

# 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 [09] / [01] / [2018] through [09] / [30] / [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 [10] / [18] / [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)

Page 2

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" value=""/>	<input type="text" value="103393.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="238924.70"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="150085.68"/>	<input type="text" value="634220.39"/>
(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="389010.38"/>	<input type="text" value="737613.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="64093.32"/>	<input type="text" value="412696.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="324917.06"/>	<input type="text" value="324917.06"/>
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:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13196.00	33876.25
(ii) Unitemized .....	136832.19	600198.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	150028.19	634075.04
(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) .....	150028.19	634075.04
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.).....	57.49	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)).....▶	150085.68	634220.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	150085.68	634220.39

**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 .....	33069.89	293416.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	33069.89	293416.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31023.43	116577.57
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)) ..	64093.32	412696.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64093.32	412696.62

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	150028.19	634075.04
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	150028.19	634075.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	33069.89	293416.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	33069.89	293416.36

**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 43
<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. McCain, Frank, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
23 Hiawatha Ave

City Oceanport State NJ Zip Code 07757-1605

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  
09 / 05 / 2018  
**Transaction ID : 24723892**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. Lastova, John, R, Mr, Jr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 317  
3144 Gracefield Road

City Silver Spring State MD Zip Code 20904-5882

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  
09 / 10 / 2018  
**Transaction ID : 24723979**

Amount of Each Receipt this Period  
125.00

Memo Item

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

Mailing Address  
3204 14th St S

City Arlington State VA Zip Code 22204-4333

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 ▼  
308.00

Date of Receipt  
09 / 04 / 2018  
**Transaction ID : 24723993**

Amount of Each Receipt this Period  
308.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	583.00
<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 43
	<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. 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 ▼ 210.00

Date of Receipt  
 09 / 10 / 2018  
**Transaction ID : 24724056**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item

**B. Ryznar, Ann, , Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 500 Woodlawn Ave  
 City Fox River Grove State IL Zip Code 60021-1926  
 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 ▼ 257.00

Date of Receipt  
 09 / 20 / 2018  
**Transaction ID : 24724092**  
 Amount of Each Receipt this Period  
 157.00  
 Memo Item

**C. Grabowsky, Wallis, R, Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 117 Painted Bunting Ln  
 City Georgetown State TX Zip Code 78633-4800  
 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 ▼ 694.00

Date of Receipt  
 09 / 17 / 2018  
**Transaction ID : 24724186**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	367.00
<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 43
<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 ▼ 322.00

Date of Receipt  
09 / 04 / 2018  
Transaction ID : 24724193

Amount of Each Receipt this Period  
136.00

Memo Item

**B. 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 ▼ 220.00

Date of Receipt  
09 / 05 / 2018  
Transaction ID : 24724213

Amount of Each Receipt this Period  
90.00

Memo Item

**C. 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 ▼ 626.00

Date of Receipt  
09 / 21 / 2018  
Transaction ID : 24724282

Amount of Each Receipt this Period  
313.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	539.00
<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 43
<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. Sisk, Gaylord, A, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
PO Box 2293

City Lynnwood State WA Zip Code 98036-2293

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 ▼  
290.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24724358**

Amount of Each Receipt this Period  
125.00

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 ▼  
300.00

Date of Receipt  
09 / 21 / 2018  
**Transaction ID : 24724772**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address Apt 1  
121 Lime St

City Inglewood State CA Zip Code 90301-6928

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  
09 / 20 / 2018  
**Transaction ID : 24724808**

Amount of Each Receipt this Period  
125.00

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 10 OF 43
<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. 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 ▼  
550.00

Date of Receipt  
09 / 21 / 2018  
**Transaction ID : 24724864**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. 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

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  
09 / 20 / 2018  
**Transaction ID : 24724901**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Figueroa, Henry, V, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
12842 Waco St

City: Baldwin Park State: CA Zip Code: 91706-3643

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  
09 / 20 / 2018  
**Transaction ID : 24724959**

