

**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 ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

ADDRESS (number and street) ▼

560 SYLVAN AVENUE

☐ Check if different than previously reported. (ACC)

ENGLEWOOD CLIFFS

NJ

07632

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

C C00521039

3. IS THIS REPORT ☐ NEW (N) OR ☒ AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☒ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only) ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only) ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on

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

in the State of

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the State of

5. Covering Period 01 / 01 / 2013 through 06 / 30 / 2013

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 Tim Cuddigan

Signature of Treasurer

Tim Cuddigan

[Electronically Filed]

Date

05

14

2014

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 ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		115626.13
(b) Cash on Hand at Beginning of Reporting Period.....	115626.13	
(c) Total Receipts (from Line 19)	38800.00	38800.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	154426.13	154426.13
7. Total Disbursements (from Line 31)	37790.50	37790.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	116635.63	116635.63
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 ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

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).....

37900.00

37900.00

(ii) Unitemized

900.00

900.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

38800.00

38800.00

(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)

38800.00

38800.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

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

0.00

0.00

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

38800.00

38800.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

38800.00

38800.00

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	1790.50	1790.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1790.50	1790.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	36000.00	36000.00
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)) ..	37790.50	37790.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37790.50	37790.50

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)	38800.00	38800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38800.00	38800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1790.50	1790.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1790.50	1790.50

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 40
(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. George H. Anderson III

Mailing Address 4405 Rummell Roads

City State Zip Code
 St. Cloud FL 34769

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dan Newlin and Partners

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 04 / 2013

Transaction ID : SA11AI.4532

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Carol Avar

Mailing Address PO Box 101050

City State Zip Code
 Cape Coral FL 33910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avar Law Offices

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 22 / 2013

Transaction ID : SA11AI.4565

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Henri Benoit II

Mailing Address PO Box 4686

City State Zip Code
 Portland ME 04101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Offices of Joe Bornstein

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 15 / 2013

Transaction ID : SA11AI.4620

Amount of Each Receipt this Period

250.00

Partnership attribution

[MEMO ITEM]

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

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

500.00

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 40
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Cynthia C. Berger

Mailing Address 800 Waterfront Drive

City State Zip Code
Pittsburgh PA 15222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berger and Green, P.C.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2013

Transaction ID : SA11AI.4453

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Andrew Bernstein

Mailing Address PO Box 4686

City State Zip Code
Portland ME 04112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Offices of Joe Bernstein

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 15 / 2013

Transaction ID : SA11AI.4621

Amount of Each Receipt this Period

250.00

Partnership attribution

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Russell R. Bowling

Mailing Address 77 West Main Street

City State Zip Code
Franklin NC 28734

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 08 / 2013

Transaction ID : SA11AI.4513

Amount of Each Receipt this Period

250.00

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

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

3250.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 40
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

<p>Full Name (Last, First, Middle Initial) A. Russell R. Bowling</p> <p>Mailing Address 77 West Main Street</p> <p>City State Zip Code Franklin NC 28734</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self-employed Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 450.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 01 / 14 / 2013 Transaction ID : SA11AI.4446 </p> <p>Amount of Each Receipt this Period 200.00</p>
<p>Full Name (Last, First, Middle Initial) B. David S. Bross</p> <p>Mailing Address 102 Browning Lane Bldg C-1</p> <p>City State Zip Code Cherry Hill NJ 08003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Bross & Frankel, P.A. Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 500.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 05 / 24 / 2013 Transaction ID : SA11AI.4576 </p> <p>Amount of Each Receipt this Period 500.00</p>
<p>Full Name (Last, First, Middle Initial) C. Elizabeth Bumer</p> <p>Mailing Address P.O. Box 60156</p> <p>City State Zip Code San Diego CA 60156</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation California Parole Advocacy Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 02 / 19 / 2013 Transaction ID : SA11AI.4557 </p> <p>Amount of Each Receipt this Period 250.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>		950.00
<p>TOTAL This Period (last page this line number only)..... ▶</p>		

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Jonelle Redelman Chalmers

Mailing Address PO Box 56033

City
Indianapolis

State Zip Code
IN 46256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Redelman Law LLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 08 / 2013

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Donald Chewning

Mailing Address 2522 Washington St

City
Two Rivers

State Zip Code
WI 54241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winter, Chewning & Geary, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 26 / 2013

