

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NATIONAL DEFENSE PAC

ADDRESS (number and street) ▼

203 South Union Street

STE 300

☐ Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00359992

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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 Dan Backer Esq.

Signature of Treasurer

Dan Backer Esq.

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information 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 DEFENSE PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 07 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		3354.84
(b) Cash on Hand at Beginning of Reporting Period.....	2934.65	
(c) Total Receipts (from Line 19)	538.22	2413.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3472.87	5768.06
7. Total Disbursements (from Line 31)	2184.95	4480.14
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1287.92	1287.92
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)

Page 3

Write or Type Committee Name

NATIONAL DEFENSE PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
07 01 2015

To:

M M / D D / Y Y Y Y Y
12 31 2015
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).....

0.00

1000.00

(ii) Unitemized

20.00

895.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

20.00

1895.00

(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) ►

20.00

1895.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

18.22

18.22

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

500.00

500.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

538.22

2413.22

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

538.22

2413.22

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	1419.95	2036.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1419.95	2036.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-405.00	-405.00
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	405.00	405.00
(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)).....	405.00	405.00
29. Other Disbursements	765.00	2443.97
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)) ..	2184.95	4480.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2184.95	4480.14

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)	20.00	1895.00
34. Total Contribution Refunds (from Line 28(d))	405.00	405.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-385.00	1490.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1419.95	2036.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	18.22	18.22
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1401.73	2017.95

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

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

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

NATIONAL DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. Adm. James Carey

Mailing Address 6022 Knights Ridge Way

City State Zip Code
 Alexandria VA 22310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

ND PAC Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 14 2015

Transaction ID : SA17.5062

Amount of Each Receipt this Period

500.00

CAREY acct: contribution

Full Name (Last, First, Middle Initial)

B.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

500.00

500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address 399 Park Avenue

City New York State NY Zip Code 10043

Purpose of Disbursement
Credit card payment

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
07 / 10 / 2015
Transaction ID : SB21B.5071

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Vistaprint

Mailing Address 275 Wyman St

City Waltham State MA Zip Code 02451

Purpose of Disbursement
Printing cost for PAC materials

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
07 / 10 / 2015
Transaction ID : SB21B.5071.0

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Citibank

Mailing Address 399 Park Avenue

City New York State NY Zip Code 10043

Purpose of Disbursement
Credit card payment

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
07 / 17 / 2015
Transaction ID : SB21B.5078

Amount of Each Disbursement this Period

540.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

790.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. Citibank

Mailing Address 399 Park Avenue

City New York State NY Zip Code 10043

Purpose of Disbursement
Telecommunications and technology services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 17 / 2015
Transaction ID : SB21B.5078.0

Amount of Each Disbursement this Period

540.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Political List BrokersMailing Address 107 S West St
PMB 826

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
List Rental Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 17 / 2015
Transaction ID : SB21B.5064

Amount of Each Disbursement this Period

629.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / 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)..... ►

629.00

1419.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. NEW HAMPSHIRE FOR SCOTT BROWN

Mailing Address PO BOX 600

City	State	Zip Code
RYE	NH	03870

Purpose of Disbursement

Refunded earmarked contribution to New Hampshire for Scott Brown from
~~Ronald Dargatzis~~
Candidate Name**SCOTT BROWN**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB23.5028

Amount of Each Disbursement this Period

-50.00

Full Name (Last, First, Middle Initial)

B. NEW HAMPSHIRE FOR SCOTT BROWN

Mailing Address PO BOX 600

City	State	Zip Code
RYE	NH	03870

Purpose of Disbursement

Refunded earmarked contribution to New Hampshire for Scott Brown from
~~Lila O'Connell~~
Candidate Name**SCOTT BROWN**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB23.5029

Amount of Each Disbursement this Period

-5.00

Full Name (Last, First, Middle Initial)

C. NEW HAMPSHIRE FOR SCOTT BROWN

Mailing Address PO BOX 600

City	State	Zip Code
RYE	NH	03870

Purpose of Disbursement

Refunded earmarked contribution to New Hampshire for Scott Brown from
~~Anita Fedoriv~~
Candidate Name**SCOTT BROWN**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB23.5030

Amount of Each Disbursement this Period

-200.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-255.00

--

: 97 'A -G7 9 @ @ B9 CI G 'H9 LH 'F9 @ H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB
.

