



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="144692.84"/>	<input type="text" value="144692.84"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="310493.16"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="189564.98"/>	<input type="text" value="890381.52"/>
(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="500058.14"/>	<input type="text" value="1035074.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="131005.96"/>	<input type="text" value="666022.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="369052.18"/>	<input type="text" value="369052.18"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9653.00	33762.00
(ii) Unitemized .....	179909.23	856609.38
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	189562.23	890371.38
(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) .....	189562.23	890371.38
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.).....	2.75	10.14
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))..... ▶	189564.98	890381.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	189564.98	890381.52

**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 .....	101648.16	528584.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	101648.16	528584.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29357.80	134146.19
24. Independent Expenditures (use Schedule E) .....	0.00	691.63
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	2600.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	131005.96	666022.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131005.96	666022.18

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	189562.23	890371.38
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	189562.23	890371.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	101648.16	528584.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	101648.16	528584.36

**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 33
	<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. Charles Alexy**  
Full Name (Last, First, Middle Initial)

Mailing Address  
211 Stanford Rd  
City State Zip Code  
Fairless Hills PA 19030-3201

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

Name of Employer Occupation  
RETIRE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014  
**Transaction ID : 22051661**

Amount of Each Receipt this Period  
175.00

**B. Mr Edward N Castle**  
Full Name (Last, First, Middle Initial)

Mailing Address  
310 N Folger St  
City State Zip Code  
Carrollton MO 64633-1735

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

Name of Employer Occupation  
RETIRE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
262.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014  
**Transaction ID : 22052047**

Amount of Each Receipt this Period  
162.00

**C. Mrs Jeanne K Gerson**  
Full Name (Last, First, Middle Initial)

Mailing Address  
333 N Palm Dr Apt 105  
City State Zip Code  
Beverly Hills CA 90210-5912

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

Name of Employer Occupation  
RETIRE

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 / 05 / 2014  
**Transaction ID : 22052187**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	587.00
<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 33
	<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. Mr Ignacio Gutierrez**  
Full Name (Last, First, Middle Initial)

Mailing Address  
1831 10th Ave

City State Zip Code  
Monrovia CA 91016-5326

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
09 / 04 / 2014  
Transaction ID : 22052204

Amount of Each Receipt this Period  
150.00

**B. Mrs Anne O'Brien**  
Full Name (Last, First, Middle Initial)

Mailing Address  
1618 Church Ave

City State Zip Code  
San Mateo CA 94401-3612

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
09 / 02 / 2014  
Transaction ID : 22052270

Amount of Each Receipt this Period  
125.00

**C. Mr Robert I Long**  
Full Name (Last, First, Middle Initial)

Mailing Address  
2000 Atrium Pkwy Apt 1145

City State Zip Code  
Napa CA 94559-4841

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2450.00

Date of Receipt  
09 / 02 / 2014  
Transaction ID : 22052278

Amount of Each Receipt this Period  
900.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1175.00
<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: PAGE 8 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Patsy Ruth Peden**

Mailing Address  
 PO Box 546

City State Zip Code  
 Cave Junction OR 97523-0546

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

Name of Employer Occupation  
 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 / 02 / 2014

**Transaction ID : 22052308**

Amount of Each Receipt this Period  
 200.00

Full Name (Last, First, Middle Initial)  
**B. Mr George E Shaughnessy**

Mailing Address  
 11655 SE May Creek Park Dr

City State Zip Code  
 Renton WA 98056-2675

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : 22052360**

Amount of Each Receipt this Period  
 75.00

Full Name (Last, First, Middle Initial)  
**C. Mr Franklin Natividad**

Mailing Address  
 2815 Cascade Trl

City State Zip Code  
 Bremerton WA 98310-5086

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : 22052370**

Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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: PAGE 9 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Mr Henry F Hanson**

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 Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 09 / 04 / 2014  
**Transaction ID : 22052466**

Amount of Each Receipt this Period  
 175.00

Full Name (Last, First, Middle Initial)  
**B. Mr Dale V Fortik**

Mailing Address  
 3009 Ray Ave

City Caldwell State ID Zip Code 83605-7103

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 09 / 02 / 2014  
**Transaction ID : 22052938**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Mr & Mrs John Weitzel**

