TH STREET S  
 City ARLINGTON State VA Zip Code 22206  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14449**  
 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 38 OF 125
	<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. DANIEL JENNER**

Mailing Address 1633 BUFFALO DRIVE

City GROVE State OK Zip Code 74344-5514

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 ▼  
 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : SA11AI.14615**

Amount of Each Receipt this Period  
 209.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CLAUDE ROY JOBBER**

Mailing Address 4600 S FOUR MILE RUN DRIVE #620

City ARLINGTON State VA Zip Code 22204

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  
 09 / 30 / 2015

**Transaction ID : SA11AI.14308**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PIERCE J JOHNSON**

Mailing Address 17439 FOUR SEASONS DR

City DUMFRIES State VA Zip Code 22025-1872

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 ▼  
 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.14515**

Amount of Each Receipt this Period  
 30.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	489.00
<b>TOTAL</b> 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 39 OF 125
	<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. PIERCE J JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17439 FOUR SEASONS DR  
 City DUMFRIES State VA Zip Code 22025-1872  
 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 ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14736**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. EDWARD G JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1049 ALVARADO TER  
 City WALLA WALLA State WA Zip Code 99362  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14415**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. ARTHUR A JUTTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 THE ORCH  
 City FAYETTEVILLE State NY Zip Code 13066  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14466**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	430.00
<b>TOTAL</b> 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 40 OF 125  
(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. MILES KAHN**

Mailing Address 14416 PECAN DRIVE

City State Zip Code  
 ROCKVILLE MD 20853

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

Name of Employer Occupation  
 FEDERAL GOVERNMENT FEDERAL EMPLOYEE

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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14295**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. Mr. GRANVILLE F KIBBEE**

Mailing Address PO BOX 822

City State Zip Code  
 QUINCY CA 95971-0822

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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14398**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mr. GRANVILLE F KIBBEE**

Mailing Address PO BOX 822

City State Zip Code  
 QUINCY CA 95971-0822

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 ▼  
 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14660**

Amount of Each Receipt this Period  
 75.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00

**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 41 OF 125  
(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. JAMES L KIMMERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8326 E MOUNT MORRIS ROAD  
 City OTISVILLE State MI Zip Code 48463-9463  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14621**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Ms MAEVE E KING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1412 N 2ND STREET  
 City ABERDEEN State SD Zip Code 57401-1922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14732**  
 Amount of Each Receipt this Period  
 210.00  
 CONTRIBUTION

**C. WILLIAM J KING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W5032 GARTON RD  
 City PLYMOUTH State WI Zip Code 53073-2851  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14706**  
 Amount of Each Receipt this Period  
 240.00  
 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 42 OF 125
	<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. GARY W KLEIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4504 BOSTON WAY  
 City OXNARD State CA Zip Code 93033  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14602**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. SHARON KNUTSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 TULIP LANE  
 City ADA State MN Zip Code 56510  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14511**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mr. GEORGE V KREIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1931 CRESTMONT DRIVE  
 City SAN JOSE State CA Zip Code 95124-1106  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14617**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 43 OF 125  
(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. JOHN G KREMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 637 SUMMIT DRIVE  
 City BUFFALO State WY Zip Code 82834  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14273**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Dr. JOHN S KRUGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1320 BRINKLEY LANE  
 City THE VILLAGES State FL Zip Code 32163-2589  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14608**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. Rep. RAY LAHOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5612 West Grande Circle  
 City CLINTON PEORIA State IL Zip Code 61615  
 FEC ID number of contributing federal political committee. **C H4IL18059**  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14302**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 44 OF 125  
(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. CHARLES R LAMPART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 HAGAN DRIVE  
 City NEW HOPE State PA Zip Code 18938-1010  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14428**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. RICHARD LATSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23275 AMBER VALLEY DRIVE  
 City SOUTH BEND State IN Zip Code 46628  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14271**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. MARILYNNE E LAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 62811 MONTARA DRIVE  
 City BEND State OR Zip Code 97701  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14439**  
 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 45 OF 125
	<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. Ms GLINDA B LEACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7222 SW 23RD CT  
 City TOPEKA State KS Zip Code 66614-6087  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14340**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mr. JOHN R LEDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 852 CROTON RD  
 City ROCKLEDGE State FL Zip Code 32955-4145  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14432**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. Mrs. ADA M LEIKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5960 16TH STREET TER  
 City GREAT BEND State KS Zip Code 67530-6402  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14702**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	590.00
<b>TOTAL</b> 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 46 OF 125  
(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. ARTHUR G LEMKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4557 KIRKWOOD CIRCLE  
 City SAINT PAUL State MN Zip Code 55123-1909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14405**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mr. ARTHUR G LEMKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4557 KIRKWOOD CIRCLE  
 City SAINT PAUL State MN Zip Code 55123-1909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14691**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**C. HENRY C LESSING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23400 VIA VENTURA # V22  
 City CUPERTINO State CA Zip Code 95014-6518  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14452**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 47 OF 125  
(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. ZELDA C LEVERETT**  
 Mailing Address 3308 S WILLIS STREET  
 City State Zip Code  
 ABILENE TX 79605  
 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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14278**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. Mr. LARRY F LIGHTFOOT**  
 Mailing Address 2709 LA STRADA GRANDE HTS  
 City State Zip Code  
 COLORADO SPRINGS CO 80906  
 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 ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14742**  
 Amount of Each Receipt this Period  
 1.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GAYLENE LOOKEBILL**  
 Mailing Address 2305 WINDMERE DRIVE  
 City State Zip Code  
 EDMOND OK 73034  
 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 ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14312**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 48 OF 125
	<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. JEAN K LOWDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6310 N RADCLIFFE STREET  
 City BRISTOL State PA Zip Code 19007  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14458**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. MICHAEL G LOWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 766 WESTGLEN VILLAGE DRIVE  
 City BALLWIN State MO Zip Code 63021  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14477**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. DORA MACDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11259 LEO COLLINS DRIVE  
 City EL PASO State TX Zip Code 79936  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14473**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 49 OF 125
	<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. HENRY J MAGEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3075 ALA POHA PLACE  
 APT 2012  
 City HONOLULU State HI Zip Code 96818  
 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 ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14385**  
 Amount of Each Receipt this Period  
 245.00  
 CONTRIBUTION

