

# 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 Committee to Preserve Social Security & Medicare PAC

ADDRESS (number and street) 111 K Street, NE  
Suite 700  
Washington DC 20002  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00172296 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 [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 10 / 18 / 2018 through [MM] / [DD] / [YYYY] 11 / 26 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Kim, Christine, , Ms.,  
Type or Print Name of Treasurer

Signature of Treasurer Kim, Christine, , Ms., [Electronically Filed] Date [MM] / [DD] / [YYYY] 12 / 03 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**National Committee to Preserve Social Security & Medicare PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text"/>	<input type="text" value="103393.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="315747.25"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="65912.33"/>	<input type="text" value="709326.75"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="381659.58"/>	<input type="text" value="812720.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="74602.80"/>	<input type="text" value="505663.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="307056.78"/>	<input type="text" value="307056.78"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**National Committee to Preserve Social Security & Medicare PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9967.00	44734.25
(ii) Unitemized .....	55945.33	664447.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	65912.33	709181.40
(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) .....	65912.33	709181.40
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	145.35
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)).....▶	65912.33	709326.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	65912.33	709326.75

**DETAILED SUMMARY PAGE**

of Disbursements

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 .....	64378.23	355289.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	64378.23	355289.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10224.57	147671.36
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	2702.69
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	74602.80	505663.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74602.80	505663.26

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	65912.33	709181.40
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	65912.33	709181.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	64378.23	355289.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	64378.23	355289.21

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Committee to Preserve Social Security & Medicare PAC**

**A. Frey, John W, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1133 Massachusetts Ave

City Lexington State MA Zip Code 02420-3818

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
247.00

Date of Receipt  
11 / 19 / 2018  
Transaction ID : 24801812

Amount of Each Receipt this Period  
130.00

Memo Item

**B. Pinson, Hallie, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Ste 114-47  
215 W Bandera Rd

City Boerne State TX Zip Code 78006-2820

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 19 / 2018  
Transaction ID : 24801823

Amount of Each Receipt this Period  
150.00

Memo Item

**C. Mathes, Roger, V, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
110 Raymond Rd

City Deerfield State NH Zip Code 03037-1504

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
11 / 13 / 2018  
Transaction ID : 24801912

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	430.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Searcy, Taiko, , Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1002 Huntington Dr

City Modesto	State CA	Zip Code 95350-3456
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

**Transaction ID : 24801925**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. ERTEL, MICHELLE, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
18010 HAUPI BAY

City BOYNTON BEACH	State FL	Zip Code 33436-2228
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

**Transaction ID : 24801928**

Amount of Each Receipt this Period  
130.00

Memo Item

**C. Kasney, Gail, A, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 340  
1101 Midland Ave

City Bronxville	State NY	Zip Code 10708-6345
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

**Transaction ID : 24801964**

Amount of Each Receipt this Period  
85.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	465.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Keigher, Sharon, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1815 N Riverwalk Way

City Milwaukee	State WI	Zip Code 53212-3991
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

**Transaction ID : 24801969**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Hickman, Pat, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
4339 Roy Thompson Rd.

City Mount Pleasant	State TN	Zip Code 38474-2907
------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

**Transaction ID : 24802054**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Hicks, Karen, E, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
11660 SE Valley View Terrace

City Happy Valley	State OR	Zip Code 97086-2733
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

**Transaction ID : 24802077**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Orris, Kennie, L, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
10368 Placer River Ave

City Fountain Vly State CA Zip Code 92708-7126

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
11 / 05 / 2018  
Transaction ID : 24802106

Amount of Each Receipt this Period  
150.00

Memo Item

**B. Depaulo, James, R, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
849 Revere Beach Pkwy

City Revere State MA Zip Code 02151-5320

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt  
11 / 05 / 2018  
Transaction ID : 24802107

Amount of Each Receipt this Period  
78.00

Memo Item

**C. Foreman, Margaret, A, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
11771 Wildwood Dr

City Omaha State AR Zip Code 72662-9238

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 207.00

Date of Receipt  
11 / 05 / 2018  
Transaction ID : 24802125

Amount of Each Receipt this Period  
72.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Lamplighter, Jane, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
14437 Gringsby Ct