Amount of Each Receipt this Period  
68.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	368.00
<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 11 OF 43
<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. Eddins, Jerry, F, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
PO Box 546

City Chino Valley State AZ Zip Code 86323-0546

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  
09 / 05 / 2018  
**Transaction ID : 24724960**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address  
41-699 Inoaole St

City Waimanalo State HI Zip Code 96795-1211

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  
09 / 20 / 2018  
**Transaction ID : 24724973**

Amount of Each Receipt this Period  
255.00

Memo Item

**C. Mendelson, Judith, B, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
592 General Learned Rd.

City King Of Prussia State PA Zip Code 19406-1606

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 ▼  
263.50

Date of Receipt  
09 / 17 / 2018  
**Transaction ID : 24724995**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	655.00
<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 43
<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 ▼  
230.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24725075**

Amount of Each Receipt this Period  
60.00

Memo Item

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

Mailing Address  
5924 Annan Way

City Los Angeles State CA Zip Code 90042-1222

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  
09 / 20 / 2018  
**Transaction ID : 24725360**

Amount of Each Receipt this Period  
118.00

Memo Item

**C. Fong, Robert, , 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 ▼  
357.00

Date of Receipt  
09 / 21 / 2018  
**Transaction ID : 24725396**

Amount of Each Receipt this Period  
153.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	331.00
<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 43
<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. 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 ▼ 297.00

Date of Receipt  
MM / DD / YYYY  
09 / 04 / 2018

**Transaction ID : 24725428**

Amount of Each Receipt this Period  
99.00

Memo Item

**B. Schreiber, Arthur, H, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
64 N Mountain Ave

City Ashland State OR Zip Code 97520-2014

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  
MM / DD / YYYY  
09 / 05 / 2018

**Transaction ID : 24725451**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Mooney, Frank, L, Mr, Sr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2106 Maryal Dr

City Sacramento State CA Zip Code 95864-0753

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 ▼ 331.00

Date of Receipt  
MM / DD / YYYY  
09 / 17 / 2018

**Transaction ID : 24725493**

Amount of Each Receipt this Period  
231.00

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 14 OF 43
<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. 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 ▼  
298.00

Date of Receipt  
09 / 21 / 2018  
**Transaction ID : 24725540**

Amount of Each Receipt this Period  
150.00

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 ▼  
275.00

Date of Receipt  
09 / 10 / 2018  
**Transaction ID : 24725637**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address  
12215 W Diane Dr

City Wauwatosa State WI Zip Code 53226-3356

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  
09 / 17 / 2018  
**Transaction ID : 24725645**

Amount of Each Receipt this Period  
750.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 43
<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 ▼ 425.00

Date of Receipt 09 / 05 / 2018  
**Transaction ID : 24725685**

Amount of Each Receipt this Period 225.00

Memo Item

**B. 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 ▼ 450.00

Date of Receipt 09 / 21 / 2018  
**Transaction ID : 24725831**

Amount of Each Receipt this Period 200.00

Memo Item

**C. Gibbs, Helen, T, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 2  
527 Stafford Ave

City Scranton State PA Zip Code 18505-3482

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 09 / 04 / 2018  
**Transaction ID : 24725909**

Amount of Each Receipt this Period 50.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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 16 OF 43
<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. 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 ▼ 375.00

Date of Receipt  
09 / 17 / 2018  
**Transaction ID : 24726049**

Amount of Each Receipt this Period  
125.00

Memo Item

**B. 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 ▼ 239.00

Date of Receipt  
09 / 04 / 2018  
**Transaction ID : 24726206**

Amount of Each Receipt this Period  
114.00

Memo Item

**C. 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 ▼ 450.00

Date of Receipt  
09 / 17 / 2018  
**Transaction ID : 24726212**

Amount of Each Receipt this Period  
175.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	414.00
<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 43
<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. Skibo, Betty, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt 111  
12215 NE 128th St