**B. CAROL MAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7310 CALICO DRIVE  
 City LAS CRUCES State NM Zip Code 88012  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14289**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. CAROL MAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7310 CALICO DRIVE  
 City LAS CRUCES State NM Zip Code 88012  
 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 ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14740**  
 Amount of Each Receipt this Period  
 5.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 50 OF 125
	<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. GERALD R MAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7310 CALICO DRIVE  
 City LAS CRUCES State NM Zip Code 88012  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14328**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mr. JOHN W. MANGELS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2653 UNICORN CT  
 City HERNDON State VA Zip Code 20171-2425  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14598**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. MAURICE MARGULIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12011 HITCHING POST LN  
 City ROCKVILLE State MD Zip Code 20852-4425  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14394**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 51 OF 125
	<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 ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14712**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. MICHAEL C MARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1207 GALWAY CT  
 City HUMMELSTOWN State PA Zip Code 17036  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14422**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. 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 ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14364**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 52 OF 125
	<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. HOLLIS L MARSHALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6542 BELGRAVE

City GARDEN GROVE	State CA	Zip Code 92845
----------------------	-------------	-------------------

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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14300**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. WILLIAM MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 994 WARBONNET TRAIL

City MINERAL	State VA	Zip Code 23117
-----------------	-------------	-------------------

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 ▼  
 560.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14518**

Amount of Each Receipt this Period  
 20.00

CONTRIBUTION

**C. WILLIAM MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 994 WARBONNET TRAIL

City MINERAL	State VA	Zip Code 23117
-----------------	-------------	-------------------

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 ▼  
 590.00

Date of Receipt  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14731**

Amount of Each Receipt this Period  
 30.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 53 OF 125
	<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. MANFRED M MASUDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1216 ALA MAHAMOE STREET  
 City HONOLULU State HI Zip Code 96819  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14480**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B. Ms MARY MCCLANAHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 HURON CT  
 City BOULDER State CO Zip Code 80303-4415  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14596**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. Mr. DONALD W MCCONACHIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2233 VIEWPOINT DR  
 City NAPLES State FL Zip Code 34110  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14716**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> 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 54 OF 125
	<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. JILL MCLEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11518 NE 8TH STREET  
 City VANCOURVER State WA Zip Code 98684  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14407**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. MARY MCMANUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1715 PINE HILL DRIVE  
 City DES PERES State MO Zip Code 63131  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14256**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. Mr. DAVID MCMEANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1330 MASSACHUSETTS AVE  
 NW APT 1025  
 City WASHINGTON State DC Zip Code 20005-4134  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14587**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> 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 55 OF 125  
(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. MARSHAL L MERRIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2119 PASEO DEL ORO  
 City SAN JOSE State CA Zip Code 95124-2036  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14381**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B. MARSHAL L MERRIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2119 PASEO DEL ORO  
 City SAN JOSE State CA Zip Code 95124-2036  
 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 ▼ 400.00

Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11AI.14613**  
 Amount of Each Receipt this Period 150.00  
 CONTRIBUTION

**C. Ms KATHERINE MERRITT-BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17704 STONERIDGE DR  
 City NORTH POTOMAC State MD Zip Code 20878-1111  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14277**  
 Amount of Each Receipt this Period 250.00  
 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 56 OF 125
	<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. RAYMOND MEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3411 SLADE CT  
 City FALLS CHURCH State VA Zip Code 22042-3918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14357**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Mr. CARL G MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45-312 KOA KAHIKO STREET  
 City KANEHOE State HI Zip Code 96744  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14471**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. EDWARD Y MIYATA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 560 HANANA PLACE  
 City HONOLULU State HI Zip Code 96817  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14403**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 57 OF 125  
(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. ROBERT A MOAN**

Mailing Address 63346 CLIFFWOOD DRIVE

City State Zip Code  
 PR DU CHIEN WI 53821

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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14447**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. M C MORITZ Jr.**

Mailing Address 2811 PLYERS MILL ROAD

City State Zip Code  
 SILVER SPRING MD 20902

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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14360**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GORDON E MORSE**

Mailing Address 65 RIVER HEIGHTS DRIVE

City State Zip Code  
 MASON CITY IA 50401

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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14442**

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 58 OF 125
	<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)**

Full Name (Last, First, Middle Initial) <b>A. ANITA MORSMAN</b>		Date of Receipt
Mailing Address <b>PO BOX 508</b>		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
<b>ROSMAN</b>	<b>NC</b>	<b>28772</b>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.14325</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
<b>RETIRED</b>	<b>RETIRED</b>	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	<b>CONTRIBUTION</b>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. NORMA J. MUELLER</b>		Date of Receipt
Mailing Address <b>1324 JORDAN DRIVE</b>		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
<b>SHADY SIDE</b>	<b>MD</b>	<b>20764-9677</b>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.14635</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
<b>RETIRED</b>	<b>RETIRED</b>	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	<b>CONTRIBUTION</b>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="200.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. OLEG V NEDZELNITSKY</b>		Date of Receipt
Mailing Address <b>128 S LOCUST STREET APT #B</b>		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
<b>RIDGECREST</b>	<b>CA</b>	<b>93555-4400</b>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.14627</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
<b>RETIRED</b>	<b>RETIRED</b>	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	<b>CONTRIBUTION</b>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="200.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="650.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 59 OF 125
	<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. DENNIS NEMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 N LAKE RD  
 City CASTLEWOOD State SD Zip Code 57223-2301  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14427**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Mrs. ABIGAIL K NISHIDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2411 AUHUHU STREET  
 City PEARL CITY State HI Zip Code 96782-1041  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14652**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. RONALD NOWODZELSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 330 N PARK AVE  
 City AURORA State IL Zip Code 60506  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14513**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 60 OF 125
	<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. WEBSTER NUNN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 136 W GROVE ST  
 City RIALTO State CA Zip Code 92376-5062  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14335**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Ms LETITIA OCHOA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1115 BONITA DRIVE  
 City COLTON State CA Zip Code 92324-1766  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14649**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. HAROLD H ORR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1346 COOLIAGE  
 City SAGINAW State MI Zip Code 48638  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14401**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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 61 OF 125
	<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. CARLOS V OTERO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5560 TAMBERLANE CIR  
 APT 223  
 City PALM BEACH GARDENS State FL Zip Code 33418  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14280**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. CAROL L PADILLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7724 WOODCHAT STREET  
 City NORTH LAS VEGAS State NV Zip Code 89084  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14348**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

**C. Mr. JOHN E PALEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1362 RANCHO RD  
 City GARDENVILLE State NV Zip Code 89460-8443  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14711**  
 Amount of Each Receipt this Period  
 220.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	695.00
<b>TOTAL</b> 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 62 OF 125  
(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. YOUNG PARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 BEVERLY ROAD  
 City ENGLEWOOD CLIFFS State NJ Zip Code 07632  
 Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14390**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION  
 FEC ID number of contributing federal political committee. C  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