City: Centreville, State: VA, Zip Code: 20120-3222

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802140**

Amount of Each Receipt this Period: 75.00

Memo Item

**B. Perry, George, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
28 Beck Avenue

City: Greenville, State: SC, Zip Code: 29605-2002

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼: 450.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802186**

Amount of Each Receipt this Period: 125.00

Memo Item

**C. Liscombe, Loyall, G, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
3638 Ashford St

City: San Diego, State: CA, Zip Code: 92111-4313

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼: 303.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802242**

Amount of Each Receipt this Period: 114.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 314.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Vincent, Maisie, T, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
32100 Pudding Creek Rd

City: Fort Bragg State: CA Zip Code: 95437-8103

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802249**

Amount of Each Receipt this Period: 35.00

Memo Item

**B. Hanson, Henry, F, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1585 Perch Way

City: Willits State: CA Zip Code: 95490-8458

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
939.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802270**

Amount of Each Receipt this Period: 313.00

Memo Item

**C. Pahoyo, Isabel, D, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
17177 Donmetz St

City: Granada Hills State: CA Zip Code: 91344-4124

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼  
468.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802299**

Amount of Each Receipt this Period: 156.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	504.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Barstow, Charles, A, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 110  
17161 Redford St

City Detroit State MI Zip Code 48219-3243

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802334**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Cordiner, George, M, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
122 Two Rod Rd

City Scarborough State ME Zip Code 04074-9119

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802344**

Amount of Each Receipt this Period  
35.00

Memo Item

**C. Helduser, John, M, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
20 Stratford Dr

City Springfield State PA Zip Code 19064-1220

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802353**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Berglund, Irene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 461 Kennwood Dr  
 City Ukiah State CA Zip Code 95482-8767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : 24802394**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

**B. Craycroft, Wayne, , Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 PO Box 2175  
 City Rancho Mirage State CA Zip Code 92270-1055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : 24802419**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Winters, G, D, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 PO Box 1056  
 City Giddings State TX Zip Code 78942-1056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : 24802454**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Larsen, Thomas, J, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 302  
7801 W 35th Ave

City Wheat Ridge State CO Zip Code 80033-6157

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802484**

Amount of Each Receipt this Period  
51.00

Memo Item

**B. Seibold, Shirley, E, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 317  
3737 N College Ave

City Bethany State OK Zip Code 73008-3384

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802492**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Pronko, Evelyn, C, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1272 Leslie St

City Prescott State AZ Zip Code 86301-6681

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802611**

Amount of Each Receipt this Period  
450.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	551.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Fong, Robert, S, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
261 Mangels Ave.

City San Francisco State CA Zip Code 94131-2817

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
510.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802627**

Amount of Each Receipt this Period  
153.00

Memo Item

**B. Dalton, Edward, F, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
202 Shallowbrook Ln

City Glastonbury State CT Zip Code 06033-1408

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802657**

Amount of Each Receipt this Period  
125.00

Memo Item

**C. Cayey, James, E, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
274 Wildwood Rd

City Colton State NY Zip Code 13625-4117

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802665**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	328.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Solomon, Eugene, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
PO Box 70

City White Cloud State KS Zip Code 66094-0070

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802668**

Amount of Each Receipt this Period  
225.00

Memo Item

**B. Moser, Patricia, A, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2315 Wood Ln

City Allentown State PA Zip Code 18103-7722

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
483.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802679**

Amount of Each Receipt this Period  
185.00

Memo Item

**C. Burgess, Mildred, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
688 Martin Ave

City Asbury State MO Zip Code 64832-8132

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
292.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802690**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	510.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Nelson, Carl, E, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
5620 Lanceshire Ln

City Oklahoma City State OK Zip Code 73135-5411

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802708**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. Sheehan, John, F, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 344  
151 Hallet St

City Dorchester Center State MA Zip Code 02124-5428

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802709**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Kilian, Jacob, , Mr, Sr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
3289 Jacoby Rd

