

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) 10 G St. NE Suite 600 Washington DC 20002-4215 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00172296 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] 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) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY 10/20/2016 through MM/DD/YYYY 11/28/2016

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

Signature of Treasurer Kim, Christine, Ms., [Electronically Filed] Date MM/DD/YYYY 12/06/2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="107346.84"/>	<input type="text" value="107346.84"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="160242.83"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="83742.01"/>	<input type="text" value="786840.68"/>
(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="243984.84"/>	<input type="text" value="894187.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="39117.65"/>	<input type="text" value="689320.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="204867.19"/>	<input type="text" value="204867.19"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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. 05/2016)

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 20 / 2016 To: M M / D D / Y Y Y Y 11 / 28 / 2016

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).....	14708.00	46535.00
(ii) Unitemized	69016.83	739297.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	83724.83	785832.35
(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)	83724.83	785832.35
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	934.90
17. Other Federal Receipts (Dividends, Interest, etc.).....	17.18	73.43
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)).....▶	83742.01	786840.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	83742.01	786840.68

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	35943.03	585442.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	35943.03	585442.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3174.62	102277.77
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	1600.00
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)) ..	39117.65	689320.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39117.65	689320.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	83724.83	785832.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	83724.83	785832.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	35943.03	585442.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35943.03	585442.56

**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 42
<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. Carver, Michael, T, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
913 N Main Ave

City: Ridgefield State: WA Zip Code: 98642-9344

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 ▼: 201.00

Date of Receipt: 10 / 24 / 2016
Transaction ID : 23615175

Amount of Each Receipt this Period: 63.00

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 ▼: 227.00

Date of Receipt: 10 / 24 / 2016
Transaction ID : 23615176

Amount of Each Receipt this Period: 63.00

Memo Item

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

Mailing Address Apt 205
1030 Diane St

City: Chilton State: WI Zip Code: 53014-1657

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: 10 / 24 / 2016
Transaction ID : 23615188

Amount of Each Receipt this Period: 90.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.00
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 7 OF 42
	<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. Davenport, John, G, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
2035 Bruce Ave

City: Louisville State: KY Zip Code: 40218-3403

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615214

Amount of Each Receipt this Period
75.00

Memo Item

B. Davis, Bernice, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
4746 S 167th St

City: Omaha State: NE Zip Code: 68135-1334

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 ▼
307.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615219

Amount of Each Receipt this Period
80.00

Memo Item

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

Mailing Address
1381 Asbury Rd

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
248.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615236

Amount of Each Receipt this Period
66.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	221.00
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 8 OF 42
<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 ▼
300.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615262

Amount of Each Receipt this Period
75.00

Memo Item

B. Lambert, Anita, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
52 Wyndemere Lane

City Windsor State CT Zip Code 06095-1178

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615269

Amount of Each Receipt this Period
100.00

Memo Item

C. Richardson, Ronald, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
2961 Mount Diablo St

City Concord State CA Zip Code 94518-1000

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
10 / 24 / 2016
Transaction ID : 23615281

Amount of Each Receipt this Period
225.00

Memo Item

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 9 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Lewis, Gary, M, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 2262 Boone Trl
 City Modale State IA Zip Code 51556-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : 23615283
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Peavy, Ruth, M, Ms,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 PO Box 1903
 City Gig Harbor State WA Zip Code 98335-3903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : 23615284
 Amount of Each Receipt this Period
 120.00
 Memo Item

C. 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : 23615285
 Amount of Each Receipt this Period
 172.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 392.00
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 42
<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. Millage, Richard, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 152

City Philip State SD Zip Code 57567-0152

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 ▼
636.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615286

Amount of Each Receipt this Period
162.00

Memo Item

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

Mailing Address
38 Willow Way

City Washington State IA Zip Code 52353-1839

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 ▼
301.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615289

Amount of Each Receipt this Period
129.00

Memo Item

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

Mailing Address
2782 McNally Ave

City Altadena State CA Zip Code 91001-5100

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615296

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	491.00
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 42
<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. Cordiner, George, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
122 Two Rod Rd