City Kirkland State WA Zip Code 98034-7304

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 ▼ 325.00

Date of Receipt 09 / 21 / 2018  
**Transaction ID : 24726226**

Amount of Each Receipt this Period 125.00

Memo Item

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

Mailing Address 1601 E 26th Ave

City Anchorage State AK Zip Code 99508-4001

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 ▼ 244.00

Date of Receipt 09 / 21 / 2018  
**Transaction ID : 24726411**

Amount of Each Receipt this Period 75.00

Memo Item

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

Mailing Address 1504 Oakwood Dr

City Albert Lea State MN Zip Code 56007-1543

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 ▼ 336.00

Date of Receipt 09 / 04 / 2018  
**Transaction ID : 24726574**

Amount of Each Receipt this Period 144.00

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 18 OF 43
<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. Blankenship, Ramona, B, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2562 Winchester Rd

City Montgomery State AL Zip Code 36106-3340

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 ▼ 913.00

Date of Receipt  
09 / 05 / 2018  
Transaction ID : 24726587

Amount of Each Receipt this Period  
300.00

Memo Item

**B. Tiedemann, Diana, G, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2515 Walnut St

City Harrisburg State PA Zip Code 17103-1753

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  
09 / 21 / 2018  
Transaction ID : 24726607

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address  
17 Jefferson Ave

City Norwell State MA Zip Code 02061-1924

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 ▼ 282.00

Date of Receipt  
09 / 20 / 2018  
Transaction ID : 24726654

Amount of Each Receipt this Period  
94.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	494.00
<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 43
	<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. 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 ▼  
350.00

Date of Receipt  
09 / 10 / 2018  
Transaction ID : 24726885

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Broughton, Marla, J, Ms,**

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

Mailing Address  
218 Valley Stream Ln

City Chesterbrook State PA Zip Code 19087-5855

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 ▼  
488.00

Date of Receipt  
09 / 21 / 2018  
Transaction ID : 24726894

Amount of Each Receipt this Period  
188.00

Memo Item

**C. 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 ▼  
400.00

Date of Receipt  
09 / 05 / 2018  
Transaction ID : 24726934

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	488.00
<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 43
<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. 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 ▼  
210.00

Date of Receipt  
09 / 20 / 2018  
Transaction ID : 24726970

Amount of Each Receipt this Period  
95.00

Memo Item

**B. Elliot, Judith, M, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
204 Earnshaw Dr

City Dayton State OH Zip Code 45429-2712

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 ▼  
575.00

Date of Receipt  
09 / 04 / 2018  
Transaction ID : 24727038

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address  
944 Catfish Creek Rd

City Lake Placid State FL Zip Code 33852-9492

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 ▼  
891.00

Date of Receipt  
09 / 05 / 2018  
Transaction ID : 24727050

Amount of Each Receipt this Period  
274.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	669.00
<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 21 OF 43
<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. Bearman, Katherine, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
275F Scituate Avenue

City Cranston State RI Zip Code 02921-1819

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 ▼  
254.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24727081**

Amount of Each Receipt this Period  
254.00

Memo Item

**B. 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 ▼  
550.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24727085**

Amount of Each Receipt this Period  
300.00

Memo Item

**C. Waldrep Hickey, Marilyn, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Unit 105  
4250 Granby St

City Norfolk State VA Zip Code 23504-1126

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 ▼  
700.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24727178**

Amount of Each Receipt this Period  
400.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 954.00

**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 22 OF 43
<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. Robinson, Emogene, , Miss,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
233 Route 81

City Killingworth State CT Zip Code 06419-1445

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  
09 / 21 / 2018  
**Transaction ID : 24727235**

Amount of Each Receipt this Period  
75.00

Memo Item

**B. 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 ▼  
565.00

Date of Receipt  
09 / 21 / 2018  
**Transaction ID : 24727476**

Amount of Each Receipt this Period  
189.00

Memo Item

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

Mailing Address  
19250 Kiowa Ln

City Cottonwood State CA Zip Code 96022-9620

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 ▼  
337.00

Date of Receipt  
09 / 05 / 2018  
**Transaction ID : 24727491**

Amount of Each Receipt this Period  
212.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	476.00
<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 43
<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. 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 ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2018