City Coopersburg State PA Zip Code 18036-1242

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802710**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Groth, Carl, H, Mr, Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Apt 6C  
 1101 W Seikel Blvd  
 City McCloud State OK Zip Code 74851-8060  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : 24802723**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**B. Russell, Sheila, A, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 Ocean Ave  
 City Hull State MA Zip Code 02045-1014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : 24802753**  
 Amount of Each Receipt this Period  
 212.00  
 Memo Item

**C. Wojcik, Betty, , Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 Edward St  
 City Amsterdam State NY Zip Code 12010-5036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : 24802774**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	387.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Sternickle, John, R, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
21541 Wolf Lake Ct

City: Crest Hill, State: IL, Zip Code: 60403-1508

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼: 245.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802814**

Amount of Each Receipt this Period: 70.00

Memo Item

**B. Ostrowski, Edward, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 7  
1301 Ptarmigan Dr

City: Walnut Creek, State: CA, Zip Code: 94595-3755

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802823**

Amount of Each Receipt this Period: 150.00

Memo Item

**C. Herzig, William, J, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1381 Asbury Rd

City: Pacolet, State: SC, Zip Code: 29372-3500

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

Name of Employer (for Individual): Occupation (for Individual): Retired

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 11 / 02 / 2018  
**Transaction ID : 24802844**

Amount of Each Receipt this Period: 125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	345.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Wolfe, Ralph, S, Mr & Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
101 W Windsor Rd

City Urbana State IL Zip Code 61802-6663

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
353.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802880**

Amount of Each Receipt this Period  
114.00

Memo Item

**B. Evans, Donald, G, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
11403 Kedleston Rd

City Glenn Dale State MD Zip Code 20769-2020

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802884**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. Anderson, Dennis, E, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2 Eastwood Dr

City Ballston Lake State NY Zip Code 12019-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802896**

Amount of Each Receipt this Period  
60.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 374.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Feldman, Nancy, , Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
39 Brooks Ln

City Crossville State TN Zip Code 38558-2817

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802902**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. Hess, Thomas, R, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2264 Spruce Pl

City White Bear Lake State MN Zip Code 55110-4832

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802927**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Mann, Dudley, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
202 Robinson St

City Wakefield State RI Zip Code 02879-3524

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
278.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802964**

Amount of Each Receipt this Period  
94.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	344.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Ferreira, Doris, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
178 Deerland Ave

City Painted Post State NY Zip Code 14870-9379

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24802998**

Amount of Each Receipt this Period  
75.00

Memo Item

**B. Holt, Virginia, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
6501 Lancret Hill Dr

City Austin State TX Zip Code 78745-4713

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803034**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Durchman, David, J, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
5089 Pointe Aux Peaux

City Newport State MI Zip Code 48166-9079

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803092**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Eddy, Dolores, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
614 S Angola Rd

City Coldwater	State MI	Zip Code 49036-9511
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

**Transaction ID : 24803100**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Heeren, Robert, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
4608 170th PI NE

City Redmond	State WA	Zip Code 98052-5609
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

**Transaction ID : 24803107**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Hunt, Carroll, T, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
700 Falcon Ave

City Chesapeake	State VA	Zip Code 23324-1426
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

**Transaction ID : 24803112**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Mast, Christian, L, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
5921 Private Road 633

City Millersburg State OH Zip Code 44654-8207

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803121**

Amount of Each Receipt this Period  
156.00

Memo Item

**B. Coryell, Austin, S, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
3999 E Nobles Rd

City Centennial State CO Zip Code 80122-2045

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803124**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Dong, Daniel, H, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
14 Ridgemark Court

City Sacramento State CA Zip Code 95831-3420

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803142**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	456.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Cole, Delores, W, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1368 County Road 164

City Houston State MS Zip Code 38851-9782

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803146**

Amount of Each Receipt this Period  
75.00

Memo Item

**B. Finn, Mary, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
43 Waterman Rd

City Auburn State MA Zip Code 01501-1847

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803210**

Amount of Each Receipt this Period  
69.00

Memo Item

**C. Kirk, Lena, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
4410 Bunker Dr

City Sebring State FL Zip Code 33872-1265

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
286.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803243**

Amount of Each Receipt this Period  
88.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	232.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Ortega, Frank, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
3121 Merced Pl