City Scarborough State ME Zip Code 04074-9119

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615297

Amount of Each Receipt this Period
70.00

Memo Item

B. Kenline, Nettie, G, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
34 Henry St

City North Vernon State IN Zip Code 47265-1048

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
10 / 24 / 2016
Transaction ID : 23615303

Amount of Each Receipt this Period
100.00

Memo Item

C. Wingard, Julia, A, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
5200 N Ocean Blvd Apt 514

City Lauderdale By The Sea State FL Zip Code 33308-3022

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 ▼
539.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615306

Amount of Each Receipt this Period
157.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 327.00

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 42
	<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. Walton, Artis, J, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1830 8th St S Apt 2

City Brookings	State SD	Zip Code 57006-3553
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
412.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : 23615307

Amount of Each Receipt this Period
156.00

Memo Item

B. Bauer, Kenneth, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
N3821 350th St

City Menomonie	State WI	Zip Code 54751-5346
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : 23615308

Amount of Each Receipt this Period
151.00

Memo Item

C. Parkander, Dorothy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
3909 8th Ave

City Rock Island	State IL	Zip Code 61201-2205
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : 23615309

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	407.00
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 13 OF 42
	<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. Wallace, James, H, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
787 Bent Hickory Rd

City Charleston State SC Zip Code 29414-9079

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615311

Amount of Each Receipt this Period
225.00

Memo Item

B. 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 ▼
325.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615312

Amount of Each Receipt this Period
100.00

Memo Item

C. Boggs, Clayton, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
2314 Etzler Rd

City Troutville State VA Zip Code 24175-6219

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 ▼
421.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615315

Amount of Each Receipt this Period
50.00

Memo Item

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 14 OF 42
	<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. Schiavi, Joseph, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) Occupation (for Individual) Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1170.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615320

Amount of Each Receipt this Period
300.00

Memo Item

B. Dillon, David, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
60 Pleasant St Apt 302

City Arlington State MA Zip Code 02476-6519

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 ▼
1878.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615321

Amount of Each Receipt this Period
564.00

Memo Item

C. Harding, Viranes, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) Occupation (for Individual) Retired

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
343.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615322

Amount of Each Receipt this Period
343.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1207.00
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 15 OF 42
<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. Morris, Robert, P, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
5848 217th St

City Bayside Hills State NY Zip Code 11364-1912

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 ▼
538.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615323

Amount of Each Receipt this Period
269.00

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 ▼
800.00

Date of Receipt
10 / 24 / 2016
Transaction ID : 23615324

Amount of Each Receipt this Period
200.00

Memo Item

C. Moyer, Larry, E, Mr & Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
79 Rosewood Drive

City Middleburg State PA Zip Code 17842-8887

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
10 / 25 / 2016
Transaction ID : 23616549

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	544.00
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 16 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. 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 ▼ 226.00

Date of Receipt 10 / 25 / 2016
Transaction ID : 23616575
 Amount of Each Receipt this Period 63.00
 Memo Item

B. Sette, Richard, , Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 949 W Lindbergh Ave
 City Coolidge State AZ Zip Code 85128-3934
 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 10 / 25 / 2016
Transaction ID : 23616595
 Amount of Each Receipt this Period 55.00
 Memo Item

C. Steffes, Clarence, , Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 204
 City Ivanhoe State MN Zip Code 56142-0204
 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 ▼ 240.00

Date of Receipt 10 / 25 / 2016
Transaction ID : 23616636
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 178.00
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 17 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address
101 W Windsor Rd

City Urbana State IL Zip Code 61802-6663

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616667

Amount of Each Receipt this Period
50.00

Memo Item

B. Souza, Ilse, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
85-525 Momona Pl

City Waianae State HI Zip Code 96792-2624

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
10 / 25 / 2016
Transaction ID : 23616687

Amount of Each Receipt this Period
65.00

Memo Item

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

Mailing Address
693 Park Pl

City Brooklyn State NY Zip Code 11216-3805

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
10 / 25 / 2016
Transaction ID : 23616714

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00

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 18 OF 42
<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. Ryan, Paula, S, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
774 W Calle De Emilia

City Green Valley State AZ Zip Code 85614-4705

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616715

Amount of Each Receipt this Period
100.00

Memo Item

B. Saul, Joseph, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
11504 Manorstone Ln

City Columbia State MD Zip Code 21044-5413

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
10 / 25 / 2016
Transaction ID : 23616717

