Image# 12961248038 PAGE 1 / 19

## **FEC** FORM 3Y

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

TONIWI 3X	For Other Than An Aut	thorized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, tover the lines.	ype 12FE4M5
National Committee to	o Preserve Social Sec	curity & Medicare P	PAC
ADDRESS (number and street) ▼	10 G St. NE Suite 600		
Check if different than previously reported. (ACC)	Washington		DC 20002-4215 –
2. FEC IDENTIFICATION N	NUMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00172296		S THIS NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	=	20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election)
(a) Quarterly Reports:  April 15	Apı	· 20 (M4) Jul 2	0 (M7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report ( July 15 Quarterly Report (	(c) 12-Day	Primary (12P)	X General (12G) Runoff (12R)
October 15 Quarterly Report (	Report for the:	Convention (12C)	
January 31 Year-End Report (	(YE) Electi	on on 11 0	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	ion (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		on on	in the State of
5. Covering Period	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	10 / P 2012 2012
I certify that I have examined	this Report and to the best o	f my knowledge and belie	f it is true, correct and complete.
Type or Print Name of Treasur	Ms. Christine Kim		
Signature of Treasurer Ms.	Christine Kim	[Electronically File	ed] Date 11 06 2012
NOTE: Submission of false, erro	neous, or incomplete information	on may subject the person s	signing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

## National Committee to Preserve Social Security & Medicare PAC

Report Covering the Period: From: 10 01 2012 To: 10 17 2012

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2012		91845.11
	(b) Cash on Hand at Beginning of Reporting Period	376247.73	
	(c) Total Receipts (from Line 19)	24948.10	1220499.82
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	401195.83	1312344.93
7.	Total Disbursements (from Line 31)	17652.99	928802.09
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	383542.84	383542.84
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	2799.48	

×

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

### For further information contact:

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

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

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

## National Committee to Preserve Social Security & Medicare PAC

COLUMN B endar Year-to-Date  39016.00  1181227.29  1220243.29  0.00  1220243.29  0.00  0.00  0.00  256.53
1181227.29 1220243.29 0.00 0.00 1220243.29 0.00 0.00 0.00 0.00 0.00 0.00 0.00
1181227.29 1220243.29 0.00 0.00 1220243.29 0.00 0.00 0.00 0.00 0.00 0.00 0.00
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## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
١.	(a) Allocated Federal/Non-Federal	Total Tillo I Ollow	Calendar Tear-to-Date
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	-355017.32	156255.05
	(c) Total Operating Expenditures	255047.22	456055.05
	(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	-355017.32	156255.05
	Committees	0.00	0.00
	Contributions to		
	Federal Candidates/Committees and Other Political Committees	18943.31	413444.26
	Independent Expenditures		
	(use Schedule E)	353727.00	355800.50
	Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
	(use Schedule F)	0.00	0.00
	Lean Denovimento Mede	0.00	0.00
	Loan Repayments Made	3.00	0.00
	Loans Made	0.00	0.00
	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		0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	(1111) -1111 -1111 -1111 -1111 -1111		
	Other Disbursements	0.00	3302.28
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	
	(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
	T. I B. I		
	Total Disbursements (add Lines 21(c), 22,	17050.00	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17652.99	928802.09
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	17652.99	928802.09

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	24948.10	1220243.29		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24948.10	1220243.29		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-355017.32	156255.05		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-355017.32	156255.05		

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

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

ı	FOR L	R LINE NUMBER: P					6	OF	19
ı	(check only one)								
	X 1	1a	11b		11c		12		
	1	3	14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
, ,	Social Security & Medicare PAC	
Full Name (Last, First, Middle Initial)  Mr Ralph D Cohen		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
5110 San Felipe St Unit 312W		10 04 2012
City	State Zip Code TX 77056-3623	Transaction ID : 20468572
Houston	TX 77056-3623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Ms Billie Farmer		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
611 Osprey Lakes Cir	State 7: C :	10 03 2012
City	State Zip Code	Transaction ID : 20468725
Chuluota	FL 32766-6661	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial)  C. Mrs Marion L Matthies-Newton		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
17401 El Molino St		10 02 2012
City	State Zip Code	Transaction ID: 20469109
Bloomington	CA 92316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation Retired	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	380.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number of		

