Image# 14941321850 PAGE 1 / 17

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTAL FO	or Other Than An Au	thorized Committee	Office Use Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5
National Committee to F	Preserve Social Se	curity & Medicare	PAC
<u> </u>			
ADDRESS (number and street)	10 G St. NE		
TIESE (Humber and street)	Suite 600		
Check if different than previously reported. (ACC)	Washington		DC 20002-4215
2. FEC IDENTIFICATION NUM	MBER ▼ C	TY▲	STATE ▲ ZIP CODE ▲
C C00172296		IS THIS REPORT X (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:		y 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M6) Sep 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q1)		r 20 (M4) Jul	20 (M7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:	Convention (120	C) Special (12S)
January 31 Year-End Report (YE		ion on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	·	ion on	in the State of
5. Covering Period 05	01 2014	through	05
I certify that I have examined this	Report and to the best of	of my knowledge and beli	ief it is true, correct and complete.
Type or Print Name of Treasurer	Ms. Christine Kim		
Signature of Treasurer Ms. Ch.	ristine Kim	[Electronically F	iled] Date 06 16 2014
NOTE: Submission of false, erronec	ous, or incomplete informati	on may subject the person	signing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

Report Covering the Period: From: 05 01 2014 To: 05 31 2014

COLUMN A COLUMN B

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		144692.84
	(b) Cash on Hand at Beginning of Reporting Period	202425.24	
	(c) Total Receipts (from Line 19)	56315.55	309579.69
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	258740.79	454272.53
7.	Total Disbursements (from Line 31)	115653.75	311185.49
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	143087.04	143087.04
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
ntributions (other than loans) From:	1	
Individuals/Persons Other		
Than Political Committees	2042.00	9127.00
(i) Itemized (use Schedule A)	3213.00	3127.00
(ii) Unitemized	53101.98	300446.58
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	56314.98	309573.58
Political Party Committees	0.00	0.00
	0.00	0.00
	56314.98	309573.58
rty Committees	0.00	0.00
	0.00	0.00
Loans Received	0.00	0.00
an Repayments Received	0.00	0.00
· ·	7	
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	7	7
Federal Candidates and Other		
litical Committees	0.00	0.00
ner Federal Receipts		
vidends, Interest, etc.)	0.57	6.11
insfers from Non-Federal and Levin Funds		
(from Schedule H3)	0.00	0.00
Levin Funds (from Schedule H5)	0.00	0.00
Leviii i unus (iioiii ochedule 115)		
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Than Political Committees (i) Itemized (use Schedule A)	Than Political Committees (i) Itemized (use Schedule A)

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)	Total Tillo I Gliou	Calcinda Tear-to-Date		
(i) Federal Share	0.00	0.00		
V				
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	95573.22	250061.90		
(c) Total Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,			
(add 21(a)(i), (a)(ii), and (b))▶	95573.22	250061.90		
2. Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	18480.53	58831.96		
. Independent Expenditures	0.00	691.63		
(use Schedule E) Coordinated Party Expenditures	0.00	031.03		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
. Loan Repayments Made	0.00	0.00		
. Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other		0.00		
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		
() T. 10				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
(add Lines 20(a), (b), and (c))				
O. Other Disbursements	1600.00	1600.00		
. Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	7 7		
(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	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
. Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	115653.75	311185.49		
. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	115652.75	211185 40		
from Line 31)	115653.75	311185.4		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	or Disbursements	Page 5		
III. Net Contributions/Operating Expenditures				
33. Total Contributions (other than loans) (from Line 11(d), page 3)	56314.98	309573.58		
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56314.98	309573.58		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	95573.22	250061.90		
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	95573.22	250061.90		