City Oxnard    State CA    Zip Code 93033-5745

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
754.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803266**

Amount of Each Receipt this Period  
189.00

Memo Item

**B. Wills, Carol, R, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 208  
8080 Summit Business Pkwy

City Jonesboro    State GA    Zip Code 30236-5803

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803273**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Lewis, Gary, M, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2262 Boone Trl

City Modale    State IA    Zip Code 51556-4032

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803351**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	389.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Sadler, Arnold, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
53958 Wilbur Rd

City Three Rivers State MI Zip Code 49093-9765

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803352**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Beggs, Donna, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
5216 Montair Ave

City Lakewood State CA Zip Code 90712-2749

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803359**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Batten, Clinton, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
83 Batten Ln

City Pearson State GA Zip Code 31642-2755

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
207.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803361**

Amount of Each Receipt this Period  
54.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	204.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Glinski, James, F, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt A308  
250 Bloomfield Ave

City Bloomfield State NJ Zip Code 07003-6606

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
279.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803403**

Amount of Each Receipt this Period  
108.00

Memo Item

**B. Herrick, Mark, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
246 N Lincoln St

City Westmont State IL Zip Code 60559-1614

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803416**

Amount of Each Receipt this Period  
310.00

Memo Item

**C. Welton, William, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
13716 Sutters Mill Cir.

City Midlothian State VA Zip Code 23112-4014

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803434**

Amount of Each Receipt this Period  
60.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	478.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Palmer, Bruce, D, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
6033 NW 77th Ave.

City Tamarac State FL Zip Code 33321-4646

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803471**

Amount of Each Receipt this Period  
80.00

Memo Item

**B. Phillips, Richard, N, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 520  
13716 Lake City Way NE

City Seattle State WA Zip Code 98125-2605

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803535**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Levine, Jacquelyn, A, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
4643 E 4th St

City Long Beach State CA Zip Code 90814-3075

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
11 / 02 / 2018  
**Transaction ID : 24803536**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	205.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Salmon, Frances, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2729 Valley Rd.

City  
Tupelo

State  
MS

Zip Code  
38801-0631

FEC ID number of contributing federal political committee.  
C

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : 24803743**

Amount of Each Receipt this Period  
54.00

Memo Item

**B. Schueller, James, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
12778 S Sunset Dr

City  
Traverse City

State  
MI

Zip Code  
49684-5364

FEC ID number of contributing federal political committee.  
C

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : 24803759**

Amount of Each Receipt this Period  
65.00

Memo Item

**C. Rodgers, John, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
16825 Forest Dr

City  
Lewes

State  
DE

Zip Code  
19958-4847

FEC ID number of contributing federal political committee.  
C

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : 24803811**

Amount of Each Receipt this Period  
124.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	243.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Dore, Anastasia, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 25  
11350 Reeck Rd

City Southgate State MI Zip Code 48195-2284

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt 11 / 02 / 2018  
**Transaction ID : 24803813**

Amount of Each Receipt this Period 75.00

Memo Item

**B. Faucett, Charles, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 Strickland Rd

City Alpharetta State GA Zip Code 30004-7750

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt 11 / 02 / 2018  
**Transaction ID : 24803880**

Amount of Each Receipt this Period 57.00

Memo Item

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

Mailing Address 7098 Deering St

City Garden City State MI Zip Code 48135-2248

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 01 / 2018  
**Transaction ID : 24803929**

Amount of Each Receipt this Period 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	232.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Sharpe, Yvonne, K, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
3470 Malina Pl

City Kihei State HI Zip Code 96753-6601

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
11 / 01 / 2018  
**Transaction ID : 24803966**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Skibo, Betty, A, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 203  
14431 Redmond Way

City Redmond State WA Zip Code 98052-4262

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
11 / 01 / 2018  
**Transaction ID : 24804006**

Amount of Each Receipt this Period  
125.00

Memo Item

**C. Anderson, Dwight, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
29128 304th Ave

City Winner State SD Zip Code 57580-6208

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
297.00

Date of Receipt  
11 / 01 / 2018  
**Transaction ID : 24804112**

Amount of Each Receipt this Period  
99.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	274.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Moore, Jerry, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
3644 Perada Dr