Transaction ID : SA11AI.4496

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kenneth J. Collins

Mailing Address PO Box 1193

City
Arcata

State Zip Code
CA 95518

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 11 / 2013

Transaction ID : SA11AI.4627

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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FOR LINE NUMBER: PAGE 10 OF 40
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Ann W Cook

Mailing Address 16171 Agatewood Rd NE

City State Zip Code
 Bainbridge Island WA 98110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 24 / 2013

Transaction ID : SA11AI.4580

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Robert A. Crowe

Mailing Address 1101 Hawken Place

City State Zip Code
 St. Louis MO 63119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Robert A. Crowe PC

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 08 / 2013

Transaction ID : SA11AI.4508

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Tim Cuddigan

Mailing Address 1005 South 107th Ave
 Ste 201

City State Zip Code
 Omaha NE 68114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Brodkey, Cuddigan, Peebles & B

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 04 / 2013

Transaction ID : SA11AI.4636

Amount of Each Receipt this Period

2500.00

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

3000.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. MaryJean Ellis

Mailing Address 235 Woodport Rd
Suite H-5

City State Zip Code
Sparta NJ 07871

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 01 / 2013

Transaction ID : SA11AI.4642

Amount of Each Receipt this Period

250.00

Partnership attribution

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Sharon Fabian

Mailing Address 5309 N 24th Place

City State Zip Code
Phoenix AZ 85016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Heard & Smith LLP

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2013

Transaction ID : SA11AI.4585

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Crysti D. Farra

Mailing Address 100-31 Baker Ct.

City State Zip Code
Island Park NY 11558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Turley Redmond Rosasco & Rosas

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 13 / 2013

Transaction ID : SA11AI.4550

Amount of Each Receipt this Period

250.00

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

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

750.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Clifford M. Farrell

Mailing Address 167 N High Street

City State Zip Code
Columbus OH 43215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Manring & Farrell

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2013

Transaction ID : SA11AI.4607

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Natalie Fierek

Mailing Address 59 EMS B24 Lane

City State Zip Code
Pierceton IN 46562

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Office of Natalie M. Fiere

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2013

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Arthur V. Gage

Mailing Address 7242 N. Avenida De Lisa

City State Zip Code
Tucson AZ 85704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Offices Arthur V. Gage

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 05 / 2013

Transaction ID : SA11AI.4545

Amount of Each Receipt this Period

250.00

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

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

1500.00

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Timothy Geary

Mailing Address 815 Indian Creek Dr

City

Manitowoc

State

WI

Zip Code

54220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winter, Chewning & Geary, LLP

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 26 / 2013

Transaction ID : SA11AI.4495

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Greg Giles

Mailing Address 1206 N State Line

City

Texarkana

State

AR

Zip Code

71854

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

02 / 19 / 2013

Transaction ID : SA11AI.4558

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Susan G. Gobbs

Mailing Address PO Box 5046

City

Helena

State

MT

Zip Code

59604

FEC ID number of contributing
federal political committee.

C

Name of Employer

People's Law Center

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 14 / 2013

Transaction ID : SA11AI.4553

Amount of Each Receipt this Period

250.00

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

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

1750.00

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Frank Hanley

Mailing Address 7149 Aigner Ct

City State Zip Code
 Indianapolis IN 46278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Social Security Disability Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 24 / 2013

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Vincent D. Howard

Mailing Address 2440 Park Newport

City State Zip Code
 Newport Beach CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Howard Law, P.C.

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 08 / 2013

Transaction ID : SA11AI.4509

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Kevin P. Klein

Mailing Address 51 Wedgewood Dr.