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

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

FOR L	INE N	JMBER	:	PAGE	6	OF	17
(check	only o	ne)					
X 1	1a	11b		11c	12		
1	3	14		15	16		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 th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	re Social Security & Medicare PAC	
Full Name (Last, First, Middle Initial) A. Mrs Ona F Lester		Date of Receipt
Mailing Address 1101 Humphries Rd NW		05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Conyers	State Zip Code GA 30012-2015	Transaction ID : 21813857 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	229.00
Name of Employer	Occupation RETIRED	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 229.00	
Full Name (Last, First, Middle Initial) Mr Robert I Long Mailing Address Apr 11145		Date of Receipt
Mailing Address Apt 1145 2000 Atrium Pkwy City	State Zip Code	05 08 2014 Transaction ID : 21814016
Napa	CA 94559-4841	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	800.00
Name of Employer	Occupation RETIRED	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Carol Licht		Date of Receipt
Mailing Address 437 Valley Glen Dr		05 08 2014
City Richardson	State Zip Code TX 75080-1873	Transaction ID : 21814304 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation RETIRED	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2029.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE	NUMBER	: PAGE	= 7 OF	17
(check on	y one)			
X 11a	11b	11c	12	
13	14	15	16	17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Committee to Preserve	e Social Security & Medicare PAC	
Full Name (Last, First, Middle Initial) A. Mr & Mrs Chester Davis		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
8300 Burdette Rd A543	2011	05 30 2014
City	State Zip Code	Transaction ID: 21814368
Bethesda	MD 20817-2801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms Betty Wojcik		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
32 Edward St	Ctoto 7tm On to	05 01 2014
City	State Zip Code	Transaction ID: 21814974
Amsterdam	NY 12010-5036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer	Occupation	
	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) C. Ms Connie Swartz		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
1306 L Ron Hubbard Wa		05 01 2014
City	State Zip Code	Transaction ID: 21815192
Los Angeles	CA 90027-5902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	209.00
Name of Employer	Occupation RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	209.00	
SUBTOTAL of Receipts This Page (optional)		684.00
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

	_		NUMBER: PAGE 8 OF 17				PAGE 8 OF			17	
(0	che	ck only	or	ne)							
	X	11a		11b		11c		12			
		13		14		15		16	,		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	ng the name and address of any political committee to	
,	erve Social Security & Medicare PAC	
Full Name (Last, First, Middle Initial) Mr John Conboy Mailing Address 72776 Joshua Tree St City Palm Desert FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) Fall Name (Last, First, Middle Initial)	State Zip Code CA 92260-4769 C Occupation RETIRED Aggregate Year-to-Date ▼ 500.00	Date of Receipt 05 07 2014 Transaction ID: 21816536 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	The state of the s
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (option	nal)	500.00
TOTAL This Period (last page this line nu	<u> </u>	3213.00