**B. Mr. GREGG PERICICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21717 HALLDALE AVE  
 City TORRANCE State CA Zip Code 90501  
 Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14497**  
 Amount of Each Receipt this Period 225.00  
 CONTRIBUTION  
 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 ▼ 225.00

**C. Mr. GREGG PERICICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21717 HALLDALE AVE  
 City TORRANCE State CA Zip Code 90501  
 Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11AI.14665**  
 Amount of Each Receipt this Period 75.00  
 CONTRIBUTION  
 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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 63 OF 125
	<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)**

Full Name (Last, First, Middle Initial) <b>A. DAVID PERKINS</b>		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>09</td> <td>/</td> <td>30</td> <td>/</td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	30	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y								
09	/	30	/	2015								
Mailing Address 8 ANTIGUA ROAD		<b>Transaction ID : SA11AI.14411</b>										
City SANTA FE	State NM	Zip Code 87508										
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) <b>B. Mr. VICTOR F PETERSON</b>		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>12</td> <td>/</td> <td>31</td> <td>/</td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	12	/	31	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y								
12	/	31	/	2015								
Mailing Address 12806 S 191ST AVE		<b>Transaction ID : SA11AI.14722</b>										
City BUCKEYE	State AZ	Zip Code 85326										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 201.00										
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 ▼ 201.00											

Full Name (Last, First, Middle Initial) <b>C. PAULA G PISEL</b>		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>09</td> <td>/</td> <td>30</td> <td>/</td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	09	/	30	/	2015
M M M	/	D D D	/	Y Y Y Y Y Y								
09	/	30	/	2015								
Mailing Address 2025 BLUE SPRUCE COURT		<b>Transaction ID : SA11AI.14417</b>										
City BELLEVILLE	State IL	Zip Code 62226										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00										
Name of Employer FEDERAL GOVERNMENT	Occupation FEDERAL EMPLOYEE	CONTRIBUTION										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	601.00
<b>TOTAL</b> 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 64 OF 125
	<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. MICHAEL R POLSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3912 NW CHAPMAN DRIVE  
 City BLUE SPRINGS State MO Zip Code 64015  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14379**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mrs. ELIZABETH J PORTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5640 VERNOR OAK COURT UNIT 1  
 City SACRAMENTO State CA Zip Code 95841  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14645**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. RICHARD R REECE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2503 BEECHWOOD CT  
 City ELIZABETHTON State TN Zip Code 37643  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14285**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 65 OF 125  
(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. JASON H RESTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2519 MYRTLE CT  
 City FORT COLLINS State CO Zip Code 80521-3111  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14606**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Ms CHERRY N RHEINER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10401 WITHIN HTS DR  
 City BAKERSFIELD State CA Zip Code 93311  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14343**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. LINDA RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 E CEDAR STREET  
 City HALLSVILLE State TX Zip Code 75650  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14508**  
 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: PAGE 66 OF 125  
(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. LINDA RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 E CEDAR STREET  
 City HALLSVILLE State TX Zip Code 75650  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14721**  
 Amount of Each Receipt this Period 50.00  
 CONTRIBUTION

**B. MARSHALL L RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 E CEDAR STREET  
 City HALLSVILLE State TX Zip Code 75650-6134  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14619**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. Mrs. YOGGI RILEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8036 WHITSETT AVE  
 City NORTH HOLLYWOOD State CA Zip Code 91605-1231  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14656**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 67 OF 125
	<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. MICHAEL J RIORDAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 W 2ND AVE APT #1  
 City LITITZ State PA Zip Code 17543-2322  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14704**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

**B. JONATHAN RITCHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 1518  
 City LYNNWOOD State WA Zip Code 98046  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14495**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

**C. JONATHAN RITCHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 1518  
 City LYNNWOOD State WA Zip Code 98046  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14666**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	540.00
<b>TOTAL</b> 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 68 OF 125
	<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. LINDA L ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 748

City LAKE WALES	State FL	Zip Code 33859
--------------------	-------------	-------------------

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  
 09 / 30 / 2015  
**Transaction ID : SA11Al.14371**

Amount of Each Receipt this Period  
 200.00

CONTRIBUTION

**B. Ms JEANETTE M ROSENKOETTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2350 MARTIN

City FLORISSANT	State MO	Zip Code 63033-2047
--------------------	-------------	------------------------

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 ▼  
 275.00

Date of Receipt  
 12 / 31 / 2015  
**Transaction ID : SA11Al.14737**

Amount of Each Receipt this Period  
 25.00

CONTRIBUTION

**C. Mr. LANNY ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7450 ILLAHEE RD NE

City BREMERTON	State WA	Zip Code 98311-9431
-------------------	-------------	------------------------

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 ▼  
 420.00

Date of Receipt  
 12 / 31 / 2015  
**Transaction ID : SA11Al.14589**

Amount of Each Receipt this Period  
 420.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	645.00
<b>TOTAL</b> 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 69 OF 125  
(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. STEVEN ROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15212 MCELROY ROAD  
 City ARLINGTON State WA Zip Code 98223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14453**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B. KENT N RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 S 89TH AVE  
 City YAKIMA State WA Zip Code 98908  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14425**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**C. ROBERT J RUST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 80631  
 City SEATTLE State WA Zip Code 98108  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14297**  
 Amount of Each Receipt this Period 250.00  
 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 70 OF 125
	<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. Ms WILHELMINA SANTIFUL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 758 LANTZ ROAD  
 City EDINBURG State VA Zip Code 22824-3073  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14676**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. CAROL A SARIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2018 PENDERBROOKE DRIVE  
 City CROWNSVILLE State MD Zip Code 21032  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14462**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. VINCENT M SARITI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 236 KNOX AVE  
 City CLIFFSIDE PARK State NJ Zip Code 07010  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14365**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 71 OF 125  
(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. STANLEY E SARTAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3229 W SHANDON AVE  
 City MIDLAND State TX Zip Code 79705  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14485**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**B. STANLEY E SARTAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3229 W SHANDON AVE  
 City MIDLAND State TX Zip Code 79705  
 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 ▼ 275.00

Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11AI.14683**  
 Amount of Each Receipt this Period 75.00  
 CONTRIBUTION