City State Zip Code
 Greenville SC 29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Don Pilzer, PC

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : SA11AI.4609

Amount of Each Receipt this Period

500.00

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

1000.00

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Bernard Kuttner

Mailing Address 1225 River Road East

City State Zip Code
Bedminster NJ 07921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 08 / 2013

Transaction ID : SA11AI.4510

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kimberly Lamb

Mailing Address 1523 S US Highway 131
Ste A

City State Zip Code
Petoskey MI 49770

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Waud & Lamb

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 14 / 2013

Transaction ID : SA11AI.4554

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Law Office of MaryJean Ellis

Mailing Address 235 Woodport Rd
Suite H-5

City State Zip Code
Sparta NJ 07871

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 01 / 2013

Transaction ID : SA11AI.4641

Amount of Each Receipt this Period

250.00

See attribution below

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

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

1000.00

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Law Offices of Joe Bornstein

Mailing Address PO Box 4686

City State Zip Code
 Portland ME 04112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

01 / 15 / 2013

Transaction ID : SA11AI.4619

Amount of Each Receipt this Period

1250.00

See attribution below

Full Name (Last, First, Middle Initial)

B. Carol Lewis

Mailing Address 1126 Kilian Blvd

City State Zip Code
 Saint Cloud MN 56304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 24 / 2013

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Janna Lowenstein

Mailing Address 24725 Sand Wedge Ln

City State Zip Code
 Valencia CA 91355

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Lowenstein Disability Lawyers,

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 19 / 2013

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period

250.00

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

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1750.00

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. David Magann

Mailing Address PO Box 1290

City State Zip Code
 Brandon FL 33509

FEC ID number of contributing federal political committee.

C

Name of Employer

David W. Magann, P.A.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 10 / 2013

Transaction ID : SA11AI.4492

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Julia Mariani

Mailing Address 7454 Cornell Ave.

City State Zip Code
 St. Louis MO 63130

FEC ID number of contributing federal political committee.

C

Name of Employer

Law Office of Julia Mariani

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 01 / 11 / 2013

Transaction ID : SA11AI.4628

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

c. Charles L. Martin

Mailing Address 123 N McDonough St

City State Zip Code
 Decatur GA 30030

FEC ID number of contributing federal political committee.

C

Name of Employer

Martin and Jones

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 24 / 2013

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period

1000.00

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

1550.00

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

<p>Full Name (Last, First, Middle Initial) A. McArdle, Schmoyer & Simon</p> <p>Mailing Address 1800 Second Street Suite 700</p> <p>City State Zip Code Sarasota FL 34236</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2013</p> <p>Transaction ID : SA11AI.4600</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>See attribution below</p>
<p>Full Name (Last, First, Middle Initial) B. Christa McGill</p> <p>Mailing Address 2515 Bexley Ave</p> <p>City State Zip Code Durham NC 27707</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation McGill & Noble, LLP Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 01 / 04 / 2013</p> <p>Transaction ID : SA11AI.4530</p> <p>Amount of Each Receipt this Period 250.00</p>
<p>Full Name (Last, First, Middle Initial) C. David Miller</p> <p>Mailing Address 9 May St</p> <p>City State Zip Code Bangor ME 04401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Law Offices of Joe Bornstein Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 01 / 15 / 2013</p> <p>Transaction ID : SA11AI.4622</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Partnership attribution</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p>		<p>5250.00</p>

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Kenneth A. Miller

Mailing Address 800 S. Gay St.
#2210

City State Zip Code
Knoxville TN 37929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 02 / 2013

Transaction ID : SA11AI.4638

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Tracy Tyson Miller

Mailing Address 2118 Park St.

City State Zip Code
Jacksonville FL 32204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 12 / 2013

Transaction ID : SA11AI.4549

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Michael Monce

Mailing Address 100 Angels Way

City State Zip Code
Cincinnati OH 45217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 01 / 2013

Transaction ID : SA11AI.4539

Amount of Each Receipt this Period

300.00

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1050.00

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Diane R. Newman

Mailing Address 411 Wolf Ledges Pkwy
Ste 400

City State Zip Code
Akron OH 44311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shifrin Newman Smith Inc

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 05 / 2013

Transaction ID : SA11AI.4634

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Virginia Noble

Mailing Address 309 Monticello Avenue

City State Zip Code
Durham NC 27707

FEC ID number of contributing
federal political committee.

C

Name of Employer

McGill & Noble, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2013

Transaction ID : SA11AI.4531

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. James Normand

Mailing Address 35 Farmer Ln

City State Zip Code
Manchester NH 03102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Normand & Associates

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 20 / 2013

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period

300.00

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

800.00

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

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Omar Ortega

Mailing Address 30042 Mission Blvd

City

Hayward

State

CA

Zip Code

94544

FEC ID number of contributing
federal political committee.