City Walnut Creek State CA Zip Code 94598-2712

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
11 / 01 / 2018  
**Transaction ID : 24804144**

Amount of Each Receipt this Period  
78.00

Memo Item

**B. Lamplighter, Jane, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
14437 Gringsby Ct

City Centreville State VA Zip Code 20120-3222

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
10 / 31 / 2018  
**Transaction ID : 24804170**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. Stockman, Roger, E, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
17 Mullray Ct

City Deptford State NJ Zip Code 08096-6713

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 31 / 2018  
**Transaction ID : 24804186**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	203.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 46
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Bundy, David, P, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
418 S Iowa St

City  
Conrad

State  
MT

Zip Code  
59425-2226

FEC ID number of contributing federal political committee.  
C

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
372.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2018

**Transaction ID : 24804189**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Macri, Suzanne, , Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
Apt C102  
610 S Franklin St

City  
Holbrook

State  
MA

Zip Code  
02343-1779

FEC ID number of contributing federal political committee.  
C

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
396.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2018

**Transaction ID : 24804249**

Amount of Each Receipt this Period  
99.00

Memo Item

**C. Bowlby, Marshall, D, Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1818 S. 33rd St.

City  
Decatur

State  
IL

Zip Code  
62521-4705

FEC ID number of contributing federal political committee.  
C

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 31 / 2018

**Transaction ID : 24804302**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	199.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**National Committee to Preserve Social Security & Medicare PAC**

**A. Landers, Neil, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2809 Costa Mesa Dr

City Dallas State TX Zip Code 75228-2039

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
357.00

Date of Receipt  
10 / 31 / 2018  
**Transaction ID : 24804362**

Amount of Each Receipt this Period  
120.00

Memo Item

**B. McGee, Helga, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
5908 Namakagan Rd

City Bethesda State MD Zip Code 20816-2345

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 31 / 2018  
**Transaction ID : 24804410**

Amount of Each Receipt this Period  
100.00

Memo Item

**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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	220.00
<b>TOTAL</b> This Period (last page this line number only).....	9967.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Advance for future In-Kind Contribution

Category/  
Type

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  
10 / 23 / 2018

FEC Identification Number  
  
**Transaction ID : 24761786**  
Amount of Each Disbursement this Period

Memo Item Advance for future In-Kind Contribution

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
REIMB. OF POSTAGE EXPENSES

Category/  
Type

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  
10 / 24 / 2018

FEC Identification Number  
  
**Transaction ID : 24762194**  
Amount of Each Disbursement this Period  
  
REIMB. OF POSTAGE EXPENSES

Memo Item

Full Name (Last, First, Middle Initial)

**C. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
REIMB. OF SHIPPING EXPENSES

Category/  
Type

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  
10 / 24 / 2018

FEC Identification Number  
  
**Transaction ID : 24762195**  
Amount of Each Disbursement this Period  
  
REIMB. OF SHIPPING EXPENSES

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
REIMB. OF ACCOUNTING FEES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 24762196**

Amount of Each Disbursement this Period

REIMB. OF ACCOUNTING FEES

Memo Item

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
REIMB. OF TRAVEL EXPENSES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 24762197**

Amount of Each Disbursement this Period

REIMB. OF TRAVEL EXPENSES

Memo Item

Full Name (Last, First, Middle Initial)

**C. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
NO EXPRESS ADVOCACY;REIMB. OF D.M. CAGING EXPENSES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 24762198**

Amount of Each Disbursement this Period

NO EXPRESS  
ADVOCACY;REIMB. OF D.M.  
CAGING EXPENSES

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement REIMB. OF PAC SALARY AND BENEFITS EXPENSES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : 24762199

Amount of Each Disbursement this Period

Memo Item REIMB. OF PAC SALARY AND BENEFITS EXPENSES

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement NO EXPRESS ADVOCACY;REIMB. OF D.M. PRINTING EXPENSES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : 24762200

Amount of Each Disbursement this Period

Memo Item NO EXPRESS ADVOCACY;REIMB. OF D.M. PRINTING EXPENSES

Full Name (Last, First, Middle Initial)