**C. Mr. SAMUEL A SBARRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 802 POTOMAC AVE  
 City FAIRMONT State WV Zip Code 26554-4321  
 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 ▼ 225.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14491**  
 Amount of Each Receipt this Period 225.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 72 OF 125  
(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. SAMUEL A SBARRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 802 POTOMAC AVE  
 City FAIRMONT State WV Zip Code 26554-4321  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14664**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**B. FRELING H SCARBOROUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5846 DYKES POND ROAD  
 City LAKE PARK State GA Zip Code 31636-2714  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14633**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mr. DENNIS SCHABACKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12650 STOA CT  
 City HERNDON State VA Zip Code 20170-2861  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14487**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 73 OF 125  
(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. DENNIS SCHABACKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12650 STOA CT  
 City HERNDON State VA Zip Code 20170-2861  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14648**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**B. Mr. ROBERT L SCHMITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3002 VIBURNUM PL  
 City OLNEY State MD Zip Code 20832-3073  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14502**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

**C. Mr. ROBERT L SCHMITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3002 VIBURNUM PL  
 City OLNEY State MD Zip Code 20832-3073  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14693**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00  
**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 74 OF 125
	<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. Ms LOIS SCHUTTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1220 NORTH STUART STREET  
 City ARLINGTON State VA Zip Code 22201-4810  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14429**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Mrs. EVELYN J SEABROOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2506 CARMEL LN  
 City EUSTIS State FL Zip Code 32726-4484  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14726**  
 Amount of Each Receipt this Period  
 40.00  
 CONTRIBUTION

**C. ROBERT M SELLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 ETHAN ALLEN DRIVE  
 City ACTON State MA Zip Code 01720  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14323**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	490.00
<b>TOTAL</b> 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 75 OF 125
	<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. WILLIAM SHACKELFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14429 ROUND LICK LANE  
 City CENTREVILLE State VA Zip Code 20120  
 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 ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14264**  
 Amount of Each Receipt this Period  
 340.00  
 CONTRIBUTION

**B. WILLIAM SHACKELFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14429 ROUND LICK LANE  
 City CENTREVILLE State VA Zip Code 20120  
 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 ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14738**  
 Amount of Each Receipt this Period  
 20.00  
 CONTRIBUTION

**C. YOLANDA SHANNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7104 ARROYO DEL OSO AVE NE  
 City ALBUQUERQUE State NM Zip Code 87109  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14317**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	610.00
<b>TOTAL</b> 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 76 OF 125
	<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)**

**A. EUGENE F SHAW Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2005 GOLF COURSE DRIVE  
 City RESTON State VA Zip Code 20191  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14355**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. JOSEPH C SHEPARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PSC 450 BOX #5  
 City APO State AP Zip Code 96206  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14314**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. Mr. JACK SHIPLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6238 LAWSON DR  
 City HAYMARKET State VA Zip Code 20169-5431  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14492**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> 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 77 OF 125  
(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. JACK SHIPLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6238 LAWSON DR  
 City HAYMARKET State VA Zip Code 20169-5431  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14661**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**B. DENNIS SIMMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address HC-01 BOX 4712  
 City RINCON State PR Zip Code 00677  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14437**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mrs. BONNIE SLADE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4400 W CREEKSIDE DR  
 APT 101  
 City SIOUX FALLS State SD Zip Code 57106  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14647**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 78 OF 125  
(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. ERNEST H SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 792 FIVE POINTS DR  
 City State Zip Code  
 FRANKLIN IN 46131  
 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 ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14600**  
 Amount of Each Receipt this Period  
 350.00  
 CONTRIBUTION

**B. JOSEPH P SMITH III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5009 ALTHEA DRIVE  
 City State Zip Code  
 ANNANDALE VA 22003  
 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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14433**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mr. JAMES SNYDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1506 NOTRE DAME DR  
 City State Zip Code  
 DAVIS CA 95616-0849  
 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 M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14451**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 79 OF 125
	<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. JAMES K SPRIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 CORTES ST #22  
 City BOSTON State MA Zip Code 02116  
 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 ▼ 225.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : SA11AI.14498**  
 Amount of Each Receipt this Period 225.00  
 CONTRIBUTION

**B. Mr. JAMES K SPRIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 CORTES ST #22  
 City BOSTON State MA Zip Code 02116  
 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 12 / 31 / 2015  
**Transaction ID : SA11AI.14667**  
 Amount of Each Receipt this Period 75.00  
 CONTRIBUTION

**C. JAMES G STEPHENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 404 ALHAMBRA ROAD  
 City VENICE State FL Zip Code 34285  
 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 09 / 30 / 2015  
**Transaction ID : SA11AI.14373**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 80 OF 125
	<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. ERNEST M STEVENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 443 THOMPSON STREET  
 City HALIFAX State MA Zip Code 02338  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14287**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Ms MARY E STRASSBURGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3318 W DENISON AVE  
 City DAVENPORT State IA Zip Code 52804  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14687**  
 Amount of Each Receipt this Period  
 220.00  
 CONTRIBUTION

**C. CORNELIUS STRIPLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23415 KINGSTON CREEK ROAD  
 City CALIFORNIA State MD Zip Code 20619  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14293**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	720.00
<b>TOTAL</b> 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 81 OF 125  
(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. PATRICIA A STRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 AMBER LANE  
 City LAFAYETTE State CA Zip Code 94549  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14350**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Ms MARY N STULTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 262 DEERFIELD CIRCLE  
 City KINGWOOD State WV Zip Code 26537  
 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 / D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14395**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. Mrs. JUDY SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3310 MEADOW WAY  
 City WEST FARGO State ND Zip Code 58078  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14413**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 82 OF 125
	<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. JUDY SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3310 MEADOW WAY  
 City WEST FARGO State ND Zip Code 58078  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14631**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**B. Mr. WAYNE TAKARA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3329 KANAINA AVE 101  
 City HONOLULU State HI Zip Code 96815-4263  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14625**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. Mr. CLIFFORD K TAMANAHA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7324 NUULOLO ST  
 City HONOLULU State HI Zip Code 96825-2540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14316**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> 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 83 OF 125
	<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. ALAN W TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3144 GRACEFIELD RD  
 APT 407  
 City SILVER SPRING State MD Zip Code 20904-5883  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14299**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. BARBARA S TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4251 HATTON POINT LANE  
 City PORTSMOUTH State VA Zip Code 23703  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14409**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**C. STEPHEN L THOMAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1720 DEVONSHIRE DRIVE  
 APT 105  
 City COLUMBIA State SC Zip Code 29204  
 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 ▼ 205.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14505**  
 Amount of Each Receipt this Period  
 205.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	655.00
<b>TOTAL</b> 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 84 OF 125
	<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. STEPHEN L THOMAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1720 DEVONSHIRE DRIVE  
 APT 105  
 City COLUMBIA State SC Zip Code 29204  
 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 ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14709**  
 Amount of Each Receipt this Period  
 60.00  
 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 ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14468**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. Mr. LINDA C VALENCIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6519 KAAS TRAIL COURT NE  
 City ALBUQUERQUE State NM Zip Code 87111  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14479**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.00
<b>TOTAL</b> 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 85 OF 125
	<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. THEODORE VAN HINTUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29913 WOOD DUCK WAY  
 City BUENA VISTA State CO Zip Code 81211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14741**  
 Amount of Each Receipt this Period  
 3.00  
 CONTRIBUTION