**Transaction ID : 24727496**

Amount of Each Receipt this Period  
100.00

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 ▼ 315.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2018

**Transaction ID : 24727645**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address  
45-549 Kiani St

City Kaneohe State HI Zip Code 96744-2915

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 ▼ 588.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2018

**Transaction ID : 24727688**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	340.00
<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 43
	<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	

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. Seagears, Marilyn N., N, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Evenstar Ln.  
 9909  
 City Fairfax Station State VA Zip Code 22039-2501  
 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 ▼ 254.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2018  
**Transaction ID : 24727722**  
 Amount of Each Receipt this Period  
 254.00  
 Memo Item

**B. Dowling, Sue, C, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4841 Vera Cir  
 City Waycross State GA Zip Code 31503-7029  
 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 ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2018  
**Transaction ID : 24727734**  
 Amount of Each Receipt this Period  
 185.00  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2018  
**Transaction ID : 24727800**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	539.00
<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 43
<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. 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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2018

**Transaction ID : 24727826**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. 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 ▼  
237.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2018

**Transaction ID : 24728006**

Amount of Each Receipt this Period  
79.00

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 ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2018

**Transaction ID : 24728121**

Amount of Each Receipt this Period  
65.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	244.00
<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 43
<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. 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 ▼  
215.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24728261**

Amount of Each Receipt this Period  
80.00

Memo Item

**B. Christensen, Dean, D, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
390 E US Highway 12

City Chesterton State IN Zip Code 46304-9530

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 ▼  
272.00

Date of Receipt  
09 / 04 / 2018  
**Transaction ID : 24728401**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address  
5247 71st St

City Maspeth State NY Zip Code 11378-1433

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  
09 / 05 / 2018  
**Transaction ID : 24728453**

Amount of Each Receipt this Period  
750.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 930.00

**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 27 OF 43
<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. Zeisser, Melvin, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
413 Pembroke Lane

City Windsor State CT Zip Code 06095-5224

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 ▼ 267.00

Date of Receipt  
09 / 04 / 2018  
Transaction ID : 24728672

Amount of Each Receipt this Period  
267.00

Memo Item

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

Mailing Address Apt W15C  
170 E 87th Street

City New York State NY Zip Code 10128-2238

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  
09 / 04 / 2018  
Transaction ID : 24728710

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Sohn, Janice, B, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1094 Oakes Blvd

City San Leandro State CA Zip Code 94577-3042

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 ▼ 325.00

Date of Receipt  
09 / 05 / 2018  
Transaction ID : 24728913

Amount of Each Receipt this Period  
125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	492.00
<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 43
	<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. Jones, Mildred, , Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
1976 Ashley St

City Philadelphia State PA Zip Code 19138-2725

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 ▼  
211.00

Date of Receipt  
09 / 11 / 2018  
**Transaction ID : 24729123**

Amount of Each Receipt this Period  
113.00

Memo Item

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

Mailing Address Apt 101  
2853 Ontario Rd NW

City Washington State DC Zip Code 20009-2237

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 ▼  
488.00

Date of Receipt  
09 / 10 / 2018  
**Transaction ID : 24729214**

Amount of Each Receipt this Period  
244.00

Memo Item

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

Mailing Address  
806 Craig Dr

City Staunton State VA Zip Code 24401-1628

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 ▼  
321.00

Date of Receipt  
09 / 20 / 2018  
**Transaction ID : 24729326**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	507.00
<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 43
<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. Fairhurst, Nancy, J, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Apt H107  
5555 Montgomery Dr

City Santa Rosa State CA Zip Code 95409-8841

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 ▼ 582.00

Date of Receipt 09 / 07 / 2018  
**Transaction ID : 24729331**

Amount of Each Receipt this Period 282.00

Memo Item

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

Mailing Address 573 S Boyle Ave

City Los Angeles State CA Zip Code 90033-3816

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 ▼ 275.00

Date of Receipt 09 / 21 / 2018  
**Transaction ID : 24729379**

Amount of Each Receipt this Period 175.00

Memo Item

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

Mailing Address 22 Maquoit Rd

City Brunswick State ME Zip Code 04011-7475

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 09 / 10 / 2018  
**Transaction ID : 24729780**