Mailing Address  
 20209 Fairweather St

City Canyon Country State CA Zip Code 91351-1050

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 09 / 05 / 2014  
**Transaction ID : 22053403**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Mr Nathan Willis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 27020 Gunckel Blvd  
 City: Toledo State: OH Zip Code: 43606  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 09 / 02 / 2014  
**Transaction ID : 22053903**  
 Amount of Each Receipt this Period: 50.00  
 Aggregate Year-to-Date: 232.00

**B. Mr William E Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1125 Young St Apt 505  
 City: Honolulu State: HI Zip Code: 96814-1931  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 09 / 05 / 2014  
**Transaction ID : 22054243**  
 Amount of Each Receipt this Period: 250.00  
 Aggregate Year-to-Date: 250.00

**C. Mr Elbert Delana**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 18032 Fairmount Rd  
 City: Tonganoxie State: KS Zip Code: 66086-4237  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 09 / 04 / 2014  
**Transaction ID : 22054254**  
 Amount of Each Receipt this Period: 100.00  
 Aggregate Year-to-Date: 225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
	<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. Mr Harold B Gigstad**  
Full Name (Last, First, Middle Initial)

Mailing Address  
4626 Nandale Dr NE

City Salem State OR Zip Code 97305-1647

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
09 / 12 / 2014  
Transaction ID : **22054686**

Amount of Each Receipt this Period  
300.00

**B. Ms Alice F Dana**  
Full Name (Last, First, Middle Initial)

Mailing Address  
85 Mann Hill Rd

City Scituate State MA Zip Code 02066-2116

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
09 / 05 / 2014  
Transaction ID : **22055016**

Amount of Each Receipt this Period  
200.00

**C. Mr Harold Fuller**  
Full Name (Last, First, Middle Initial)

Mailing Address  
8340 Neck Rd

City Williamsport State MD Zip Code 21795-2128

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
09 / 04 / 2014  
Transaction ID : **22055038**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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 12 OF 33
	<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**

Full Name (Last, First, Middle Initial) <b>A. Ms Anna L Basarich</b>		Date of Receipt MM / DD / YYYY 09 / 03 / 2014
Mailing Address 405 Hillcrest Ave		Transaction ID : <b>22055259</b>
City Grosse Pointe Farms	State MI	
Zip Code 48236-2919	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00
Name of Employer	Occupation RETIRED	Aggregate Year-to-Date ▼ 592.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms Pearl S Walker</b>		Date of Receipt MM / DD / YYYY 09 / 05 / 2014
Mailing Address 941 S Fremont Ave		Transaction ID : <b>22055365</b>
City Springfield	State MO	
Zip Code 65804-0169	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation RETIRED	Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr Ronald L Mowinckel</b>		Date of Receipt MM / DD / YYYY 09 / 03 / 2014
Mailing Address 572 Lucia Ave		Transaction ID : <b>22055562</b>
City Baltimore	State MD	
Zip Code 21229-4514	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation RETIRED	Aggregate Year-to-Date ▼ 214.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<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 33
	<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. Mrs Elise G White**  
Full Name (Last, First, Middle Initial)

Mailing Address  
2600 Woolsey St

City Berkeley State CA Zip Code 94705-2524

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

Name of Employer Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
09 / 02 / 2014  
**Transaction ID : 22055792**

Amount of Each Receipt this Period  
100.00

**B. Mr William Adams**  
Full Name (Last, First, Middle Initial)

Mailing Address  
2113 N Meade Ave

City Chicago State IL Zip Code 60639-2724

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

Name of Employer Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
09 / 02 / 2014  
**Transaction ID : 22055856**

Amount of Each Receipt this Period  
125.00

**C. Mr Joseph Schiavi**  
Full Name (Last, First, Middle Initial)

Mailing Address  
24 Bedford Ave

City Lackawanna State NY Zip Code 14218-2903

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

Name of Employer Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
09 / 02 / 2014  
**Transaction ID : 22056211**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

**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 14 OF 33
<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**

Full Name (Last, First, Middle Initial) <b>A. Ms Pauline M Daloe</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 <b>Transaction ID : 22056282</b>
Mailing Address 18 Spruce St City Newington State CT Zip Code 06111-2734		Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C	Name of Employer Occupation RETIRED	Aggregate Year-to-Date 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr Lynn Schermerhorn</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 02 / 2014 <b>Transaction ID : 22056334</b>
Mailing Address PO Box 923 City Topock State AZ Zip Code 86436-0923		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C	Name of Employer Occupation RETIRED	Aggregate Year-to-Date 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms Clarissa Chandler</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2014 <b>Transaction ID : 22056409</b>
Mailing Address 890 N Green Bay Rd City Lake Forest State IL Zip Code 60045-1707		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Name of Employer Occupation RETIRED	Aggregate Year-to-Date 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<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 33
<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. Mr Robert H Gardner**  
Full Name (Last, First, Middle Initial)