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

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

FO	FOR LINE NUMBER:						7	OF		19
(check only one)										
E	<b>1</b> 1a		11b		11c		12	2		
	13		14		15		16	6		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
angle National Committee to Preserve	Social Security & Medicare PAC	
Full Name (Last, First, Middle Initial)  A. Mr Melvin J Shure		Date of Receipt
Mailing Address PO Box 57		10 02 _ 2012 _
City	State Zip Code	10 02 2012 Transaction ID : 20469443
Searsmont	ME 04973-0057	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation Retired	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00	
Full Name (Last, First, Middle Initial)  3. Mr Abraham Simon		Date of Receipt
Mailing Address  154 06 64th Ave  City	State Zip Code	10 02 2012 Transaction ID : 20469451
Flushing	NY 11367	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer	Occupation Retired	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. Barbara Thompson		Date of Receipt
Mailing Address 981 Sawyer St		10 08 2012
City	State Zip Code	Transaction ID: 20469529
Pensacola	FL 32534	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation Retired	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	675.00
TOTAL This Period (last page this line number of	only)	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

					PAGE	:	8	OF	19		
	(0	che	ck only	or	ne)						
		X	11a		11b		11c		12		
			13		14		15		16	,	17

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

or for commercial p	ourposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
	MITTEE (In Full) ommittee to Preserve	Social Security & Medicare PAC	
Mr David E V Mailing Address  City Albuquerque  FEC ID number federal political Name of Employ  Receipt For: Primary Other (spe	of contributing committee.  General	State Zip Code NM 87111  C  Occupation Retired  Aggregate Year-to-Date ▼  250.00	Date of Receipt  10 02 2012  Transaction ID: 20469599  Amount of Each Receipt this Period
Full Name (Last  Mailing Address  City	, First, Middle Initial)	State Zip Code	Date of Receipt
FEC ID number federal political Name of Employ	committee.	C Occupation	Amount of Each Receipt this Period
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last  Mailing Address  City  FEC ID number federal political	of contributing	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employ	yer	Occupation  Aggregate Year-to-Date ▼	
Other (spe	General ecify) ▼		
SUBTOTAL of Re	ceipts This Page (optional)	<u> </u>	125.00
TOTAL This Perio	d (last page this line number	only)	1100.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	NE NUMBER: PAGE 9 OF 19				
TI LIVIIZED DISBURSEIVIEN IS	for each category of the Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)  National Committee to Preserve S	Social Security & Medi	care PAC				
Full Name (Last, First, Middle Initial)  A. Michael Prucker			Date of Disburser	ment		
Mailing Address 4700 CONNECTICUT AVENUE, APT. 502	NW		10 09			
City	State Zip Code DC 20008		Transaction ID :	20407870		
Washington Purpose of Disbursement EVENT EXPENSE REIMBURSEMENT	20006	-000				
Candidate Name		003	Amount of Each I	Disbursement this Period		
		Category/ Type		1152.99		
Office Sought: House Disburs Senate President State: District:	ement For:    Primary   General     Other (specify)   \(\pi\)		EVENT EXPENSE	REIMBURSEMENT		
Full Name (Last, First, Middle Initial)  B. NCPSSM			Date of Disburser	nent		
Mailing Address 10 G Street, NE Suite 600			10 / D			
City Washington	State Zip Code DC 20002		Transaction ID	: 20460753		
Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUT	ON	011	Amount of Each [	Disbursement this Period		
Candidate Name	'	Category/ Type	-853.70			
Office Sought: House Disburse Senate President State: District:	ement For:  Primary General  Other (specify)		ADVANCE FOR F	UTURE IN-KIND CONTRIBUTION		
Full Name (Last, First, Middle Initial)  C. NCPSSM			Date of Disburser			
Mailing Address 10 G Street, NE Suite 600						
City Washington	State Zip Code DC 20002		Transaction ID	: 20461752		
Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUTI	ON	011	Amount of Each [	Disbursement this Period		
Candidate Name		Category/ Type		-874.67		
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify)		ADVANCE FOR F	UTURE IN-KIND CONTRIBUTION		
SUBTOTAL of Disbursements This Page (optional)				-575.38		