Amount of Each Receipt this Period 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	557.00
<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 43
	<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. Mervin, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 140 Cumberland Ct  
 City  
 Tulare  
 State  
 CA  
 Zip Code  
 93274-9237  
 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 ▼  
 382.00

Date of Receipt  
 09 / 20 / 2018  
**Transaction ID : 24729932**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. Hecker, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 Apt 45  
 2221 Wentwood Valley Dr  
 City  
 Little Rock  
 State  
 AR  
 Zip Code  
 72212-3627  
 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  
 09 / 05 / 2018  
**Transaction ID : 24730121**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Claussen, Robert, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 3491 Zurich Ct  
 City  
 Carson City  
 State  
 NV  
 Zip Code  
 89705-7020  
 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  
 09 / 04 / 2018  
**Transaction ID : 24730135**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	13196.00

**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

/  /

FEC Identification Number

**Transaction ID : 24686034**  
Amount of Each Disbursement this Period  
 - 1089.45  
 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  
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 : 24689451**  
Amount of Each Disbursement this Period  
 56.13  
 Memo Item REIMB. OF TRAVEL 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  
NO EXPRESS ADVOCACY;REIMB. OF DIRECT MAIL CAGING

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 : 24689452**  
Amount of Each Disbursement this Period  
 1805.23  
 Memo Item NO EXPRESS ADVOCACY;REIMB. OF DIRECT MAIL CAGING

**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  
NO EXPRESS ADVOCACY;REIMB. OF PAC SALARY & BENEFITS EXPENSES

001  
Category/Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2018

FEC Identification Number

C [ ]

Transaction ID : 24689453

Amount of Each Disbursement this Period

[ ] 3100.18

Memo Item NO EXPRESS ADVOCACY;REIMB. OF PAC SALARY & 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 POSTAGE EXPENSES

001  
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2018

FEC Identification Number

C [ ]

Transaction ID : 24689454

Amount of Each Disbursement this Period

[ ] 26978.25

Memo Item NO EXPRESS ADVOCACY;REIMB. OF POSTAGE 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 FPR IN-KIND CONTRIBUTION

011  
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2018

FEC Identification Number

C [ ]

Transaction ID : 24689673

Amount of Each Disbursement this Period

[ ] - 1990.20

Memo Item ADVANCE FPR IN-KIND CONTRIBUTION

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

[ ] 28088.23

**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. SABA**

Mailing Address 7311 GROVE ROAD, UNIT G

City  
FREDERICK

State  
MD

Zip Code  
21704

Purpose of Disbursement  
NO EXPRESS ADVOCACY;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
0	9		2	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : 24696345

Amount of Each Disbursement this Period

[REDACTED] 5405.80

Memo Item NO EXPRESS  
ADVOCACY;POSTAGE  
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  
ADVANCE FOR FUTURE 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
0	9		2	0		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : 24697815

Amount of Each Disbursement this Period

[REDACTED] - 1443.78

Memo Item ADVANCE FOR FUTURE IN-KIND  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. 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
0	9		2	8		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : 24732368

Amount of Each Disbursement this Period

[REDACTED] 192.73

Memo Item BANK FEES

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

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

[REDACTED] 4154.75

[REDACTED] 33014.89

**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. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2018

Mailing Address 430 SOUTH CAPITOL STREET, SE

FEC Identification Number

C	
---	--

**Transaction ID : 24636890**

Amount of Each Disbursement this Period

	500.00
--	--------

2018 Calendar Year

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
2018 Calendar Year

011
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Manchin For West Virginia**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2018

Mailing Address PO Box 5202

FEC Identification Number

C	C00486563
---	-----------

**Transaction ID : 24653113**

Amount of Each Disbursement this Period

	1000.00
--	---------

Contribution

Memo Item

City Charleston State WV Zip Code 25361

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

**Manchin, Joe, , Sen., III**

Office Sought:  House  Senate  President  
State: WV District:

