

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Weiser, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 52 Park Ave.
18th Fl.

City New York	State NY	Zip Code 10016
------------------	-------------	-------------------

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

Name of Employer (for Individual) Older & Weiser, Inc.	Occupation (for Individual) Consultant
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2017

Transaction ID : SA11AI.10373

Amount of Each Receipt this Period
5000.00

Memo Item
Dues

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

Mailing Address 2051 NE 208 Street

City Miami	State FL	Zip Code 33179
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2017

Transaction ID : SA11AI.10427

Amount of Each Receipt this Period
500.00

Memo Item
Dues

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	57430.00