Mailing Address  
124 County Road 32A

City Norwich State NY Zip Code 13815-3501

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
09 / 02 / 2014  
Transaction ID : 22056434

Amount of Each Receipt this Period  
750.00

**B. Ms Barrie Ryan**  
Full Name (Last, First, Middle Initial)

Mailing Address Apt 118  
2500 N Rosemont Blvd

City Tucson State AZ Zip Code 85712-2176

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
09 / 02 / 2014  
Transaction ID : 22056503

Amount of Each Receipt this Period  
100.00

**c. Mr Eugene C Cade**  
Full Name (Last, First, Middle Initial)

Mailing Address  
PO Box 7881

City Olympia State WA Zip Code 98507-7881

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
09 / 08 / 2014  
Transaction ID : 22056760

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

**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 33
<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**

Full Name (Last, First, Middle Initial) <b>A. Ms Dolores Eddy</b>		Date of Receipt MM / DD / YYYY 09 / 05 / 2014 <b>Transaction ID : 22056887</b>
Mailing Address 614 S Angola Rd		Amount of Each Receipt this Period 100.00
City Coldwater	State MI	
Zip Code 49036-9511		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms Elizabeth C Bugg</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2014 <b>Transaction ID : 22056913</b>
Mailing Address 35 Thomas Speakman Drive		Amount of Each Receipt this Period 100.00
City Glen Mills	State PA	
Zip Code 19342-1368		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Mrs Lydia L Jimenez</b>		Date of Receipt MM / DD / YYYY 09 / 05 / 2014 <b>Transaction ID : 22056950</b>
Mailing Address 962 J Street		Amount of Each Receipt this Period 75.00
City Brawley	State CA	
Zip Code 92227-2622		Aggregate Year-to-Date ▼ 225.00
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<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 33
<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. Mrs Doris B Schlehofer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 19A Center Pike Rd  
 City: Eastford State: CT Zip Code: 06242-9703  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 09 / 02 / 2014  
**Transaction ID : 22057202**  
 Amount of Each Receipt this Period: 175.00  
 Aggregate Year-to-Date: 300.00

**B. Ms Connie Sadler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 3450 Irving Ln  
 City: Amarillo State: TX Zip Code: 79121-1509  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 09 / 02 / 2014  
**Transaction ID : 22057361**  
 Amount of Each Receipt this Period: 100.00  
 Aggregate Year-to-Date: 250.00

**C. Mr Elmer Cwach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 1725 Beverly Blvd  
 City: Gering State: NE Zip Code: 69341-1900  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 09 / 02 / 2014  
**Transaction ID : 22057489**  
 Amount of Each Receipt this Period: 125.00  
 Aggregate Year-to-Date: 305.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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: PAGE 18 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Mr Jack T Burns**

Mailing Address  
 2155 Tide Cir

City State Zip Code  
 Memphis TN 38134-5971

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1250.00

Date of Receipt  
 09 / 04 / 2014  
**Transaction ID : 22058035**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. Mr Otto Hertl**

Mailing Address  
 530 Barker Pass Rd

City State Zip Code  
 Santa Barbara CA 93108-1725

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 09 / 02 / 2014  
**Transaction ID : 22058163**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address  
 2262 Boone Trl

City State Zip Code  
 Modale IA 51556-4032

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

Name of Employer Occupation  
 RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 09 / 02 / 2014  
**Transaction ID : 22058276**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 19 OF 33
	<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. Ms Nancy Ahmed**  
Full Name (Last, First, Middle Initial)

Mailing Address  
1615 Timberline Rd

City State Zip Code  
Silver Spring MD 20904-1476

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2014

**Transaction ID : 22058605**

Amount of Each Receipt this Period  
100.00

**B. Mr Robert Hallsted**  
Full Name (Last, First, Middle Initial)

Mailing Address  
2723 Shipley Rd Apt 207

City State Zip Code  
Wilmington DE 19810-3200

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

**Transaction ID : 22058611**

Amount of Each Receipt this Period  
200.00

**c. Mr F Stuart Chapin Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address  
464 SW Eyrie Rd

City State Zip Code  
White Salmon WA 98672-8617

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
414.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2014