Amount of Each Receipt this Period
50.00

Memo Item

C. Tucciarone, Louise, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
9332 Wards Rd

City Rustburg State VA Zip Code 24588-2568

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 ▼
788.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616719

Amount of Each Receipt this Period
200.00

Memo Item

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 19 OF 42
<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. Like, Donna, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
9830 Murray Dr

City La Mesa State CA Zip Code 91942-4124

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616720

Amount of Each Receipt this Period
165.00

Memo Item

B. Zimmerman, Allan, A, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
71 Main Street

City Hickory State PA Zip Code 15340-1118

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616724

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address
3306 W La Rua St

City Pensacola State FL Zip Code 32505-7628

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
10 / 25 / 2016
Transaction ID : 23616727

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	365.00
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 20 OF 42
	<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. Baumgartner, Joseph, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
35 Florence Dr

City
Syosset

State
NY

Zip Code
11791-4818

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 ▼
438.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : 23616729

Amount of Each Receipt this Period
100.00

Memo Item

B. 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 ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : 23616732

Amount of Each Receipt this Period
30.00

Memo Item

C. Lamm, Marie, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 186

City
Philip

State
SD

Zip Code
57567-0186

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 ▼
720.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : 23616733

Amount of Each Receipt this Period
180.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 42
	<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. Woods, Charles, D, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1752 New Columbia Hwy

City Lewisburg State TN Zip Code 37091-6943

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 ▼
221.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616741

Amount of Each Receipt this Period
79.00

Memo Item

B. Farmer, Billie, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
611 Osprey Lakes Circle

City Chuluota State FL Zip Code 32766-6661

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 ▼
525.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616743

Amount of Each Receipt this Period
125.00

Memo Item

C. Smith, Floyd, E, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1030 Pine St

City Coronado State CA Zip Code 92118-2419

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616744

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	254.00
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 42
<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. Entenmann, Florence, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
289 Belmont Rd

City: Gettysburg PA State: PA Zip Code: 17325-8443

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: 10 / 25 / 2016
Transaction ID : 23616746

Amount of Each Receipt this Period: 150.00

Memo Item

B. Berglund, Irene, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
9675 Laughlin Way

City: Redwood Valley CA State: CA Zip Code: 95470-9771

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 10 / 25 / 2016
Transaction ID : 23616747

Amount of Each Receipt this Period: 125.00

Memo Item

C. Holder, Cuthbert, L, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
5146 Renaissance Ln

City: Tobyhanna PA State: PA Zip Code: 18466-8329

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 ▼: 636.00

Date of Receipt: 10 / 25 / 2016
Transaction ID : 23616748

Amount of Each Receipt this Period: 213.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	488.00
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 23 OF 42
	<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. 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
10 / 25 / 2016
Transaction ID : 23616749

Amount of Each Receipt this Period
45.00

Memo Item

B. Hester, Mary, N, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
424 Lee Rd 181

City Opelika State AL Zip Code 36804-1525

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 ▼
455.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616750

Amount of Each Receipt this Period
90.00

Memo Item

C. Hess, Anne, G, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1382 Monaco Ct

City Virginia Beach State VA Zip Code 23454-7301

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 ▼
304.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616756

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00

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 24 OF 42
	<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. Bican, Jerry, E, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
4178 Ivywood Dr

City: Brooklyn State: OH Zip Code: 44144-1223

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 ▼
600.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616759

Amount of Each Receipt this Period
200.00

Memo Item

B. Leland, Gerald, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
6356 Sierra Elena Rd

City: Irvine State: CA Zip Code: 92603-3927

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 ▼
558.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616761

Amount of Each Receipt this Period
204.00

Memo Item

C. 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 ▼
375.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616762

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	479.00
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 25 OF 42
<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. 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 ▼ 397.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616771

Amount of Each Receipt this Period
114.00

Memo Item

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

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 (for Individual) Occupation (for Individual) Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616777

Amount of Each Receipt this Period
250.00

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
10 / 25 / 2016
Transaction ID : 23616778