Disbursement For: 2018  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Cartwright For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2018

Mailing Address PO Box 414

FEC Identification Number

C	C00509968
---	-----------

**Transaction ID : 24653114**

Amount of Each Disbursement this Period

	1000.00
--	---------

Contribution

Memo Item

City Scranton State PA Zip Code 18501

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

**Cartwright, Matt, A., Rep.,**

Office Sought:  House  Senate  President  
State: PA District: 17

Disbursement For: 2018  Primary  General  Other (specify) ▼

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

2500.00
---------

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

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**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. Nevadans for Steven Horsford**

Mailing Address P.O. Box 336664

City Las Vegas State NV Zip Code 89033

Purpose of Disbursement Contribution

011

Candidate Name

**Horsford, Steven, A., Rep.,**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NV District: 04

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C C00504613

**Transaction ID : 24653144**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tina Smith For Minnesota**

Mailing Address PO Box 14362

City Saint Paul State MN Zip Code 55114

Purpose of Disbursement Contribution

011

Candidate Name

**Smith, Tina, , Sen.,**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MN District:

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C C00663781

**Transaction ID : 24653145**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL ESPY FOR CONGRESS**

Mailing Address P.O. BOX 1005

City YAZOO CITY State MS Zip Code 39194

Purpose of Disbursement Contribution

011

Candidate Name

**ESPY, MIKE, , ,**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MS District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C

**Transaction ID : 24653147**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

3000.00

**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 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. Katie Hill For Congress**

Mailing Address 6681 Sweetclover Lane

City Carlsbad State CA Zip Code 92011

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name Hill, Katherine, , ,

Office Sought:  House  Senate  President  
State: CA District: 25

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2018

FEC Identification Number

C C00634212

Transaction ID : 24681393

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Brendan Kelly For Southern Illinois**

Mailing Address PO Box 736

City Belleville State IL Zip Code 62222

Purpose of Disbursement IN-KIND CONTRIBUTION

011  
Category/Type

Candidate Name Kelly, Brendan, , ,

Office Sought:  House  Senate  President  
State: IL District: 12

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C C00649558

Transaction ID : 24686092

Amount of Each Disbursement this Period

1089.45

IN-KIND CONTRIBUTION

Memo Item

Full Name (Last, First, Middle Initial)

**C. Klobuchar For Minnesota**

Mailing Address PO Box 4146

City St Paul State MN Zip Code 55104

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name Klobuchar, Amy, , ,

Office Sought:  House  Senate  President  
State: MN District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number

C C00410191

Transaction ID : 24686401

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

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

3089.45

**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. Angie Craig For Congress**

Mailing Address PO Box 22116

City  
Eagan

State  
MN

Zip Code  
55122

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Craig, Angela, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number

C C00575209

**Transaction ID : 24686796**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Deb Haaland For Congress**

Mailing Address P.O. Box 25443

City  
Albuquerque

State  
NM

Zip Code  
87125

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Haaland, Debra, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: NM District: 01

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number

C C00639054

**Transaction ID : 24686797**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. Debbie For Congress**

Mailing Address PO Box 566442

City  
Miami

State  
FL

Zip Code  
33256

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Mucarsel-Powell, Debbie, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number

C C00652065

**Transaction ID : 24686799**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

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

3000.00

**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. Gina Ortiz Jones For Congress**

Mailing Address PO Box 769186

City San Antonio State TX Zip Code 78245

Purpose of Disbursement Contribution

Candidate Name Jones, Gina, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: TX District: 23

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number

C C00652297

Transaction ID : 24686800

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Katie Porter For Congress**

Mailing Address 777 S Figueroa St Ste 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement Contribution

Candidate Name Porter, Katherine, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: CA District: 45

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2018

FEC Identification Number

C C00636571

Transaction ID : 24686801

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. Williams For Montana**

Mailing Address PO Box 548

City Bozeman State MT Zip Code 59771

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name Williams, Kathleen, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: MT District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2018