SCHEDULE B (FEC Form 3X)					FOR LINE NUMBER: PAGE 9 OF 17				
		,	Use separate schedule(s						
ITEMIZED DISBURSEMENTS			for each category of the			,			
			Detailed Summary Page		X 21b	28a 28b	28c 29 30b		
Λ ~	, information as	sind from such Demants and	I Statements may not be sold or u	1000 1					
			e name and address of any polit						
	NAME OF COMI								
		, ,	e Social Security & Me	diac	ro DA	_			
			e Social Security & Me	uica	ue PAC				
	,	First, Middle Initial)				Data of Diabura	amont.		
Α.	NCPSSM					Date of Disburse	ement		
	Mailing Address	10 G Street, NE				7	5 2014		
		Suite 600							
	City		State Zip Code			Transaction ID	: 21764749		
	Washington Purpose of Disbu	ireamant	DC 20002	1					
		ADVOCACY,REIMB. OF OFF	ICE SUPPLY		001	Amount of Each	Disbursement this Period		
	Candidate Name			C	ategory/		07.74		
					Туре		27.71		
	Office Sought:		bursement For:						
		Senate President	Primary General			NO EXPRESS AI SUPPLY	DVOCACY,REIMB. OF OFFICE		
	State:	District:	Other (specify) ▼			SOFFLI			
		First, Middle Initial)							
	NCPSSM	Thou, Middle Hillary				Date of Disbursement			
	THOI COIVI					M M / D D / Y Y Y Y			
	Mailing Address 10 G Street, NE Suite 600						5 2014		
	City State Zip Code					Transaction ID	. : 21764750		
	Washington		DC 20002				. 21704730		
	Purpose of Disbu	ursement ADVOCACY,REIMB. OF SHI	PPING EXPENSES		001	Amount of Each	Disbursement this Period		
	Candidate Name			با		Amount of Lacif	Disbursement this Feriod		
				C	ategory/ Type		36.28		
	Office Sought:	House Dis	oursement For:		.,,,,		,		
		Senate	Primary General			NO EXPRESS A	DVOCACY,REIMB. OF SHIPPI		
		President	Other (specify) ▼			EXPENSES			
	State:	District:							
	•	First, Middle Initial)							
Ċ.	NCPSSM					Date of Disburse	ement		
	Mailing Addraga	4.00					5 2014		
	Mailing Address	Suite 600				05 1	3 2014		
	City	Cuito coo	State Zip Code						
	Washington		DC 20002			Transaction ID	: 21/64/51		
	Purpose of Disbursement NO EXPRESS ADVOCACY, REIMB. OF TRAVEL EXPENSES 002								
	Candidate Name					Amount of Each	Disbursement this Period		
	Canalaate Hame			C	ategory/ Type		210.08		
	Office Sought:	House Dis	bursement For:	<u> </u>	7,70				
	-	Senate	Primary General			NO EXPRESS AI	OVOCACY,REIMB. OF TRAVE		
		President	Other (specify) ▼			EXPENSES	, <u>-</u>		
	State:	District:							
C	IRTOTAL of Dis	hursements This Page (ontid	onal)				274.07		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 10 OF 17		
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only				
	for each category of the Detailed Summary Page	X 21b	22 23	24 25 26		
		27	28a 28b	28c 29 30b		
Any information copied from such Reports and Sta						
or for commercial purposes, other than using the r	name and address of any politica	u committee to	SOlicit contributions	irom such committee.		
NAME OF COMMITTEE (In Full)	Coolal Coourity O Madi	core DAC				
National Committee to Preserve	Social Security & Medi	care PAC				
Full Name (Last, First, Middle Initial)						
A. NCPSSM			Date of Disbursen	nent		
Mailian Address 40 O O NE			M M / D E			
Mailing Address 10 G Street, NE Suite 600	05 15 2014					
City	State Zip Code		: ID	04704750		
Washington	DC 20002		Transaction ID :	21/64/52		
Purpose of Disbursement NO EXPRESS ADVOCACY, REIMB. OF PAC SA	ALARY & BENEFITS	004	Amount of Fool F	Nahama ana ant data Dania d		
Candidate Name	& DEINEITIO	001	Amount of Each L	Disbursement this Period		
Sandidate Name		Category/ Type		11676.26		
Office Sought: House Disbur	sement For:	.,,,,				
Senate	Primary General		NO EXPRESS AD	VOCACY,REIMB. OF PAC SA		
President	Other (specify) ▼		& BENEFITS			
State: District:						
Full Name (Last, First, Middle Initial)			Date of Dishurses	nent		
3. NCPSSM			Date of Disbursement			
Mailing Address 10 G Street, NE			05 15			
Suite 600		10 2017				
City	State Zip Code		Transaction ID :	21764753		
Washington Purpose of Disbursement	DC 20002					
NO EXPRESS ADVOCACY, REIMB. OF DIREC	T MAIL PRINT	006	Amount of Each Disbursement this Period			
Candidate Name		Category/				
		Type		86154.04		
	sement For:					
Senate	Primary General			VOCACY,REIMB. OF DIRECT		
President State: District:	Other (specify) ▼		PRINT			
Full Name (Last, First, Middle Initial)						
- NCPSSM			Date of Disbursen	nent		
		M M / D D / Y Y Y Y				
Mailing Address 10 G Street, NE		05 26	2014			
Suite 600 City						
Washington	State Zip Code DC 20002		Transaction ID :	21803586		
Purpose of Disbursement						
ADVANCE FOR FUTURE IN-KIND CONTRIBUT	IUN	011	Amount of Each D	Disbursement this Period		
Candidate Name	'	Category/		-3480.53		
Office Sought: House Disbur	sement For:	Type		7		
Senate Disbut	Primary General		ADVANCE FOR FI	JTURE IN-KIND CONTRIBUT		
President	Other (specify)		ADVAINCE FUR FL	DI ONE IIN-VIIND CONTRIBUTI		
State: District:						
,						
SUBTOTAL of Disbursements This Page (optional	l)			94349.77		
TOTAL This Period (last page this line number or	าly)					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:		PAG	GE 11	OF 17
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check onl	y one)	one)			
-	Detailed Summary Page	X 21b 27		23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and State	ments may not be sold or use						
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
National Committee to Preserve S	ocial Security & Medi	care PAC	;				
Full Name (Last, First, Middle Initial)			Deta at Dill		a a m t		
A. Bank of America			Date of Disb			YYY	V
Mailing Address 730 15th Street, NW DC1-701-02-02, 2nd Floor			05	30		2014	
City	State Zip Code		Transactio	n ID :	2180641	19	
Washington Purpose of Disbursement	DC 20005		-			. •	
BANK FEES		001	Amount of E	ach D	Disburser	nent this	Period
Candidate Name		Category/		-		•	10.29
00.0		Туре		_	7	94	49.38
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		BANK FEES				
State: District:	,						
Full Name (Last, First, Middle Initial) B.			Date of Disb	urcom	oont		
ь.			M M /	D D		- Y - Y	V
Mailing Address			M - M / B - D / Y - Y - Y - Y				
City	State Zip Code						
Purpose of Disbursement			^	· D); = le = =		Daviad
Candidate Name		2	Amount of E	acn L	Disburser	nent this	Period
		Category/ Type			- 7		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)						
State: District:	,						
Full Name (Last, First, Middle Initial) C.			Date of Disb	ursen	nent		
			M = M /	D D) / Y	YYY	Y
Mailing Address							
City	State Zip Code						
Purpose of Disbursement			-				
Candidate Name		Category/ Type	Amount of E	ach D	Disburser	nent this	Period
Office Sought: House Disburse	ment For:	.750		_	7		
Senate	Primary General						
President State: District:	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional).						94	19.38
					- 7	0555	70.00
TOTAL This Period (last page this line number only	')				1 (1)	9557	73.22