**C. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement Advance for future in-kind contributions

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : 24766427

Amount of Each Disbursement this Period

Memo Item Advance for future in-kind contributions

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Category/  
Type

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  
10 / 23 / 2018

FEC Identification Number

**Transaction ID : 24767100**  
Amount of Each Disbursement this Period  
  
 Memo Item ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Category/  
Type

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  
10 / 24 / 2018

FEC Identification Number

**Transaction ID : 24767102**  
Amount of Each Disbursement this Period  
  
 Memo Item ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Category/  
Type

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  
10 / 25 / 2018

FEC Identification Number

**Transaction ID : 24767104**  
Amount of Each Disbursement this Period  
  
 Memo Item ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUTION  Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
10 / 26 / 2018

FEC Identification Number  
  
**Transaction ID : 24767110**  
Amount of Each Disbursement this Period  
 - 2046.45  
 Memo Item ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUTIONS  Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
10 / 30 / 2018

FEC Identification Number  
  
**Transaction ID : 24776087**  
Amount of Each Disbursement this Period  
 - 826.66  
 Memo Item ADVANCE FOR FUTURE IN-KIND CONTRIBUTIONS

Full Name (Last, First, Middle Initial)

**C. SABA**

Mailing Address 7311 GROVE ROAD, UNIT G

City FREDERICK State MD Zip Code 21704

Purpose of Disbursement No Express Advocacy:Printing  Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
11 / 13 / 2018

FEC Identification Number  
  
**Transaction ID : 24778615**  
Amount of Each Disbursement this Period  
 8520.43  
 Memo Item No Express Advocacy:Printing

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

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

5647.32



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. HAUSER LIST SERVICES INC.**

Mailing Address 370 MARIE COURT

City EAST MEADOW

State NY

Zip Code 11554-4304

Purpose of Disbursement  
No Express Advocacy;Printing

006

Category/  
Type

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
11			13			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : 24778617

Amount of Each Disbursement this Period

[REDACTED] 55.00

No Express Advocacy;Printing

Memo Item

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington

State DC

Zip Code 20002

Purpose of Disbursement  
Reimb. of Postage Expenses

001

Category/  
Type

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
11			20			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : 24779710

Amount of Each Disbursement this Period

[REDACTED] 9.40

Reimb. of Postage Expenses

Memo Item

Full Name (Last, First, Middle Initial)

**C. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington

State DC

Zip Code 20002

Purpose of Disbursement  
NO EXPRESS ADVOCACY;REIMB. OF PAC SALARY & BENEFIT EXPENSES

001

Category/  
Type

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
11			20			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : 24779712

Amount of Each Disbursement this Period

[REDACTED] 3100.18

NO EXPRESS ADVOCACY;REIMB. OF PAC SALARY & BENEFIT EXPENSES

Memo Item

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

[REDACTED] 3164.58

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. NCPSSM**

Mailing Address 111 K Street, NE  
Suite 700

City Washington State DC Zip Code 20002

Purpose of Disbursement  
ADVANCE FOR IN-KIND CONTRIBUTION

011

Category/  
Type

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
11			20			2018			

FEC Identification Number

C [ ]

Transaction ID : 24801872

Amount of Each Disbursement this Period

[ ] - 1855.68

Memo Item ADVANCE FOR IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 730 15th Street, NW  
DC1-701-02-02, 2nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement  
BANK FEES

001

Category/  
Type

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
11			15			2018			

FEC Identification Number

C [ ]

Transaction ID : 24812757

Amount of Each Disbursement this Period

[ ] 122.25

BANK FEES

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

[ ]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] - 1733.43

[ ] 64378.23

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. Harder For Congress**

Mailing Address P.O. Box 4426

City Modesto

State CA

Zip Code 95352

Purpose of Disbursement Contribution

011

Candidate Name

**Harder, Josh, , ,**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: CA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	8

FEC Identification Number

C C00639146

**Transaction ID : 24743127**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends Of Ben McAdams**

Mailing Address 2205 S 1000 E

City Salt Lake City

State UT

Zip Code 84106

Purpose of Disbursement Contribution

011

Candidate Name

**McAdams, Ben, , ,**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: UT District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	1	8