**B. CORAL VAN HOOSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4605 S PRIEST DRIVE LOT259  
 City TEMPE State AZ Zip Code 85282-6535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14499**  
 Amount of Each Receipt this Period  
 210.00  
 CONTRIBUTION

**C. CORAL VAN HOOSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4605 S PRIEST DRIVE LOT259  
 City TEMPE State AZ Zip Code 85282-6535  
 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 ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14678**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	288.00
<b>TOTAL</b> 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 86 OF 125  
(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. GEORGIA ANN VANIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2945 POND VIEW CT  
 City MARIETTA State GA Zip Code 30062  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14310**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. PATRICIA VELLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 785 WALNUT STREET  
 City NEW MILFORD State NJ Zip Code 07646  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14321**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. Mr. IRVIN VODOVOZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 485 SURREY DR  
 City GRANTS PASS State OR Zip Code 97526-8866  
 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 ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14483**  
 Amount of Each Receipt this Period  
 202.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 752.00  
**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 87 OF 125
	<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)**

Full Name (Last, First, Middle Initial) <b>A. Mr. IRVIN VODOVOZ</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	12			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
12			31			2015																
Mailing Address 485 SURREY DR		<b>Transaction ID : SA11AI.14644</b>																				
City GRANTS PASS	State OR	Zip Code 97526-8866																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.00																				
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 ▼ 286.00																					

Full Name (Last, First, Middle Initial) <b>B. Mrs. SANDRA L. VOGEL</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>31</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	12			31			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
12			31			2015																
Mailing Address 13906 WENRICH		<b>Transaction ID : SA11AI.14592</b>																				
City SAN ANTONIO	State TX	Zip Code 78233-5518																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 280.00																				
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 ▼ 280.00																					

Full Name (Last, First, Middle Initial) <b>C. JAMES K WAGNER</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>09</td><td></td><td></td><td>30</td><td></td><td></td><td>2015</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	09			30			2015			
M	M	/	D	D	/	Y	Y	Y	Y													
09			30			2015																
Mailing Address 2426 E SCHIEWE ROAD		<b>Transaction ID : SA11AI.14489</b>																				
City PORT CLINTON	State OH	Zip Code 43452																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00																				
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 ▼ 225.00																					

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	589.00
<b>TOTAL</b> 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 88 OF 125  
(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. JAMES K WAGNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2426 E SCHIEWE ROAD  
 City PORT CLINTON State OH Zip Code 43452  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14655**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**B. Mr. TERRY WAMBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 KINGSBURY CIR  
 City CROSSVILLE State TN Zip Code 38558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14261**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**C. Mr. TERRY WAMBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 KINGSBURY CIR  
 City CROSSVILLE State TN Zip Code 38558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14590**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 675.00  
**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 89 OF 125  
(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. ALICE K WEED**

Mailing Address 1519 PLEASANT VIEW LANE

City N MANKATO      State MN      Zip Code 56003

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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14346**

Amount of Each Receipt this Period  
 240.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ALICE K WEED**

Mailing Address 1519 PLEASANT VIEW LANE

City N MANKATO      State MN      Zip Code 56003

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

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14735**

Amount of Each Receipt this Period  
 30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mr. HAROLD L WEED**

Mailing Address 1519 PLEASANT VIEW DR

City NORTH MANKATO      State MN      Zip Code 56003

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 ▼  
 271.00

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14378**

Amount of Each Receipt this Period  
 271.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 541.00

**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 90 OF 125  
(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. HAROLD L WEED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1519 PLEASANT VIEW DR  
 City NORTH MANKATO State MN Zip Code 56003  
 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 ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14730**  
 Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

**B. ED WESTMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6341 MARQUITA  
 City DALLAS State TX Zip Code 75214-3327  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14435**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**C. HAROLD L WHIPPLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1012 RIDGECREST ROAD  
 City EDMOND State OK Zip Code 73013  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14396**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 330.00  
**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 91 OF 125
	<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. HAROLD L WHIPPLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1012 RIDGECREST ROAD  
 City EDMOND State OK Zip Code 73013  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14720**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**B. Ms BETTY J WHITCOMB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2624 HALIBUT POINT ROAD  
 City SITKA State AK Zip Code 99835  
 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 ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14724**  
 Amount of Each Receipt this Period  
 230.00  
 CONTRIBUTION

**C. LOREN WIDEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3201 1ST STREET NE  
 City SAINT PETERSBURG State FL Zip Code 33704  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14303**  
 Amount of Each Receipt this Period  
 275.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	555.00
<b>TOTAL</b> 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 92 OF 125
	<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. KEN WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11011 US HWY 61

City STA GENEVIEVE	State MO	Zip Code 63670-8417
-----------------------	-------------	------------------------

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 ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14493**

Amount of Each Receipt this Period  
 225.00

CONTRIBUTION

**B. Mr. KEN WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11011 US HWY 61

City STA GENEVIEVE	State MO	Zip Code 63670-8417
-----------------------	-------------	------------------------

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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14662**

Amount of Each Receipt this Period  
 75.00

CONTRIBUTION

**C. Mr. RICHARD WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15825 269TH ST E

City GRAHAM	State WA	Zip Code 98338
----------------	-------------	-------------------

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 ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14727**

Amount of Each Receipt this Period  
 205.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	505.00
<b>TOTAL</b> 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 93 OF 125
	<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. Ms MARY WINFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37211 CHARTER OAKS BLVD  
 City CLINTON TOWNSHIP State MI Zip Code 48036  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14494**  
 Amount of Each Receipt this Period  
 225.00  
 CONTRIBUTION

**B. Ms MARY WINFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37211 CHARTER OAKS BLVD  
 City CLINTON TOWNSHIP State MI Zip Code 48036  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14692**  
 Amount of Each Receipt this Period  
 75.00  
 CONTRIBUTION