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	464.00
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 26 OF 42
	<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. Keker, Joan, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Apt 307
 42000 7 Mile Rd
 City Northville State MI Zip Code 48167-2478
 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 ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : 23616780
 Amount of Each Receipt this Period
 330.00
 Memo Item

B. Hanson, Henry, F, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1585 Perch Way
 City Willits State CA Zip Code 95490-8458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : 23616781
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Newbauer, John, A, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 185 West Court St Apt 4
 City Doylestown State PA Zip Code 18901-4143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2016
Transaction ID : 23616782
 Amount of Each Receipt this Period
 110.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	690.00
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 42
<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. Fortik, Dale, V, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) Occupation (for Individual) Retired

Receipt For:
 Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616783

Amount of Each Receipt this Period
200.00

Memo Item

B. Emch, Frederick, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
407 State St

City Wadsworth State OH Zip Code 44281-1036

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 ▼ 1002.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616784

Amount of Each Receipt this Period
282.00

Memo Item

C. Hallsted, Robert, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
2723 Shipley Rd

City Wilmington State DE Zip Code 19810-3251

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 ▼ 3150.00

Date of Receipt
10 / 25 / 2016
Transaction ID : 23616785

Amount of Each Receipt this Period
600.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1082.00
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 28 OF 42
	<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. Adams, Eileen, , Ms,

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

Mailing Address
963 Edgewater Ave

City
Saint Paul

State
MN

Zip Code
55126-3807

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 ▼
1282.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : 23616786

Amount of Each Receipt this Period
782.00

Memo Item

B. Sage, Joan, , Ms,

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

Mailing Address
914 Kimball St

City
Philadelphia

State
PA

Zip Code
19147-3819

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 ▼
535.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : 23616787

Amount of Each Receipt this Period
35.00

Memo Item

C. Rannigan, Gordon, L, Mr,

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

Mailing Address
619 Kenosha Ave

City
Norfolk

State
VA

Zip Code
23509-1503

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 ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2016

Transaction ID : 23616788

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1017.00
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 29 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address
39 Brooks Ln

City Crossville State TN Zip Code 38558-2817

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617262

Amount of Each Receipt this Period
50.00

Memo Item

B. Leiby, David, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
2717 N Hartman St

City Orange State CA Zip Code 92865-2344

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 ▼
201.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617266

Amount of Each Receipt this Period
50.00

Memo Item

C. Welch, Shirley, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 606

City Princeton State IN Zip Code 47670-0606

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
10 / 26 / 2016
Transaction ID : 23617293

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
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 30 OF 42
<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. Thompson, Donald, E, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1655 W Ajo Way Unit 321

City Tucson State AZ Zip Code 85713-6629

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 ▼
234.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617294

Amount of Each Receipt this Period
78.00

Memo Item

B. Truckenmiller, Kathyjean, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
625 11th Ave

City Sibley State IA Zip Code 51249-1444

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
10 / 26 / 2016
Transaction ID : 23617298

Amount of Each Receipt this Period
60.00

Memo Item

C. Gipson, Freddie, W, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
5600 Maurie Dr

City Haltom City State TX Zip Code 76148-3801

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617319

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	238.00
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 31 OF 42
	<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. Graystone, Anthony, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
6932 Briarlake Cir

City West Palm Beach State FL Zip Code 33418-6943

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 ▼
475.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617322

Amount of Each Receipt this Period
125.00

Memo Item

B. Kita, Ernest, Y, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
2432 10th Ave

City Honolulu State HI Zip Code 96816-6192

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 ▼
441.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617324

Amount of Each Receipt this Period
147.00

Memo Item

C. Awai, Janet, L, Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 336

City Mountain View State HI Zip Code 96771-0336

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 ▼
216.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617326

Amount of Each Receipt this Period
108.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 380.00

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 32 OF 42
<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. Jimenez, Lydia, L, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
962 J Street

City Brawley State CA Zip Code 92227-2622

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 ▼
525.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617332

Amount of Each Receipt this Period
100.00

Memo Item

B. Wallace, Scott, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
16137 SE 33rd Ln

City Bellevue State WA Zip Code 98008-5703

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 ▼
513.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617334