Form/Schedule: **SB23**

Transaction ID : **SB23.5028**

An earmarked contribution was received by this committe and forwarded to the candidate committee, but due to a processing error the candidate committee never deposited the check. The check has been cancelled, and the earmarked contribution has been refunded.

Form/Schedule: **SB23**

Transaction ID: **SB23.5029**

An earmarked contribution was received by this committe and forwarded to the candidate committee, but due to a processing error the candidate committee never deposited the check. The check has been cancelled, and the earmarked contribution has been refunded.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : SB23.5030

An earmarked contribution was received by this committe and forwarded to the candidate committee, but due to a processing error the candidate committee never deposited the check. The check has been cancelled, and the earmarked contribution has been refunded.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. NEW HAMPSHIRE FOR SCOTT BROWN

Mailing Address PO BOX 600

City	State	Zip Code
RYE	NH	03870

Purpose of Disbursement

Refunded earmarked contribution to New Hampshire for Scott Brown from
Richard Sharino

Candidate Name

SCOTT BROWN

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB23.5031

Amount of Each Disbursement this Period

-100.00

Full Name (Last, First, Middle Initial)

B. NEW HAMPSHIRE FOR SCOTT BROWN

Mailing Address PO BOX 600

City	State	Zip Code
RYE	NH	03870

Purpose of Disbursement

Refunded earmarked contribution to New Hampshire for Scott Brown from
Howard Mene

Candidate Name

SCOTT BROWN

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB23.5032

Amount of Each Disbursement this Period

-50.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

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

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-150.00

-405.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: **SB23**

Transaction ID : **SB23.5031**

An earmarked contribution was received by this committe and forwarded to the candidate committee, but due to a processing error the candidate committee never deposited the check. The check has been cancelled, and the earmarked contribution has been refunded.

Form/Schedule: **SB23**

Transaction ID: **SB23.5032**

An earmarked contribution was received by this committe and forwarded to the candidate committee, but due to a processing error the candidate committee never deposited the check. The check has been cancelled, and the earmarked contribution has been refunded.

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input 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 checked="" 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 DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. Ronald Dagley

Mailing Address 415 Hamden Ct.

City	State	Zip Code
Katy	TX	77450

Purpose of Disbursement	<div>010</div>
Refund of earmarked contribution forwarded to candidate but never cashed	

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB28A.5044

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Anita Fedoriw

Mailing Address 635 Iroquois Trail

City	State	Zip Code
berkeley springs	WV	25411

Purpose of Disbursement	<div>010</div>
Refund of earmarked contribution forwarded to candidate but never cashed	

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB28A.5046

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Howard MoyeMailing Address 3487 S. Evans Street
Suite C

City	State	Zip Code
Greenville	NC	27834

Purpose of Disbursement	<div>010</div>
Refund of earmarked contribution forwarded to candidate but never cashed	

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SB28A.5048

Amount of Each Disbursement this Period

50.00

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

300.00

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	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
NATIONAL DEFENSE PAC

A. Lila O'Connell

Mailing Address 106 West Wayne St.

City	State	Zip Code
Pierceton	IN	46562

Purpose of Disbursement	Refund of earmarked contribution forwarded to candidate but never cashed
-------------------------	--------------------------------------------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB28A.5045

Amount of Each Disbursement this Period



Full Name (Last, First, Middle Initial)

B. Richard Shapiro

Mailing Address 4800 Gaywood Drive

City	State	Zip Code
Minnetonka	MN	55345

Purpose of Disbursement	Refund of earmarked contribution forwarded to candidate but never cashed
-------------------------	--------------------------------------------------------------------------

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
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95	95
96	96
97	97
98	98
99	99
100	100

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

07 / 09 / 2015

Transaction ID : SB28A.5047

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	18.00
25-34	15.00
35-44	12.00
45-54	10.00
55-64	8.00
65-74	6.00
75-84	4.00
85+	2.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

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).....

105.00

405.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL DEFENSE PAC

Full Name (Last, First, Middle Initial)

A. Jon Agresta

Mailing Address 211 Lorraine Ave

City	State	Zip Code
Oreland	PA	19075

Purpose of Disbursement
Carey account - website services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

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

Transaction ID : SB29.5059

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address PO BOX 15023

City	State	Zip Code
WORCESTER	MA	01615-0023

Purpose of Disbursement
Carey account - communications services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2015

Transaction ID : SB29.5054

Amount of Each Disbursement this Period

215.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

765.00

765.00