FEC Identification Number

C C00658633

**Transaction ID : 24760899**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Sherrod Brown**

Mailing Address 208 Eye Street, NE

City Washington

State DC

Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

**Brown, Sherrod, , ,**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	8

FEC Identification Number

C

**Transaction ID : 24764058**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

2500.00

Contribution

Memo Item

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

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

4	5	0	0	0	0	0	0	0	0

4500.00


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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. Leslie Cockburn For Congress**

Mailing Address PO Box 186

City Sperryville State VA Zip Code 22740

Purpose of Disbursement IN-KIND CONTRIBUTION

011

Category/Type

Candidate Name

**Cockburn, Leslie, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: VA District: 05

Date of Disbursement

MM / DD / YYYY  
10 / 23 / 2018

FEC Identification Number

C C00650366

**Transaction ID : 24767101**

Amount of Each Disbursement this Period

618.35

IN-KIND CONTRIBUTION

Memo Item

Full Name (Last, First, Middle Initial)

**B. Harder For Congress**

Mailing Address P.O. Box 4426

City Modesto State CA Zip Code 95352

Purpose of Disbursement IN-KIND CONTRIBUTION

011

Category/Type

Candidate Name

**Harder, Josh, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CA District: 10

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2018

FEC Identification Number

C C00639146

**Transaction ID : 24767103**

Amount of Each Disbursement this Period

57.23

IN-KIND CONTRIBUTION

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sinema For Arizona**

Mailing Address PO Box 7586

City Phoenix State AZ Zip Code 85011

Purpose of Disbursement IN-KIND CONTRIBUTION

011

Category/Type

Candidate Name

**Sinema, Kyrsten, , Rep.,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: AZ District: 09

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2018

FEC Identification Number

C C00508804

**Transaction ID : 24767106**

Amount of Each Disbursement this Period

1320.20

IN-KIND CONTRIBUTION

Memo Item

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

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

1995.78

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Ben McAdams**

Mailing Address 2205 S 1000 E

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement  
IN-KIND CONTRIBUTION

011  
Category/  
Type

Candidate Name  
**McAdams, Ben, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: UT District: 04

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

FEC Identification Number  
C C00658633  
**Transaction ID : 24767112**  
Amount of Each Disbursement this Period  
2046.45

IN-KIND CONTRIBUTION  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Menendez For Senate**

Mailing Address PO Box 32248

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
IN-KIND CONTRIBUTION

011  
Category/  
Type

Candidate Name  
**Menendez, Robert, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: NJ District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

FEC Identification Number  
C C00264564  
**Transaction ID : 24776088**  
Amount of Each Disbursement this Period  
826.66

IN-KIND CONTRIBUTION  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Dr. Kim Schrier For Congress**

Mailing Address 3020 Issaquah Pine Lake Rd Se  
Box 331

City Sammamish State WA Zip Code 98075

Purpose of Disbursement  
Void-Dr. Kim Schrier for Congress 9.20.2018 contribution reported October Monthly

011  
Category/  
Type

Candidate Name  
**Schrier, Kim, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: WA District: 08

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
11 / 20 / 2018

FEC Identification Number  
C C00652628  
**Transaction ID : 24779790**  
Amount of Each Disbursement this Period  
- 1000.00

Void-Dr. Kim Schrier for Congress 9.20.2018 contribution reported October Monthly  
 Memo Item

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

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

1873.11

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Committee to Preserve Social Security & Medicare PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL ESPY FOR CONGRESS**

Mailing Address P.O. BOX 1005

City YAZOO CITY State MS Zip Code 39194

Purpose of Disbursement IN-KIND CONTRIBUTION

Category/Type

Candidate Name ESPY, MIKE, , ,

Office Sought:  House  Senate  President  
State: MS District: 02

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼ Runoff2018

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
11 / 20 / 2018

FEC Identification Number  
  
Transaction ID : 24802432  
Amount of Each Disbursement this Period

Memo Item IN-KIND CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
  
Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
  
Amount of Each Disbursement this Period

Memo Item

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

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