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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	12 (OF 17
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	s) (check only one)					
			Summary Page	21b	22 28a	X 23 28b	24 28c	25 29	26 30b
Λ.	ay information copied from such Departs and Chita	l nonto ma::	not be sold as						
	ly information copied from such Reports and Staten for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full)								
	National Committee to Preserve So	ocial Se	ecurity & Med	licare PAC					
^	Full Name (Last, First, Middle Initial)					(D: . :			
A.	Friends of Lois Capps					f Disburser			
	Mailing Address 38 Ivy Street SE				05	05		2014	Y
	City	State	tate Zip Code			Transaction ID : 21739668			
	Washington	DC	20003		irans	action iD	21739668		
	Purpose of Disbursement Contribution			011	Amoun	t of Each I	Disburseme	nt this	Period
	Candidate Name			Category/				1000	0.00
	Lois Capps Office Sought: House Disbursen	nent For:	2014	Туре		7	7	.000	
	Senate	Primary Other (spe	General		Contrib	ution			
	State: CA District: 23								
_	Full Name (Last, First, Middle Initial)				5.	. 5: 1			
В.	Alison For Kentucky					f Disburser			
	Mailing Address 340 Democrat Drive				05	06		2014	Y
	Frankfort	State KY	Zip Code 40601		Trans	saction ID	: 21753832		
	Purpose of Disbursement Contribution			011	Amoun	t of Each I	Disburseme	nt this	Period
	Candidate Name			Category/				400	000
	Ms. Alison Grimes			Type		-,-		1000	J.UU
		nent For: Primary Other (spe	General		Contrib	ution			
_	Full Name (Last, First, Middle Initial)								
C.	DEFAZIO FOR CONGRESS				Date of	f Disburser			
	Mailing Address P.O. Box 1316				05	07		2014	Y
	•	State	Zip Code		Trans	saction ID	: 21753878		
	Springfield Purpose of Disbursement	OR	97477				·		
	Contribution			011	Amoun	t of Each I	Disburseme	nt thic	Pariod
	Candidate Name			Category/	Amoun	. Ji Lacii i	Dispuiseille		-
	PETER DEFAZIO			Type				1000	0.00
	Senate President	nent For: Primary Other (spe	General		Contrib	ution			
	State: OR District: 04								
s	UBTOTAL of Disbursements This Page (optional)			·····•				3000	.00
1	OTAL This Period (last page this line number only)				L				