C

Name of Employer

Binder & Binder

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 10 / 2013

Transaction ID : SA11AI.4631

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dan Parmele

Mailing Address 5777 S. Brightwater Trail

City

Springfield

State

MO

Zip Code

65810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parmele Law Firm, P.C.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 03 / 2013

Transaction ID : SA11AI.4635

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Patterson R Patterson

Mailing Address 67 Millbrook St

City

Worcester

State

MA

Zip Code

01606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 04 / 2013

Transaction ID : SA11AI.4527

Amount of Each Receipt this Period

250.00

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

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1000.00

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Don Pilzer

Mailing Address PO Box 10557

City
Greenville

State Zip Code
SC 29603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Don Pilzer, PC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 17 / 2013

Transaction ID : SA11AI.4608

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Alan H. Polonsky

Mailing Address 512 S. Whitehorse Pike

City
Audubon

State Zip Code
NJ 08106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 24 / 2013

Transaction ID : SA11AI.4582

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Victoria Rackley

Mailing Address Po Box 1369

City
Muskogee

State Zip Code
OK 74402-1369

FEC ID number of contributing
federal political committee.

C

Name of Employer

Victoria L. Rackley PLLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 10 / 2013

Transaction ID : SA11AI.4485

Amount of Each Receipt this Period

250.00

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

1750.00

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

<p>Full Name (Last, First, Middle Initial) A. Phillip Bond Sartain</p> <p>Mailing Address 443 Bradford St, NW</p> <p>City State Zip Code Gainesville GA 30501</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Sartain Law Offices Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 02 / 01 / 2013</p> <p>Transaction ID : SA11AI.4542</p> <p>Amount of Each Receipt this Period 250.00</p>
<p>Full Name (Last, First, Middle Initial) B. Marjorie A. Schmoyer</p> <p>Mailing Address 1800 2nd Street Suite 700</p> <p>City State Zip Code Sarasota FL 34236</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation McArdle, Schmoyer & Simon Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2013</p> <p>Transaction ID : SA11AI.4602</p> <p>Amount of Each Receipt this Period 2500.00</p> <p>Partnership attribution</p> <p>[MEMO ITEM]</p>
<p>Full Name (Last, First, Middle Initial) C. Eric Schnauer</p> <p>Mailing Address 1414 Hinman Ave. #1A</p> <p>City State Zip Code Evanston IL 60201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self-employed Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2013</p> <p>Transaction ID : SA11AI.4449</p> <p>Amount of Each Receipt this Period 2000.00</p>
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p>		<p>2250.00</p>

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Jeff Scholnick

Mailing Address 3 Far Corners Loop

City Sparks State MD Zip Code 21152

FEC ID number of contributing federal political committee.

C

Name of Employer

Law Office of Jeffrey Scholnic

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 08 / 2013

Transaction ID : SA11AI.4511

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Scott Scurfield

Mailing Address 105 Halpen Drive

City Cary State NC Zip Code 27513

FEC ID number of contributing federal political committee.

C

Name of Employer

Riddle & Brantley

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 17 / 2013

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Debra Shifrin

Mailing Address 411 Wolf Ledges Pkwy
Ste 400

City Akron State OH Zip Code 44311

FEC ID number of contributing federal political committee.

C

Name of Employer

Shifrin Newman Smith Inc

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 03 / 2013

Transaction ID : SA11AI.4632

Amount of Each Receipt this Period

500.00

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

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

1000.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Kent Silver

Mailing Address 225 Hill Street

City State Zip Code
Athens GA 30601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Silver and Archibald LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 07 / 2013

Transaction ID : SA11AI.4645

Amount of Each Receipt this Period

2500.00

Partnership attribution

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Silver and Archibald LLP

Mailing Address PO Box 909

City State Zip Code
Athens GA 30603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 07 / 2013

Transaction ID : SA11AI.4644

Amount of Each Receipt this Period

2500.00

See attribution below

Full Name (Last, First, Middle Initial)

C. David S. Simon

Mailing Address 1800 2nd Street
Suite 700

City State Zip Code
Sarasota FL 34236

FEC ID number of contributing
federal political committee.