**C. M ANN WOLFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 N SPOUT RUN PKWY B408  
 City ARLINGTON State VA Zip Code 22201  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14392**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 94 OF 125
	<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. EMERY WOODARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2309 ABILENE COURT  
 City LAS CRUCES State NM Zip Code 88011-8040  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14501**  
 Amount of Each Receipt this Period  
 200.00  
 CONTRIBUTION

**B. Mr. EMERY WOODARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2309 ABILENE COURT  
 City LAS CRUCES State NM Zip Code 88011-8040  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14719**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**C. Mrs. HELEN L ZAJAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 COTTONWOOD DRIVE  
 City VALLEJO State CA Zip Code 94591-5659  
 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  
 12 / 31 / 2015  
**Transaction ID : SA11AI.14698**  
 Amount of Each Receipt this Period  
 240.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	490.00
<b>TOTAL</b> 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 95 OF 125  
(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. 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14282**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. Mr. WILLIAM E ZWICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6330 ZINFANDEL DR  
 City SUWANEE State GA Zip Code 30024-3487  
 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  
 09 / 30 / 2015  
**Transaction ID : SA11AI.14457**  
 Amount of Each Receipt this Period  
 100.00  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	51499.00

**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 96 OF 125
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

City State Zip Code  
 ALEXANDRIA VA 22312-1444

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 330.95

Date of Receipt  
 07 / 31 / 2015  
**Transaction ID : SA17.14177**

Amount of Each Receipt this Period  
 48.42

INTEREST INCOME

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

City State Zip Code  
 ALEXANDRIA VA 22312-1444

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 379.38

Date of Receipt  
 08 / 31 / 2015  
**Transaction ID : SA17.14182**

Amount of Each Receipt this Period  
 48.43

INTEREST INCOME

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

Mailing Address 6462 LITTLE RIVER TURNPIKE

City State Zip Code  
 ALEXANDRIA VA 22312-1444

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 426.26

Date of Receipt  
 09 / 30 / 2015  
**Transaction ID : SA17.14208**

Amount of Each Receipt this Period  
 46.88

INTEREST INCOME

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	143.73
<b>TOTAL</b> 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 97 OF 125
<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 ▼  
 468.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2015

**Transaction ID : SA17.14526**

Amount of Each Receipt this Period  
 41.92

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 ▼  
 508.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2015

**Transaction ID : SA17.14535**

Amount of Each Receipt this Period  
 40.57

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 ▼  
 602.46

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : SA17.14744**

Amount of Each Receipt this Period  
 93.71

INTEREST INCOME

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	176.20
<b>TOTAL</b> This Period (last page this line number only).....▶	319.93

**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  
07 / 15 / 2015

Transaction ID : SB21B.14179

Amount of Each Disbursement this Period

499.52

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 FEES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2015

Transaction ID : SB21B.14180

Amount of Each Disbursement this Period

614.46

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  
08 / 17 / 2015

Transaction ID : SB21B.14183

Amount of Each Disbursement this Period

760.80

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

1874.78

**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 FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2015

**Transaction ID : SB21B.14186**

Amount of Each Disbursement this Period

975.03

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  
BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

**Transaction ID : SB21B.14209**

Amount of Each Disbursement this Period

794.01

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  
CREDIT CARD FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : SB21B.14210**

Amount of Each Disbursement this Period

1045.38

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

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

2814.42

# 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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

Transaction ID : SB21B.14528

Amount of Each Disbursement this Period

499.45

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 FEES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : SB21B.14529

Amount of Each Disbursement this Period

794.09

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

Transaction ID : SB21B.14538

Amount of Each Disbursement this Period

456.98

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

1750.52

**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 FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2015

Transaction ID : SB21B.14539

Amount of Each Disbursement this Period

691.95

Category/  
Type

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  
BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2015

Transaction ID : SB21B.14559

Amount of Each Disbursement this Period

452.85

Category/  
Type

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  
CREDIT CARD FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 24 / 2015

Transaction ID : SB21B.14560

Amount of Each Disbursement this Period

856.19

Category/  
Type

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

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

2000.99

**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  
08 / 12 / 2015

Transaction ID : SB21B.14198

Amount of Each Disbursement this Period

16.02

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  
08 / 24 / 2015

Transaction ID : SB21B.14193

Amount of Each Disbursement this Period

1581.47

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  
09 / 29 / 2015

Transaction ID : SB21B.14211

Amount of Each Disbursement this Period

1299.02

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

2896.51

**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  
10 / 27 / 2015

Transaction ID : SB21B.14530

Amount of Each Disbursement this Period

188.52

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  
11 / 23 / 2015

Transaction ID : SB21B.14540

Amount of Each Disbursement this Period

90.56

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  
DATABASE MANAGEMENT

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2015

Transaction ID : SB21B.14170

Amount of Each Disbursement this Period

414.63

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

693.71

**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  
DATABASE MANAGEMENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.14197**

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  
DATABASE MANAGEMENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.14204**

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  
DATABASE MANAGEMENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.14525**

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. INTERACTIVE SYSTEM INC**

Mailing Address 2101 GAITHER ROAD  
SUITE 175

City State Zip Code  
ROCKVILLE MD 20850

Purpose of Disbursement  
DATABASE MANAGEMENT

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2015

Transaction ID : SB21B.14533

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION (NARFE)**

Mailing Address 606 N WASHINGTON STREET

City State Zip Code  
ALEXANDRIA VA 22314-1914

Purpose of Disbursement  
FOR 2015 NARFE WAGES ALLOCATED TO PAC

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2015

Transaction ID : SB21B.14558

Amount of Each Disbursement this Period

44099.41

Full Name (Last, First, Middle Initial)

**C. PAY FLOW PRO**

Mailing Address 6201 POWERS FERRY ROAD  
3RD FLOOR

City State Zip Code  
ATLANTA GA 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  
07 / 16 / 2015

Transaction ID : SB21B.14169

Amount of Each Disbursement this Period

69.95

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

44469.36

**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. 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

MM / DD / YYYY  
08 / 13 / 2015

Transaction ID : SB21B.14196

Amount of Each Disbursement this Period

69.95

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

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : SB21B.14202

Amount of Each Disbursement this Period

69.95

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

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2015

Transaction ID : SB21B.14524

Amount of Each Disbursement this Period

69.95

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

209.85

**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. 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  
11 / 12 / 2015

Transaction ID : SB21B.14532

Amount of Each Disbursement this Period

69.95

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  
12 / 15 / 2015

Transaction ID : SB21B.14557

Amount of Each Disbursement this Period

69.95

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  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2015