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	IE NUMBER: PAGE 10 OF 19 Inly one)		
	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the national state.					
NAME OF COMMITTEE (In Full)					
National Committee to Preserve S	ocial Security & Medi	care PAC			
Full Name (Last, First, Middle Initial)  A. NCPSSM			Date of Disbursement		
Mailing Address 10 G Street, NE Suite 600			10		
City	State Zip Code		Tananatian ID 00404704		
Washington	DC 20002		Transaction ID: 20461764		
Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUTION	DN	011	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	-224.80		
Office Sought:    House   Disburse	ment For: Primary General Other (specify)	71	ADVANCE FOR FUTURE IN-KIND CONTRIBUTION		
Full Name (Last, First, Middle Initial)  B. NCPSSM			Date of Disbursement		
Mailing Address 10 G Street, NE Suite 600			10 17 2012		
Washington	State Zip Code DC 20002		Transaction ID : 20468362		
Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUTION	ON	011	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	-1144.63		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		ADVANCE FOR FUTURE IN-KIND CONTRIBUTION		
Full Name (Last, First, Middle Initial)  C. METRICS MEDIA			Date of Disbursement		
Mailing Address 24 QUAKER LANE ATTN: BARBARA CASSIDY			10 08 2012		
City DOVER	State Zip Code NH 03820		Transaction ID : 20472853		
Purpose of Disbursement RADIO AD, IE DISSEMINATION 10/8/12 Candidate Name	RÁDIO AD, IE DISSEMINATION 10/8/12				
Mitt Romney		Category/ Type	-352227.00		
Office Sought:  House Senate  President State:  Disburse	ment For: 2012 Primary ☐ General Other (specify) ▼		RADIO AD, IE DISSEMINATION 10/8/12		
SUBTOTAL of Disbursements This Page (optional).			-353596.43		
TOTAL This Period (last page this line number only	)	·····•			

## S 17

SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 11 OF 19		
,	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 1 (check only one)			
TEMIZED DISBURSEMENTS	for each category of the	X 21b	· _ ·		
	Detailed Summary Page	27	22 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and Stater	nents may not be sold or used	by any perso	on for the purpose of soliciting contributions		
or for commercial purposes, other than using the nan	he and address of any political	r committee to	Solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)		540			
National Committee to Preserve So	ocial Security & Medi	care PAC			
Full Name (Last, First, Middle Initial)			Date of Disbursement		
NCPSSM			M M / D D / Y Y Y		
Mailing Address 10 G Street, NE			10 07 2012		
Suite 600 City	State Zip Code				
Washington	DC 20002		Transaction ID: 20484203		
Purpose of Disbursement ADVANCE FOR FUTURE IN-KIND CONTRIBUTIO	NI I	044			
Candidate Name		011	Amount of Each Disbursement this Period		
		Category/ Type	-845.51		
Office Sought: House Disburser	ment For:				
Senate	Primary General		ADVANCE FOR FUTURE IN-KIND CONTRIBU		
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
<b>3.</b>			Date of Disbursement		
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Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
r dipose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name	I	Category/			
		Type			
Office Sought: House Disburser	ment For:				
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
··					
Mailing Address			M   M / D   D / Y   Y   Y   Y		
City	State Zip Code				
•	<u> </u>				
Purpose of Disbursement	Purpose of Disbursement				
Candidate Name	Candidate Name				
Carallado Harro		Category/ Type			
Office Sought: House Disburser	ment For:	- 7 8 4	7		
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)		·····•	-845.51		
			-355017.32		