C

Name of Employer

McArdle, Schmoyer & Simon

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 28 / 2013

Transaction ID : SA11AI.4601

Amount of Each Receipt this Period

2500.00

Partnership attribution

[MEMO ITEM]

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

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

2500.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Constance R. Somers

Mailing Address 102 Ponca Bend

City State Zip Code
 Shavano Park TX 78231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Attorney

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
 01 / 03 / 2013

Transaction ID : SA11AI.4637

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Amy Sopchak

Mailing Address 7406 Orchard Hills Lane

City State Zip Code
 Sugar Land TX 77479

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sufian & Passamano, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 04 / 2013

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Tim Staggs

Mailing Address 311 Sunset Drive

City State Zip Code
 Columbus IN 47201

FEC ID number of contributing
federal political committee.

C

Name of Employer

G. Gene Arnholt, Attorney at L

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period

250.00

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Steven Stilman

Mailing Address 59 Wellesley Dr

City Pleasant Ridge State MI Zip Code 48069

FEC ID number of contributing federal political committee.

C

Name of Employer

Adler Stilman, PLLC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 14 / 2013

Transaction ID : SA11AI.4625

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Beth Sufian

Mailing Address 712 Main St.
Suite 2130

City Houston State TX Zip Code 77002

FEC ID number of contributing federal political committee.

C

Name of Employer

Sufian & Passamano, LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 19 / 2013

Transaction ID : SA11AI.4559

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Talia Timmins

Mailing Address PO Box 4686

City Portland State ME Zip Code 04101

FEC ID number of contributing federal political committee.

C

Name of Employer

Law Offices of Joe Bornstein

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

01 / 15 / 2013

Transaction ID : SA11AI.4623

Amount of Each Receipt this Period

250.00

Partnership attribution

[MEMO ITEM]

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

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

500.00

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. David Traver

Mailing Address W351 S6851 Ulrickson Rd

City State Zip Code
Eagle WI 53119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

01 / 15 / 2013

Transaction ID : SA11AI.4611

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Gayle L. Troutman

Mailing Address 1350 S. Boulder
Suite 410

City State Zip Code
Tulsa OK 74119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Troutman & Troutman, PC

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 04 / 2013

Transaction ID : SA11AI.4526

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Steve A Troutman

Mailing Address 1350 S. Boulder
Suite 410

City State Zip Code
Tulsa OK 74119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Troutman & Troutman, PC

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 04 / 2013

Transaction ID : SA11AI.4525

Amount of Each Receipt this Period

500.00

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

1300.00

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

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Angelina Valle

Mailing Address 1671 The Alameda
#302

City State Zip Code
San Jose CA 95126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2013

Transaction ID : SA11AI.4524

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Judy H. Varnell

Mailing Address P.O. Box 3066

City State Zip Code
Albany GA 31706

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SA11AI.4489

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Clifford L. Weisberg

Mailing Address 29140 Apple Blossom Lane

City State Zip Code
Farmington Hills MI 48331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Weisberg & Walkon, P.C.

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 04 / 2013

Transaction ID : SA11AI.4528

Amount of Each Receipt this Period

250.00

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

750.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Carl Weisbrod

Mailing Address 5909 Woodland Dr.

City State Zip Code
 Dallas TX 75225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Morgan & Weisbrod LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 14 / 2013

Transaction ID : SA11AI.4626

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Marc Whitehead

Mailing Address 5300 Memorial Dr
 Ste 725

City State Zip Code
 Houston TX 77007

FEC ID number of contributing
federal political committee.

C

Name of Employer

March Whitehead & Associates,

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 01 / 2013

Transaction ID : SA11AI.4538

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Tanna Whitman

Mailing Address PO Box 4686

City State Zip Code
 Portland ME 04112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Law Offices of Joe Bornstein

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

01 / 15 / 2013

Transaction ID : SA11AI.4624

Amount of Each Receipt this Period

250.00

Partnership attribution

[MEMO ITEM]

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

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

500.00

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

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Linda Ziskin

Mailing Address PO Box 753833

City

Las Vegas

State

NV

Zip Code

89136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2013

Transaction ID : SA11AI.4551

Amount of Each Receipt this Period

250.00

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)..... ►

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250.00

37900.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. National Organization of Social Security Claimants' Representatives