**Transaction ID : 22059010**

Amount of Each Receipt this Period  
189.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	489.00
<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 33
	<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. Mr Robert Tull**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 8401 Grayledge Dr  
 City: Austin State: TX Zip Code: 78753-5709  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 275.00

Date of Receipt: 09 / 05 / 2014  
**Transaction ID : 22059127**  
 Amount of Each Receipt this Period: 150.00

**B. Ms Barb N Saxton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 200 N Detroit Ave  
 City: Sioux Falls State: SD Zip Code: 57110-1244  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 02 / 2014  
**Transaction ID : 22059307**  
 Amount of Each Receipt this Period: 300.00

**C. Mr Hunter A Stiles**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: 7621 Tremayne PI Apt 110  
 City: Mc Lean State: VA Zip Code: 22102-7609  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 350.00

Date of Receipt: 09 / 02 / 2014  
**Transaction ID : 22059412**  
 Amount of Each Receipt this Period: 175.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<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 33
	<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. Ms Katie Banbury**  
Full Name (Last, First, Middle Initial)

Mailing Address  
21215 Dumetz Rd

City Woodland Hls State CA Zip Code 91364-4408

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
09 / 02 / 2014  
Transaction ID : 22059745

Amount of Each Receipt this Period  
100.00

**B. Mrs Viranes Harding**  
Full Name (Last, First, Middle Initial)

Mailing Address  
370 McKenzie Grace Ln

City Grayson State GA Zip Code 30017-7825

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
09 / 02 / 2014  
Transaction ID : 22059852

Amount of Each Receipt this Period  
125.00

**C. Mrs Bennie Tipton**  
Full Name (Last, First, Middle Initial)

Mailing Address  
212 Underwood Rd

City New Market State TN Zip Code 37820-5033

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
09 / 05 / 2014  
Transaction ID : 22059964

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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 33
	<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. Mr Paul S S Wise**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Apt 820  
 7501 East Thompson Peak Pkwy  
 City Scottsdale State AZ Zip Code 85255-4529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : 22060335**  
 Amount of Each Receipt this Period  
 125.00

**B. Ms Colleen Carlson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 601 24th Ave SW Apt 224  
 City Minot State ND Zip Code 58701-1503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2014  
**Transaction ID : 22060386**  
 Amount of Each Receipt this Period  
 250.00

**C. Mr Daniel Krych**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 852 Orizaba Ave Apt 16  
 City Long Beach State CA Zip Code 90804-4899  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2014  
**Transaction ID : 22060398**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	475.00
<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: PAGE 23 OF 33  
(check only one)

<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.** Full Name (Last, First, Middle Initial)  
**Mr Thomas C Horne**

Mailing Address  
5700 Via Real Unit 13

City State Zip Code  
Carpinteria CA 93013-2613

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 17 / 2014

**Transaction ID : 22061031**

Amount of Each Receipt this Period  
202.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	202.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9653.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. RR Donnelley Receivables Inc**

Mailing Address PO Box 7810

City Chicago State IL Zip Code 60677-7008

Purpose of Disbursement  
NO EXPRESS ADVOCACY, PRINTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**006**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 21997551**

Amount of Each Disbursement this Period

NO EXPRESS ADVOCACY, PRINTING

Full Name (Last, First, Middle Initial)

**B. NCPSSM**

Mailing Address 10 G Street, NE Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement  
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 22015143**

Amount of Each Disbursement this Period

ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. NCPSSM**

Mailing Address 10 G Street, NE Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement  
ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 22045213**

Amount of Each Disbursement this Period

ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. 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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 22061064**

Amount of Each Disbursement this Period

BANK FEES

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Mike Honda For Congress**

Mailing Address C/O Contribution Solutions, Llc  
123 E. San Carlos St., #531

City San Jose State CA Zip Code 95112

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Mike M. Honda**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 21986070**

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

**B. Ron Barber For Congress**

Mailing Address PO Box 57715

City Tucson State AZ Zip Code 85732

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Ron Barber**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 21986071**

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Jeanne Shaheen**

Mailing Address 1010 Vermont Avenue, NW  
Suite 814

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**Jeanne Shaheen**

Office Sought:  House  
 Senate  
 President  
State: NH District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 21986072**

Amount of Each Disbursement this Period

Contribution

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Alaskans For Begich 2014**

Mailing Address 303 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Mark Begich**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2014

**Transaction ID : 21986073**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Nancy Pelosi for Congress**

Mailing Address 430 South Capitol Street, SE  
Second Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Nancy Pelosi**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 08