Transaction ID : SB21B.14168

Amount of Each Disbursement this Period

274.80

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

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

414.70

**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) <b>A. PAYMENT SOLUTIONS INC</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2015
Mailing Address PO BOX 30217		<b>Transaction ID : SB21B.14195</b>
City BETHESDA	State MD	
Purpose of Disbursement CREDIT CARD PROCESSING FEES	Candidate Name	Amount of Each Disbursement this Period 286.00
Category/Type 001		
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>B. PAYMENT SOLUTIONS INC</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address PO BOX 30217		<b>Transaction ID : SB21B.14203</b>
City BETHESDA	State MD	
Purpose of Disbursement CREDIT CARD PROCESSING FEES	Candidate Name	Amount of Each Disbursement this Period 294.80
Category/Type 001		
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>C. PAYMENT SOLUTIONS INC</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2015
Mailing Address PO BOX 30217		<b>Transaction ID : SB21B.14523</b>
City BETHESDA	State MD	
Purpose of Disbursement CREDIT CARD PROCESSING FEES	Candidate Name	Amount of Each Disbursement this Period 297.80
Category/Type 001		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	878.60
<b>TOTAL</b> 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 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  
11 / 10 / 2015

Transaction ID : SB21B.14531

Amount of Each Disbursement this Period

289.40

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  
12 / 03 / 2015

Transaction ID : SB21B.14556

Amount of Each Disbursement this Period

309.20

Full Name (Last, First, Middle Initial)

**C. PRODUCTION MANAGEMENT GROUP**

Mailing Address 7160 COLUMBIA GATEWAY DRIVE

City COLUMBIA State MD Zip Code 21046

Purpose of Disbursement  
POSTAGE FOR PAC JULY MAILING

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2015

Transaction ID : SB21B.14199

Amount of Each Disbursement this Period

12561.25

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

13159.85

**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  
PAC FULFILLMENT

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.14176**

Amount of Each Disbursement this Period

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  
PAC FULFILLMENT

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.14181**

Amount of Each Disbursement this Period

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  
PAC FULFILLMENT

**003**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.14205**

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. THE AD ANSWER

Mailing Address 121 CONGRESSIONAL LANE  
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement  
PAC FULFILLMENT

003
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SB21B.14534

Amount of Each Disbursement this Period

5705.52
---------

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

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

5705.52
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79618.37
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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. 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: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

Transaction ID : **SB23.14234**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BECERRA FOR CONGRESS**

Mailing Address 625 3RD STREET NE  
#2

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. XAVIER BECERRA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 34

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

Transaction ID : **SB23.14231**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BECERRA FOR CONGRESS**

Mailing Address 625 3RD STREET NE  
#2

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. XAVIER BECERRA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 34

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2015

Transaction ID : **SB23.14543**

Amount of Each Disbursement this Period

2000.00

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

4000.00

**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. BERA FOR CONGRESS**

Mailing Address PO BOX 582496

City ELK GROVE State CA Zip Code 95758

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**AMERISH BERA**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

**Transaction ID : SB23.14241**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BRENDA LAWRENCE FOR CONGRESS**

Mailing Address 499 SOUTH CAPITOL STREET SW  
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BRENDA LULENAR LAWRENCE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 14

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2015

**Transaction ID : SB23.14569**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CARTWRIGHT FOR CONGRESS**

Mailing Address 410 1st St SE STE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**MATT MR CARTWRIGHT**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 17

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2015

**Transaction ID : SB23.14218**

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. COMSTOCK FOR CONGRESS**

Mailing Address 499 SOUTH CAPITOL STREET SW  
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BARBARA J COMSTOCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

**Transaction ID : SB23.14219**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. COMSTOCK FOR CONGRESS**

Mailing Address 499 SOUTH CAPITOL STREET SW  
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BARBARA J COMSTOCK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2015

**Transaction ID : SB23.14580**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. COOK FOR CONGRESS**

Mailing Address PO BOX 365

City YUCCA VALLEY State CA Zip Code 92286

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**PAUL COOK**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2015

**Transaction ID : SB23.14586**

Amount of Each Disbursement this Period

1000.00
---------

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

3500.00
---------

**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. 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  
State: MD District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2015

Transaction ID : **SB23.14200**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DAN LIPINSKI FOR CONGRESS**

Mailing Address PO BOX 520

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**DANIEL W LIPINSKI**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2015

Transaction ID : **SB23.14544**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DR. RAUL RUIZ FOR CONGRESS**

Mailing Address C/O AMY STRATHDEE  
1229 MORSE ST NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**RAUL DR. RUIZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 36

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

Transaction ID : **SB23.14233**

Amount of Each Disbursement this Period

1000.00

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

2500.00

**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 DON BEYER**

Mailing Address 499 SOUTH CAPITOL ST SW  
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**DONALD STERNOFF JR BEYER**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 17 / 2015

Transaction ID : **SB23.14579**

Amount of Each Disbursement this Period

2000.00

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  
State: NM District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2015

Transaction ID : **SB23.14215**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF ROSA DELAURO**

Mailing Address 7240 EVANS MILL ROAD

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**ROSA DELAURO**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Convention

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : **SB23.14235**

Amount of Each Disbursement this Period

2500.00

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

6500.00

**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 SCHUMER**

Mailing Address 220 I STREET NE  
#250

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**CHARLES SCHUMER**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2015			

**Transaction ID : SB23.14553**

Amount of Each Disbursement this Period

2000.00
---------

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  
State: VA District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			29			2015			

**Transaction ID : SB23.14240**

Amount of Each Disbursement this Period

2000.00
---------

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  
State: VA District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2015			

**Transaction ID : SB23.14581**

Amount of Each Disbursement this Period

2000.00
---------

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

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

6000.00
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid of boxes for line numbers 21b through 30b, with box 23 checked.