Mailing Address 560 Sylvan Avenue

City Englewood Cliffs State NJ Zip Code 07632

Purpose of Disbursement
Reimbursement of fundraising expenses

003

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 28 2013

Transaction ID : SB21B.4475

Amount of Each Disbursement this Period

787.74

Full Name (Last, First, Middle Initial)

B. Platinum Choice Bancard

Mailing Address 31 White St

City West Orange State NJ Zip Code 07052

Purpose of Disbursement
Credit card fees

003

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 04 2013

Transaction ID : SB21B.4596

Amount of Each Disbursement this Period

251.84

Full Name (Last, First, Middle Initial)

C. Platinum Choice Bancard

Mailing Address 31 White St

City West Orange State NJ Zip Code 07052

Purpose of Disbursement
Credit card fees

003

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 04 2013

Transaction ID : SB21B.4597

Amount of Each Disbursement this Period

11.50

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

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

1051.08

<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

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

A. Platinum Choice Bancard

Date of Disbursement

Transaction ID : SB21B.4593

003

Amount of Each Disbursement this Period

Category/
Type

157.75

Disbursement For:

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

State: District:

B. Platinum Choice Bancard

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4594

003

Amount of Each Disbursement this Period

Category/
Type

10.80

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. Platinum Choice Bancard

Date of Disbursement

Transaction ID : SB21B.4595

003

Amount of Each Disbursement this Period

Category/
Type

19.95

Disbursement For:

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

State: District:

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

Age Group	Number of people
13-17	100
18-24	120
25-34	140
35-44	160
45-54	180
55-64	188.50
65-74	170
75-84	150
85+	130

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 PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 40

<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 ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. Platinum Choice Bancard

Mailing Address 31 White St

City
West OrangeState
NJZip Code
07052Purpose of Disbursement
Credit card fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2013

Transaction ID : SB21B.4591

Amount of Each Disbursement this Period

76.80

Full Name (Last, First, Middle Initial)

B. Platinum Choice Bancard

Mailing Address 31 White St

City
West OrangeState
NJZip Code
07052Purpose of Disbursement
Credit card fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2013

Transaction ID : SB21B.4592

Amount of Each Disbursement this Period

9.95

Full Name (Last, First, Middle Initial)

C. Platinum Choice Bancard

Mailing Address 31 White St

City
West OrangeState
NJZip Code
07052Purpose of Disbursement
Credit card fees

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2013

Transaction ID : SB21B.4587

Amount of Each Disbursement this Period

9.95

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

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

96.70

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<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

NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

A. Platinum Choice Bancard

Date of Disbursement

Transaction ID : SB21B.4588

003

Category/
Type

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

Amount of Each Disbursement this Period

76.80

B. Platinum Choice Bancard

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4589

003

Category/
Type

Disbursement For:

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

Amount of Each Disbursement this Period

200.05

C. Platinum Choice Bancard

Date of Disbursement

Transaction ID : SB21B.4590

003

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

287.40

1623.68

**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 36 OF 40

<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 ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. BECERRA FOR CONGRESS

Mailing Address P.O. BOX 71584

City	State	Zip Code
LOS ANGELES	CA	90071

Purpose of Disbursement
Contribution

011

Candidate Name

XAVIER BECERRA

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2013

Transaction ID : SB23.4472

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BECERRA FOR CONGRESS

Mailing Address P.O. BOX 71584

City	State	Zip Code
LOS ANGELES	CA	90071

Purpose of Disbursement
Contribution

011

Candidate Name

XAVIER BECERRA

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2013

Transaction ID : SB23.4477

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DEFAZIO FOR CONGRESS

Mailing Address PO BOX 1316

City	State	Zip Code
SPRINGFIELD	OR	97477

Purpose of Disbursement
Contribution

011

Candidate Name

PETER A. DEFAZIO

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2013

Transaction ID : SB23.4479

Amount of Each Disbursement this Period

2500.00

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

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

12500.00

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

PAGE 40 OF 40

<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 ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

Full Name (Last, First, Middle Initial)

A. TO ORGANIZE A MAJORITY PAC (TOMPAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2013

Mailing Address P.O. BOX 752

City	State	Zip Code
DES MOINES	IA	50303

Transaction ID : SB23.4870

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

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.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

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

Disbursement For:

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

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

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

Disbursement For:

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

State: District:

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

5000.00
36000.00