20	HEDIII E D /EEC Earm 2V								_			
30	CHEDULE B (FEC Form 3X)	Use separate schedule(s) FOR LINE			R LINE	NE NUMBER: PAGE 12 OF 19			9			
ITE	EMIZED DISBURSEMENTS		category of the	(che	eck only			_				
			Summary Page		21b	22	<b>X</b> 23		24	25	2	26
					27	28a	28b	)	28c	29	3	30b
An	y information copied from such Reports and Stater	ments may	not be sold or use	ed by a	ny perso	on for the	purpose	of so	oliciting	contrib	utions	
or	for commercial purposes, other than using the nan	ne and add	ress of any politic	al comr	nittee to	solicit co	ntribution	ns fro	m such	comm	ttee.	
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
	National Committee to Preserve So	ocial Se	curity & Med	licare	PAC							
	Tradicinal Committees to 1 1000110 Ct	oolal oo	ourney a moa	iioai o	. , .							
	Full Name (Last, First, Middle Initial)											
Α.	Menendez For Senate					Date o	f Disburs	semer	nt			
						M M	/ D	D	/ Y	YY	Y	
	Mailing Address PO Box 32248					10	JL	03		2012		
	,	State	Zip Code			Trans	saction I	D : 20	400456	<b>;</b>		
	Newark	NJ	07102									
	Purpose of Disbursement Contribution			01	1	Amoun	t of East	h Dial	uroom	ant thia	Doriod	
	Candidate Name			01		Amoun	t of Eacl	וו טוטו	Juiseili	3111 11115	renou	
				Cateo		1.				100	00.00	н
	Sen. Robert Menendez Office Sought: House Disburser		0040	Тур	oe		- 7		7			
		ment For:										
	Senate President	Primary	General			Contrib	ution					
	State: NJ District:	Other (spe	city) 🔻									
В.	Full Name (Last, First, Middle Initial)	`   C	\			Data o	f Disburs	comor	<b>\</b> +			
٥.	Montgomery County Democratic C	entrai C	ommittee			Date 0						
	Mailing Address 3720 Farragut Avenue, #303					10	/ D	09	/ Y	2012	Y	
	Walling Address 3/20 Falladul Avellue, #303					10	_	Ų3		2012		
	<b>5</b>											
		State	Zip Code			_						
		State MD	Zip Code 20895			Trans	saction I	D : 20	)40787	I		
	City Kensington Purpose of Disbursement					Trans	saction I	D : 20	)40787′	l		
	City Kensington			01	1		saction I				Period	
	City Kensington Purpose of Disbursement									ent this	-	1
	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION			01 Categ	gory/					ent this	Period	]
	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION	MD		Categ	gory/					ent this	-	
	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION Candidate Name  Office Sought: House Disburser Senate	MD		Categ	gory/	Amoun		h Disl	oursem	ent this	00.00	]
	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION Candidate Name  Office Sought: House Disburser	MD ment For:	20895  General	Categ	gory/	Amoun	t of Eacl	h Disl	oursem	ent this	00.00	
	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION Candidate Name  Office Sought: House Disburser Senate	ment For: Primary	20895  General	Categ	gory/	Amoun	t of Eacl	h Disl	oursem	ent this	00.00	
	City  Kensington  Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION  Candidate Name  Office Sought: House Senate President	ment For: Primary	20895  General	Categ	gory/	Amoun	t of Eacl	h Disl	oursem	ent this	00.00	
	City  Kensington  Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION  Candidate Name  Office Sought: House Senate President  State: District:	ment For: Primary	20895  General	Categ	gory/	Amoun 2012 C	t of Eacl	h Disl	oursem	ent this	00.00	