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000878**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Ted Deutch for Congress**

Mailing Address 236 Massachusetts Avenue, NE  
Suite 602

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ted Deutch**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: FL District: 19

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000879**

Amount of Each Disbursement this Period

1000.00

Contribution

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Becerra for Congress**

Mailing Address 625 Third Street, NE  
Suite 2

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name

**Xavier Becerra**

Office Sought:  House  
 Senate  
 President  
State: CA District: 31

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000880**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Gallego For Arizona**

Mailing Address PO Box 1710

City Phoenix State AZ Zip Code 85001

Purpose of Disbursement  
Contribution

Candidate Name

**Ruben Gallego**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000881**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Steny Hoyer for Congress**

Mailing Address 4201 Northview Drive  
Suite 307

City Bowie State MD Zip Code 20716

Purpose of Disbursement  
Contribution

Candidate Name

**Steny Hoyer**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000882**

Amount of Each Disbursement this Period

1000.00

Contribution

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Friends Of Dan Maffei**

Mailing Address PO Box 230

City Syracuse State NY Zip Code 13201

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Daniel B. Maffei**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000883**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Aimee Belgard For Congress**

Mailing Address PO Box 35

City Willingboro State NJ Zip Code 08046

Purpose of Disbursement  
Contribution

011

Candidate Name

**Aimee Belgard**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000884**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Mary Landrieu**

Mailing Address 10 G Street, NE  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mary Landrieu**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: LA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : 22000885**

Amount of Each Disbursement this Period

2500.00

Contribution

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

4500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Nancy Pelosi for Congress**

Mailing Address 430 South Capitol Street, SE  
Second Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Void - Nancy Pelosi for Congress

Candidate Name

**Nancy Pelosi**

Office Sought:  House  
 Senate  
 President  
State: CA District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : 22000944**

Amount of Each Disbursement this Period

-1000.00

Void - Nancy Pelosi for Congress

Full Name (Last, First, Middle Initial)

**B. Nancy Pelosi for Congress**

Mailing Address 430 South Capitol Street, SE  
Second Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

Candidate Name

**Nancy Pelosi**

Office Sought:  House  
 Senate  
 President  
State: CA District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2014

**Transaction ID : 22007176**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address 430 SOUTH CAPITOL STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
2014 CALENDAR YEAR

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 18 / 2014

**Transaction ID : 22007636**

Amount of Each Disbursement this Period

5000.00

2014 CALENDAR YEAR

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

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

5000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Mark Pryor For Us Senate**

Mailing Address PO Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. Mark L. Pryor**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AR District:

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2014

**Transaction ID : 22013737**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. People for Rick Weiland**

Mailing Address PO Box 456

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rick Weiland**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SD District: 30

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : 22014145**

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Jeanne Shaheen**

Mailing Address 1010 Vermont Avenue, NW  
Suite 814

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jeanne Shaheen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District:

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : 22014147**

Amount of Each Disbursement this Period

2000.00

Contribution

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

5000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Hagan Senate Committee Inc**

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kay Hagan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : 22014148**

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Richard E. Neal for Congress**

Mailing Address 410 First Street, SE  
Suite 310

City Washington State MD Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Richard E. Neal**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

**Transaction ID : 22015105**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Cain For Congress**

Mailing Address P.O. Box 1523

City Bangor State ME Zip Code 04402

Purpose of Disbursement  
IN-KIND CONTRIBUTION

011

Candidate Name

**Emily Cain**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2014

**Transaction ID : 22015150**

Amount of Each Disbursement this Period

758.91

IN-KIND CONTRIBUTION

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

3758.91

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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**

Full Name (Last, First, Middle Initial)

**A. Erin Bilbray For Congress**

Mailing Address 7161 S. Eastern Avenue, Suite A

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement  
Contribution

011

Candidate Name

**Erin Bilbray-Kohn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

**Transaction ID : 22016645**

Amount of Each Disbursement this Period

1000.00
---------

Contribution

Full Name (Last, First, Middle Initial)

**B. James Lee Witt For Congress**

Mailing Address PO Box 36

City Dardanelle State AR Zip Code 72834

Purpose of Disbursement  
IN-KIND CONTRIBUTION

011

Candidate Name

**James Witt**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2014

**Transaction ID : 22045214**

Amount of Each Disbursement this Period

1098.89
---------

IN-KIND CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

2098.89
---------

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

29357.80
----------