FEC Identification Number

C C00659177

Transaction ID : 24689678

Amount of Each Disbursement this Period

1990.20

IN-KIND CONTRIBUTION

Memo Item

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

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

3990.20

**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. Donna Shalala For Congress**

Mailing Address PO Box 330602

City  
Miami

State  
FL

Zip Code  
33233

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Shalala, Donna, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: FL District: 27

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C C00672311

**Transaction ID : 24691956**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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  
Contribution

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

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C C00652628

**Transaction ID : 24691961**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. Veronica Escobar For Congress**

Mailing Address PO Box 3961

City  
El Paso

State  
TX

Zip Code  
79923

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Escobar, Veronica, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: TX District: 16

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C C00653923

**Transaction ID : 24691962**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

3000.00

**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 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. Sinema For Arizona**

Mailing Address PO Box 7586

City Phoenix State AZ Zip Code 85011

Purpose of Disbursement  
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  
09 / 20 / 2018

FEC Identification Number

**C** C00508804

Transaction ID : **24691964**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tina Smith For Minnesota**

Mailing Address PO Box 14362

City Saint Paul State MN Zip Code 55114

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**Smith, Tina, , Sen.,**

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

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

**C** C00663781

Transaction ID : **24691965**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. Richard E. Neal for Congress**

Mailing Address 410 First Street, SE  
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

**011**  
Category/  
Type

Candidate Name  
**Neal, Richard E., , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: MA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

**C**

Transaction ID : **24691966**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

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

3000.00



**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. Williams For Montana**

Mailing Address PO Box 548

City Bozeman State MT Zip Code 59771

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name Williams, Kathleen, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: MT District: 00

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C C00659177

Transaction ID : 24691967

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sinema For Arizona**

Mailing Address PO Box 7586

City Phoenix State AZ Zip Code 85011

Purpose of Disbursement 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  
09 / 26 / 2018

FEC Identification Number

C C00508804

Transaction ID : 24695212

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BOBBY SCOTT FOR CONGRESS**

Mailing Address 38 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name SCOTT, ROBERT, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: VA District: 03

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C

Transaction ID : 24695213

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 Contribution

Candidate Name Cockburn, Leslie, , ,

Office Sought:  House  Senate  President  
State: VA District: 05

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

011  
Category/Type

Date of Disbursement  
MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C00650366

Transaction ID : 24695319

Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Brindisi For Congress**

Mailing Address PO Box 165

City Utica State NY Zip Code 13503

Purpose of Disbursement Contribution

Candidate Name Brindisi, Anthony, , ,

Office Sought:  House  Senate  President  
State: NY District: 22

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

011  
Category/Type

Date of Disbursement  
MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C00648725

Transaction ID : 24695494

Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gretchen Driskell For Congress**

Mailing Address PO Box 464

City Saline State MI Zip Code 48176

Purpose of Disbursement Contribution

Candidate Name Driskell, Gretchen, , ,

Office Sought:  House  Senate  President  
State: MI District: 07

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

011  
Category/Type

Date of Disbursement  
MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C00572859

Transaction ID : 24695495

Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

3000.00

**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. Susan Wild For Congress**

Mailing Address 1636 N Cedar Crest Blvd  
#183

City Allentown State PA Zip Code 18104

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
**Wild, Susan, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: PA District: 15

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C C00658567

**Transaction ID : 24695496**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stabenow For Us Senate**

Mailing Address P.O. Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
**Stabenow, Debbie, , Sen.,**

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

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C C00344473

**Transaction ID : 24695497**

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**C. McCaskill For Missouri**

Mailing Address 660 Pennsylvania Avenue, SE  
Suite 201

City Washington State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND CONTRIBUTION

011  
Category/  
Type

Candidate Name  
**McCaskill, Claire, , ,**

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

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C C00414961

**Transaction ID : 24697816**

Amount of Each Disbursement this Period

1443.78

IN-KIND CONTRIBUTION

Memo Item

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

3443.78

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

31023.43