	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)	ment For: Primary	20895  General	Categ	gory/	Amoun 2012 C	ALENDA	h Disl	AR CO	200 NTRIBU	OO.OO JTION	
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C.	City Kensington Purpose of Disbursement 2012 CALENDAR YEAR CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Stabenow For Us Senate  Mailing Address P.O. Box 4945	ment For: Primary Other (spe	20895  General cify)	Categ	gory/	Amoun 2012 C	ALENDA	h Disl	AR CO	200 NTRIBU	OO.OO JTION	
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$\overline{}$	NAME OF COMMITTEE (In Full)		2 P = 100						
I \	National Committee to Preserve So	ocial Se	curity & Med	icare PAC					
	Full Name (Last, First, Middle Initial)								
Α.	Carmona For Arizona				Date of	f Disburser	ment		
	Mailing Address PO Box 12339				10	09		2012	Y
	City 5	State	Zip Code				20101500		
	Tucson	AZ	85732		Trans	saction ID :	20424599		
	Purpose of Disbursement Contribution			011	Amoun	t of Each [	Disburseme	nt this I	Period
	Candidate Name			Category/				2000	0.00
	Mr. Richard Carmona			Type		7	- 7	2000	,.00
	X Senate	nent For: Primary Other (spe	X General		Contrib	ution			
_	State: AZ District:								
_	Full Name (Last, First, Middle Initial)				Data	( D'alaman			
В.	Friends Of Charlie Wilson					f Disburser			_
	Mailing Address P.O. Box 334				10	09		2012	Y
	Bridgeport	State OH	Zip Code 43912		Trans	saction ID	: 20424602		
	Purpose of Disbursement Contribution			011	Amoun	t of Each [	Disburseme	nt this I	Period
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	Mr. Charles Wilson			Type		-	7	1000	5.00
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	Full Name (Last, First, Middle Initial)								
C.	Cardin for Senate				Date of	f Disburser	ment		
	Mailing Address 38 Ivy Street, SE				10	/ D 11		2012	Y
	City	State	Zip Code		<b>T</b>	ID	00400050		
	Washington	DC	20003		irans	SACTION ID	: 20428058		
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or	for commercial purposes, other than using the nam	e and address of	f any political	committee to	solicit contributions from such committee.		
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
	National Committee to Preserve So	ocial Securit	v & Medic	care PAC			
	Tradional Committee to 1 1000170 Co	olal Gooding	y a modic				
	Full Name (Last, First, Middle Initial)						
Α.	Kathy Hochul For Congress				Date of Disbursement		
	ridarly ricerian refree enginees				M M / D D / Y Y Y Y		
	Mailing Address PO Box 64				10 11 2012		
	City	State Zip	Code		Transaction ID - 20420050		
	Buffalo	NY 142	31		Transaction ID: 20428059		
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	Candidate Name			Category/			
	Ms. Kathleen Hochul			Type	1000.00		
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	President	Other (specify)	7				
	State: NY District: 26		•				
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В.	Louise Slaughter Re-Election Com	mittee			Date of Disbursement		
	Louise Glaughter Ne-Liection Com	millee			M M / D D / Y Y Y Y		
	Mailing Address P.O. Box 730				10 11 2012		
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	Honeoye	NY 144			Transaction ID: 20428060		
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	Contribution  Candidate Name  Louise M. Slaughter  Office Sought:  House Senate  Disbursen		General	Category/	1000.00		