SCHEDULE B (FEC Form 3X)		FOR LINE N	JUMBER: PAGE 13 OF 17				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	21b	22 🗙 23 24 25 26				
		27	28a 28b 28c 29 30b				
Any information copied from such Reports and Staten or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
National Committee to Preserve So	ocial Security & Medi	care PAC					
Full Name (Last, First, Middle Initial)							
A. Aimee Belgard For Congress			Date of Disbursement				
Mailing Address PO Box 35			05 08 2014				
City	State Zip Code		Transaction ID : 21754137				
Willingboro	NJ 08046		Transaction ib . 21734137				
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Ms. Aimee Belgard		Туре	1000.00				
	nent For: 2014 Primary General Other (specify)		Contribution				
State: NJ District: 03							
Full Name (Last, First, Middle Initial)							
B. James Lee Witt For Congress			Date of Disbursement				
Mailing Address PO Box 36			05 08 2014				
City S Dardanelle	State Zip Code AR 72834		Transaction ID: 21754138				
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/					
Mr. James Witt		Type	1000.00				
	nent For: 2014 Primary General Other (specify)		Contribution				
Full Name (Last, First, Middle Initial)							
C. Natalie Tennant For Senate			Date of Disbursement				
Mailing Address PO Box 1063			05 08 2014				
,	State Zip Code WV 25324		Transaction ID : 21754139				
Charleston Purpose of Disbursement Contribution	WV 25324						
Candidate Name		011	Amount of Each Disbursement this Period				
Ms. Natalie Tennant		Category/	1000.00				
	nent For: 2014	Туре					
	Primary General Other (specify)		Contribution				
SUBTOTAL of Disbursements This Page (optional)		······ >	3000.00				
TOTAL This Period (last page this line number only)							

