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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NATIONAL ORGANIZATION OF SOCIAL SECURITY CLAIMANTS' REPRESENTATIVES PAC (NOSSCR PAC)

A. Full Name (Last, First, Middle Initial): MIKE THOMPSON FOR CONGRESS
Mailing Address: 5429 MADISON AVENUE
City: SACRAMENTO State: CA Zip Code: 95841
Purpose of Disbursement: Contribution check dated 6/18/15 voided
Category/Type: 011
Candidate Name: MIKE MR. THOMPSON
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 30 / 2016
Transaction ID : SB23.5914
Amount of Each Disbursement this Period: -1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): ORRINPAC
Mailing Address: PO BOX 3986
City: WASHINGTON State: DC Zip Code: 20027
Purpose of Disbursement: Contribution check dated 6/20/15 voided
Category/Type: 011
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 06 / 30 / 2016
Transaction ID : SB23.5913
Amount of Each Disbursement this Period: -1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): SECURE OUR SENATE 2016
Mailing Address: 918 PENNSYLVANIA AVE SE
City: WASHINGTON State: DC Zip Code: 20003
Purpose of Disbursement: Contribution
Category/Type: 011
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify)
Date of Disbursement: 06 / 10 / 2016
Transaction ID : SB23.5877
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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