	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28	Primary	General	Category/	1000.00		
— C	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)	Primary	General	Category/	1000.00  Contribution		
c.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28	Primary	General	Category/	1000.00  Contribution  Date of Disbursement		
С.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei	Primary	General	Category/	1000.00  Contribution  Date of Disbursement		
<b>c</b> .	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)	Primary	General	Category/	1000.00  Contribution  Date of Disbursement		
<u> </u>	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230	Primary X	General	Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
<u> </u>	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City	Primary X	General 7	Category/	1000.00  Contribution  Date of Disbursement		
с.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse  Purpose of Disbursement	Primary Other (specify)	General 7	Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
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c.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse  Purpose of Disbursement CONTRIBUTION	Primary Other (specify)	General  Code 01	Category/ Type  011 Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
С.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse  Purpose of Disbursement CONTRIBUTION  Candidate Name  Mr. Daniel Maffei	Primary Other (specify) •  State Zip 0 NY 1320	General  Code 01	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
c.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse  Purpose of Disbursement CONTRIBUTION  Candidate Name  Mr. Daniel Maffei  Office Sought: House Disbursement	Primary Other (specify)  State Zip NY 132	General  Code 01	Category/ Type  011 Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
C.	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse Purpose of Disbursement CONTRIBUTION  Candidate Name  Mr. Daniel Maffei  Office Sought: House Senate  Disbursen	Primary Other (specify) •  State Zip 0 NY 1320	General  Code 01  General	Category/ Type  011 Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
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	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President  State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse  Purpose of Disbursement CONTRIBUTION  Candidate Name  Mr. Daniel Maffei  Office Sought: House Senate President  State: NY District: 24	Primary Other (specify)  State Zip ( NY 132)  nent For: 2012 Primary Other (specify)	General Code 01 General	Category/ Type  011  Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Contribution  Candidate Name  Louise M. Slaughter  Office Sought: House Senate President State: NY District: 28  Full Name (Last, First, Middle Initial)  Friends Of Dan Maffei  Mailing Address PO Box 230  City Syracuse Purpose of Disbursement CONTRIBUTION  Candidate Name  Mr. Daniel Maffei  Office Sought: House Senate President  Disbursement  Senate President	Primary Other (specify)  State Zip ( NY 132)  nent For: 2012 Primary Other (specify)	General Code 01 General	Category/ Type  011  Category/ Type	Contribution  Date of Disbursement  10		