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	ly information copied from such Reports and Staten for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)							
	National Committee to Preserve So	ocial Se	ecurity & Med	licare PAC	; 			
_	Full Name (Last, First, Middle Initial)				Data of Dia	h		
Α.	Markey Committee; The				Date of Dis			
	Mailing Address PO Box 526				05	19 2014		
	,	tate Zip Code			Transaction ID: 21765790			
	Medford Purpose of Disbursement	MA	02155		Transaon	OII ID . 21100100		
	Contribution			011	Amount of	Each Disbursement this Period		
	Candidate Name			Category/		4000.00		
	Rep. Ed J. Markey			Туре		1000.00		
	President	nent For: Primary Other (sp	General		Contribution			
_	State: MA District:							
В.	Full Name (Last, First, Middle Initial) Committee To Re-elect Linda Sand	shoz			Date of Dis	shursement		
	Committee to Ne-elect Linda Sand	JI ICZ			M M /	D D / Y Y Y Y		
	Mailing Address 410 First Street, SE Suite 310				05	19 2014		
	Washington	State DC	Zip Code 20003		Transacti	on ID : 21765791		
	Purpose of Disbursement Contribution			011	Amount of	Each Disbursement this Period		
	Candidate Name			Category/				
	Rep. Linda T. Sanchez			Type		1000.00		
		nent For: Primary Other (spe	General		Contribution	1		
<u>с.</u>	Full Name (Last, First, Middle Initial) Walsh For Montana				Date of Dis	bursement		
					M M /	D D / Y D Y D Y		
	Mailing Address PO Box 1724				05	22 2014		
	Helena	State MT	Zip Code 59624		Transacti	on ID : 21770918		
	Purpose of Disbursement Contribution 011			011				
	Candidate Name				Amount of	Each Disbursement this Period		
	Mr. John Walsh			Category/ Type		1000.00		
	President	nent For: Primary Other (sp	General	~,	Contribution			
	State: MT District:							
s	UBTOTAL of Disbursements This Page (optional)			·····		3000.00		
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 16 OF 17		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	TOMBEIT.		
	for each category of the Detailed Summary Page	21b	22 🗙 23 🔲 24 🔲 25 🖂 26		
	Johanna Gammary Fago	27	28a 28b 28c 29 30		
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or for commercial purposes, other than using the nar	ne and address of any politic	al committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)		. 540			
National Committee to Preserve S	ocial Security & Med	icare PAC			
Full Name (Last, First, Middle Initial)					
A. John Tierney for Congress			Date of Disbursement		
Matter Address 200 0	Mailing Addross 229 Second Street SE				
Mailing Address 228 Second Street, SE			05 22 2014		
City	State Zip Code		T		
Washington	DC 20003		Transaction ID: 21770919		
Purpose of Disbursement Contribution		011	Associated Foods Dishurance this Deviced		
Candidate Name		011	Amount of Each Disbursement this Period		
JOHN TIERNEY		Category/ Type	1000.00		
	ment For: 2014	.,,,,			
Senate	Primary General		Contribution		
President	Other (specify) ▼				
State: MA District: 06					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Braley For Congress	aley For Congress				
Mailing Address PO Box 390	Mailing Address PO Roy 390		05 22 2014		
ag / taa. 666 O Box 550					
City	State Zip Code		Transaction ID : 21770920		
Waterloo Purpose of Disbursement	IA 50704				
Contribution		011	Amount of Each Disbursement this Period		
Candidate Name					
Mr. Bruce Braley		Category/ Type	2000.00		
Office Sought: House Disburse	ment For: 2014				
X Senate	Primary General		Contribution		
President	Other (specify) ▼				
State: IA District:					
Full Name (Last, First, Middle Initial) C. Schatz For Senate			Date of Disbursement		
Schalz i di Sehale			M M / D D / Y Y Y Y		
Mailing Address PO Box 3828	ailing Address PO Box 3828				
City Honolulu	State Zip Code HI 96812		Transaction ID: 21803587		
Purpose of Disbursement	30012				
IN-KIND CONTRIBUTION		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	0.400.50		
Sen. Brian E. Schatz		Type	3480.53		
	ment For: 2014				
Senate President	Primary General		IN-KIND CONTRIBUTION		
State: HI District:	Other (specify) ▼				
SUBTOTAL of Disbursements This Page (optional)			6480.53		
TOTAL This Period (last page this line number only)		18480.53		

SCHEDULE B (FEC Form 3X)		FOR LIVE	NUMBER: PAGE 17 OF 17			
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	NOMBER.			
I LIVIIZED DISDUNSEIVIEN IS	for each category of the	21b	22 23 24 25 26			
	Detailed Summary Page	27	28a 28b 28c X 29 30			
Any information copied from such Reports and Stater	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions			
or for commercial purposes, other than using the nan						
NAME OF COMMITTEE (In Full)						
National Committee to Preserve So	ocial Security & Medi	icare PAC				
Full Name (Last, First, Middle Initial)						
A. Americans for Democratic Action			Date of Disbursement			
- Time roans for Bernooratio Action			M M / D D / Y Y Y Y			
Mailing Address 1629 K Street, Suite 300			05 05 2014			
City						
City Washington	State Zip Code DC 20006		Transaction ID: 21739681			
Purpose of Disbursement	20000					
501(c)(4) Contribution		012	Amount of Each Disbursement this Period			
Candidate Name		Category/	1000.00			
		Type	1600.00			
Office Sought: House Disburser						
Senate President	Primary General		501(c)(4) Contribution			
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
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Mailing Address						
01						
City	State Zip Code					
Purpose of Disbursement						
			Amount of Each Disbursement this Period			
Candidate Name		Category/				
200		Type				
Office Sought: House Disburser						
Senate President	Primary General Other (specify) ▼					
State: District:	Callot (opcony)					
Full Name (Last, First, Middle Initial)						
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Candidate Name		Category/				
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President	Other (specify)					
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SUBTOTAL of Disbursements This Page (optional)			1600.00			
TOTAL This Period (last page this line number only))		1600.00			