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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. LEVIN FOR CONGRESS

Mailing Address C/O MOLLY ALLEN ASSOCIATES
412 FIRST ST SE #100

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CONTRIBUTION

011

Candidate Name Rep. SANDER M LEVIN

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 12

Disbursement For: 2016
[X] Primary [ ] General
[ ] Other (specify) v

Date of Disbursement

Date of Disbursement: 09 / 29 / 2015

Transaction ID : SB23.14236

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1000.00

Full Name (Last, First, Middle Initial)

B. LOBIONDO FOR CONGRESS

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

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONTRIBUTION

011

Candidate Name Rep. FRANK A, LOBIONDO

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 02

Disbursement For: 2016
[X] Primary [ ] General
[ ] Other (specify) v

Date of Disbursement

Date of Disbursement: 11 / 09 / 2015

Transaction ID : SB23.14552

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 2000.00

Full Name (Last, First, Middle Initial)

C. LOUISE SLAUGHTER RE-ELECTION COMM

Mailing Address C/O MONROE COUNTY DEMOCRATIC COMMI
1150 UNIVERSITY AVE BLD 5

City ROCHESTER State NY Zip Code 14607

Purpose of Disbursement CONTRIBUTION

011

Candidate Name Rep. LOUISE M SLAUGHTER

Category/Type

Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 28

Disbursement For: 2016
[X] Primary [ ] General
[ ] Other (specify) v

Date of Disbursement

Date of Disbursement: 09 / 23 / 2015

Transaction ID : SB23.14217

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1000.00

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

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

Amount of Each Disbursement this Period: 4000.00

Amount of Each Disbursement this Period: 1000.00

**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. LOWEY FOR CONGRESS**

Mailing Address 3701 PORTER ST NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. NITA LOWEY**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 18

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2015

Transaction ID : **SB23.14216**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. MALONEY FOR CONGRESS**

Mailing Address C/O SILVERBERG ASSOCIATES  
24 EAST 93RD STREET SUITE 4B

City NEW YORK State NY Zip Code 10128

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. CAROLYN MALONEY**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 12

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2015

Transaction ID : **SB23.14554**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MARK TAKANO FOR CONGRESS**

Mailing Address 4101 1ST STREET SE  
SUITE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**MARK TAKANO**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 41

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2015

Transaction ID : **SB23.14565**

Amount of Each Disbursement this Period

1000.00

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

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

3500.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary 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. MIKE HONDA FOR CONGRESS**

Mailing Address 499 SOUTH CAPITOL STREET SW #422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**MIKE HONDA**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2015

**Transaction ID : SB23.14201**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. MIKE THOMPSON FOR CONGRESS**

Mailing Address P. O. BOX 10541

City NAPA State CA Zip Code 94581

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Rep. MIKE THOMPSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2015

**Transaction ID : SB23.14564**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE**

Mailing Address 6 E STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**RICHARD MICHAEL NOLAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2015

**Transaction ID : SB23.14214**

Amount of Each Disbursement this Period

1000.00
---------

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

2500.00
---------

**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. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		09		2015

Mailing Address 6 E STREET SE

**Transaction ID : SB23.14549**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**RICHARD MICHAEL NOLAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MN District: 08

Full Name (Last, First, Middle Initial)

**B. PELOSI FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		09		2015

Mailing Address C/O AMY SOENKSEN  
430 SOUTH CAPITOL STREET SE

**Transaction ID : SB23.14542**

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**NANCY PELOSI**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 12

Full Name (Last, First, Middle Initial)

**C. PEOPLE FOR PATTY MURRAY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		07		2015

Mailing Address ATTN: TRACEY BUCKMAN  
1602 BELLE VIEW BOULEVARD #510

**Transaction ID : SB23.14573**

City ALEXANDRIA State VA Zip Code 22307

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**Sen. PATTY MURRAY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 00

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

6000.00
---------

**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. PETE AGUILAR FOR CONGRESS**

Mailing Address 499 SOUTH CAPITOL STREET SW  
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**PETE AGUILAR**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 31

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2015

**Transaction ID : SB23.14249**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. PROGRESSIVE ACTION PAC**

Mailing Address 228 2ND STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
2015 MEMBERSHIP DUES

011

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2015

**Transaction ID : SB23.14225**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. ROB BISHOP FOR CONGRESS**

Mailing Address 617 E CUSTIS AVE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**ROBERT BISHOP**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2015

**Transaction ID : SB23.14571**

Amount of Each Disbursement this Period

1000.00

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

7000.00

**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. ROB WITTMAN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Mailing Address PO BOX 999

**Transaction ID : SB23.14239**

City State Zip Code  
MONTROSS VA 22520

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**ROBERT J WITTMAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 01

Full Name (Last, First, Middle Initial)

### B. ROB WITTMAN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2015

Mailing Address PO BOX 999

**Transaction ID : SB23.14555**

City State Zip Code  
MONTROSS VA 22520

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**ROBERT J WITTMAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 01

Full Name (Last, First, Middle Initial)

### C. SCHAKOWSKY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Mailing Address PO BOX 5130

**Transaction ID : SB23.14576**

City State Zip Code  
EVANSTON IL 60204-5130

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Candidate Name

**JANICE D SCHAKOWSKY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 09

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

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

2500.00
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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. THE BILL KEATING COMMITTEE**

Mailing Address **C/O MOLLY ALLEN ASSOCIATE  
412 FIRST ST SE SUITE 100**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement  
**CONTRIBUTION**

**011**  
Category/  
Type

Candidate Name  
**WILLIAM R KEATING**

Office Sought:  House  
 Senate  
 President  
State: **MA** District: **10**

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**12** / **17** / **2015**

**Transaction ID : SB23.14577**

Amount of Each Disbursement this Period

**1000.00**

Full Name (Last, First, Middle Initial)

**B. TITUS FOR CONGRESS**

Mailing Address **PO BOX 72454**

City **LAS VEGAS** State **NV** Zip Code **89170**

Purpose of Disbursement  
**CONTRIBUTION**

**011**  
Category/  
Type

Candidate Name  
**DINA TITUS**

Office Sought:  House  
 Senate  
 President  
State: **NV** District: **02**

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**12** / **07** / **2015**

**Transaction ID : SB23.14570**

Amount of Each Disbursement this Period

**1000.00**

Full Name (Last, First, Middle Initial)

**C. TOM MACARTHUR FOR CONGRESS**

Mailing Address **67 RODAK CIRCLE**

City **EDISON** State **NJ** Zip Code **08817**

Purpose of Disbursement  
**CONTRIBUTION**

**011**  
Category/  
Type

Candidate Name  
**THOMAS MACARTHUR**

Office Sought:  House  
 Senate  
 President  
State: **NJ** District: **03**

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

**09** / **29** / **2015**

**Transaction ID : SB23.14252**

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. WELCH FOR CONGRESS**

Mailing Address 228 2ND STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Candidate Name  
**PETER WELCH**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: VT District: 00

Date of Disbursement

/  /

Transaction ID : **SB23.14572**

Amount of Each Disbursement this Period

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

/  /

Amount of Each Disbursement this Period

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

/  /

Amount of Each Disbursement this Period

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

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