SCHEDULE B (FEC Form 3X)	Llos conorete cabadula/a	FOR LINE NUMBER: PAGE 15 OF 19			
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only 21b 27	one)  22		
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NAME OF COMMITTEE (In Full)					
National Committee to Preserve S	ocial Security & Me	dicare PAC			
Full Name (Last, First, Middle Initial)  A. KEEP NICK RAHALL IN CONGRI	SS COMMITTEE		Date of Disbursement		
Mailing Address P.O. BOX 75214			10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code DC 20013		Transaction ID: 20442584		
WASHINGTON Purpose of Disbursement	DC 20013				
CONTRIBUTION		011	Amount of Each Disbursement this Period		
Candidate Name NICK RAHALL		Category/ Type	2000.00		
Office Sought: House Disburse Senate President	ement For: 2012 Primary		CONTRIBUTION		
State: WV District: 03	-				
Full Name (Last, First, Middle Initial)  3- Langevin for Congress			Date of Disbursement		
Mailing Address 181-A Knight Street		M M / D D / Y Y Y Y Y Y 10 10 04 2012			
Cia.	Otata 7in Cada				
City Warwick	State Zip Code RI 02886		Transaction ID: 20460754		
Purpose of Disbursement IN-KIND CONTRIBUTION		011	Amount of Each Disbursement this Period		
Candidate Name		Category/			
James Langevin		Type	853.70		
Office Sought:    House   Disburse	ement For: 2012 Primary ☐ General Other (specify) ▼		IN-KIND CONTRIBUTION		
Full Name (Last, First, Middle Initial)  Louise Slaughter Re-Election Con	nmittee		Date of Disbursement		
Mailing Address P.O. Box 730			10 10 2012 _		
City	State Zip Code				
City Honeoye	State Zip Code NY 14471		Transaction ID: 20461763		
Purpose of Disbursement IN-KIND CONTRIBUTION		011	Amount of Each Disbursement this Period		
Candidate Name Louise M. Slaughter		Category/ Type	874.67		
Office Sought: House Disburse Senate President	ment For: 2012 Primary	туре	IN-KIND CONTRIBUTION		
			3728.37		
SUBTOTAL of Disbursements This Page (optional).		<u> </u>	3120.31		
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2	CHEDULE B (FEC Form 3X)					
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or	for commercial purposes, other than using the nan	ne and address of any politic	al committee to	solicit contributions from such committee.		
$\overline{\ }$	NAME OF COMMITTEE (In Full)					
	National Committee to Preserve So	ocial Security & Med	licare PAC			
	riational committee to 1 1000110 C	Joiai Goodiniy a Moc	1100101710			
	Full Name (Last, First, Middle Initial)					
Α.	Kathy Hochul For Congress			Date of Disbursement		
	riamily ricerian representation			M M / D D / Y Y Y Y		
	Mailing Address PO Box 64			10 09 2012		
	City	State Zip Code		Transaction ID : 20461770		
	Buffalo	NY 14231		Transaction ID: 20461770		
	Purpose of Disbursement					
	IN-KIND CONTRIBUTION		011	Amount of Each Disbursement this Period		
	Candidate Name		Category/	224.00		
	Ms. Kathleen Hochul		Type	224.80		
	Office Sought: House Disburser	ment For: 2012				
	Senate	Primary		IN-KIND CONTRIBUTION		
	President	Other (specify) ▼				
	State: NY District: 26					
	Full Name (Last, First, Middle Initial)					
В.		ee.		Date of Disbursement		
	Bill I cotol I of Congress Committee			M M / D D / Y Y Y Y		
	Mailing Address P.O. Box 9104			10 17 2012		
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	City	State Zip Code		Transaction ID - 20400204		
	Aurora	IL 60598		Transaction ID: 20468364		
	Purpose of Disbursement					
	IN-KIND CONTRIBUTION		011	Amount of Each Disbursement this Period		
	Candidate Name		Category/	4444.00		
	Bill Foster		Type	1144.63		
	Office Sought:	ment For: 2012				
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	President	Other (specify) ▼				
	State: IL District: 11					
	Full Name (Last, First, Middle Initial)					
C.	Friends Of Patrick Murphy			Date of Disbursement		
	Thomas of Fauren marphy			M M / D D / Y Y Y		
	Mailing Address 4521 Pga Blvd. #412			10 07 2012		
	5					
	City	State Zip Code		Transaction ID : 20484204		
	Palm Beach Gardens	FL 33418		Transaction ID : 20464204		
	Purpose of Disbursement					
	IN-KIND CONTRIBUTION		011	Amount of Each Disbursement this Period		
	Candidate Name		Category/	oversi		
	Mr. Patrick Murphy		Type	845.51		
	Office Sought: House Disburser	ment For: 2012				
	Senate	Primary General		IN-KIND CONTRIBUTION		
	President	Other (specify)				
	State: FL District: 18					
	'					
S	SUBTOTAL of Disbursements This Page (optional)			2214.94		

## SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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17 OF

NAME OF COMMITTEE (In Full) National Committee to Preserve Social Security & Medicare PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): POSTAGE, IE DESSEMINATION 10/15/12 NCPSSM Mailing Address 10 G STREET, NE, SUITE 600 State Zip Code DC WASHINGTON 20002 Transaction ID: 20485768 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2151.84 2151.84 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): POSTAGE, IE DESSEMINATION 10/16/12 NCPSSM Mailing Address 10 G STREET, NE, SUITE 600 City State Zip Code WASHINGTON DC 20002 Outstanding Balance Beginning This Period Transaction ID: 20485769 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 647.64 0.00 647.64 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 2799.48 1) SUBTOTALS This Period This Page (optional)..... 2799.48 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 2799.48 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

NAME OF COMMITTEE (In Full)

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

		PAGE 18 OF 19 FOR LINE 24 OF FORM 3X
· & Medicare PA0		FEC IDENTIFICATION NUMBER ▼
		C C00172296
eport Amends repo		M = M / D = D / Y = Y = Y
	Date	
	[	M 10 / 05 / Y 2012
	Amou	unt
Zip Code 20121	Transa	1500.00 action ID : 20405213
Category/	Office Soug	
Type 004		Senate District:  President
re:	Check One	
1500.00	Disburseme 2012 O	ent For: Primary General Other (specify)
	Date	
	[	M 10
	Amou	unt
Zip Code 03820		352227.00
Category/	Office Soug	action ID : 20470561 ght: House State:
Type 004		Senate District:
re:	Check One	President  Support Oppose
353727.00	Disburseme 2012 O	ent For: Primary General Other (specify)
	<b>.</b>	353727.00
	· -	7 1 7 1 7

National Committee to Preserve Social Security Check if 24-hour report 48-hour report New re Full Name (Last, First, Middle Initial) of Payee WHO DID THAT MEDIA LLC Mailing Address 6284 CLAY PIPE COURT City State **CENTREVILLE** VA Purpose of Expenditure RADIO AD, IE DISSEMINATION 10/8/12 Name of Federal Candidate Supported or Opposed by Expenditu Mitt Romney Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee METRICS MEDIA Mailing Address 24 QUAKER LANE ATTN: BARBARA CASSIDY City State NH **DOVER** Purpose of Expenditure RADIO AD, IE DISSEMINATION 10/8/12 Name of Federal Candidate Supported or Opposed by Expenditu Mitt Romney Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Christine Kim [Electronically Filed] 2012 Date 06 Signature

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	19	OF	19
FOR L	NE 24	OF F	ORM 3X

	TOTT LINE 24 OF TOTAL 3X				
NAME OF COMMITTEE (In Full)  National Committee to Preserve Social Security & Medicare PAC  FEC IDENTIFICATION NUMBER ▼					
	C C00172296				
Check if 24-hour report 48-hour report New report Amends report	filed on Man / Dab / Yayayay				
Full Name (Last, First, Middle Initial) of Payee  NCPSSM	Date				
[MEMO ITEM] POSTAGE- DISSEMINATION 10/15/2012	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 10 G Street, NE Suite 600	Amount				
City State Zip Code					
Washington DC 20002	2151.84 Transaction ID : 20469842				
Purpose of Expenditure POSTAGE- DISSEMINATION 10/15/2012  Category/ 001	Office Sought: House State: HI				
lype	Senate District:  President				
Name of Federal Candidate Supported or Opposed by Expenditure:  Ms. Mazie Hirono	Check One: Support Oppose				
Calendar Year-To-Date Per Election	Disbursement For: Primary General				
	Other (specify)				
Full Name (Last, First, Middle Initial) of Payee	Date				
NCPSSM [MEMO ITEM] POSTAGE- DISSEMINATION 10/16/2012	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 10 G Street, NE					
Suite 600 City State Zip Code	Amount				
Washington DC 20002	647.64 Transaction ID : 20469840				
Purpose of Expenditure POSTAGE- DISSEMINATION 10/16/2012  Category/ Time 001	Office Sought: House State: NY				
Туре	Senate District: 26 President				
Name of Federal Candidate Supported or Opposed by Expenditure:  Ms. Kathleen Hochul	Check One: Support Oppose				
Colonday Voor To Date Day Floation	Disbursement For: Primary General				
Calendar Year-To-Date Per Election for Office Sought 647.64	2012 Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	0.00				
(b) SUBTOTAL of Unitemized Independent Expenditures	•				
(c) TOTAL Independent Expenditures	353727.00				
Under penalty of perjury I certify that the independent expenditures reported herein were newith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.					
Ms. Christine Kim [Electronically Filed] Date	11 06 2012				
Signature					