Amount of Each Receipt this Period
150.00

Memo Item

C. Binger, Susan, S, Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1510 Lexington Ave Apt 15C

City New York State NY Zip Code 10029-7168

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 ▼
410.00

Date of Receipt
10 / 26 / 2016
Transaction ID : 23617336

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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 33 OF 42
<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. Hess, Lana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Spc 108
 20 Rollingwood Dr
 City Jackson State CA Zip Code 95642-9453
 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 ▼ 319.00

Date of Receipt 10 / 26 / 2016
Transaction ID : 23617337
 Amount of Each Receipt this Period 157.00
 Memo Item

B. Goodman, Michael, L, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4760 Winged Foot Way
 City Columbus State GA Zip Code 31909-8009
 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 ▼ 900.00

Date of Receipt 10 / 26 / 2016
Transaction ID : 23617340
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Gardner, Robert, H, Mr,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : 23617346
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1457.00
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 34 OF 42
<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. Strayhorn, Myrtle, , Mrs,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 11035

City Durham	State NC	Zip Code 27703-0035
----------------	-------------	------------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2016

Transaction ID : 23617430

Amount of Each Receipt this Period
125.00

Memo Item

B. Young, Patrick, J, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
PO Box 879

City Harrison	State NY	Zip Code 10528-0879
------------------	-------------	------------------------

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 ▼
251.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : 23617713

Amount of Each Receipt this Period
66.00

Memo Item

C. Moore, Ken, G, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
148 9th St

City Idaho Falls	State ID	Zip Code 83404-4860
---------------------	-------------	------------------------

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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2016

Transaction ID : 23617727

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.00
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 35 OF 42
<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. Barker, C, M, Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
6934 Pipers Gap Rd

City Galax State VA Zip Code 24333-5705

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 ▼
240.00

Date of Receipt
11 / 01 / 2016
Transaction ID : 23617731

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address
8634 Grassy Isle Trl

City Lake Worth State FL Zip Code 33467-1734

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 01 / 2016
Transaction ID : 23617732

Amount of Each Receipt this Period
250.00

Memo Item

C. Conn, Shirley, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
4636 Cedar Lake Rd S Apt 3

City Minneapolis State MN Zip Code 55416-3770

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 17 / 2016
Transaction ID : 23617974

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 36 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

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

Mailing Address
100 Berry Patch Ln

City Chapel Hill State NC Zip Code 27514-1807

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 ▼
388.00

Date of Receipt
11 / 17 / 2016
Transaction ID : 23617979

Amount of Each Receipt this Period
75.00

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
11 / 17 / 2016
Transaction ID : 23617980

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 ▼
400.00

Date of Receipt
11 / 17 / 2016
Transaction ID : 23617981

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	575.00
TOTAL This Period (last page this line number only).....	14708.00

**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 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement REIMB. OF POSTAGE AND SHIPPING EXPENSES

Candidate Name

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

001
Category/
Type

Date of Disbursement
M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

FEC Identification Number

C
Transaction ID : 23498527
Amount of Each Disbursement this Period
30.18

Memo Item REIMB. OF POSTAGE AND SHIPPING EXPENSES

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 REIMB. OF TRAVEL EXPENSES

Candidate Name

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

002
Category/
Type

Date of Disbursement
M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

FEC Identification Number

C
Transaction ID : 23498528
Amount of Each Disbursement this Period
143.12
REIMB. OF TRAVEL EXPENSES

Memo Item

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 REIMB. OF TAX FILING FEES

Candidate Name

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

001
Category/
Type

Date of Disbursement
M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

FEC Identification Number

C
Transaction ID : 23498529
Amount of Each Disbursement this Period
750.00
REIMB. OF TAX FILING FEES

Memo Item

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

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

923.30

**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 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement REIMB. OF PAC SALARY & BENEFITS EXPENSES

001
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2016

FEC Identification Number

C []

Transaction ID : 23498565

Amount of Each Disbursement this Period

[] 11482.88

Memo Item REIMB. OF PAC SALARY & BENEFITS EXPENSES

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 REIMB. OF CAGING EXPENSES

006
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2016

FEC Identification Number

C []

Transaction ID : 23498566

Amount of Each Disbursement this Period

[] 1306.14

Memo Item REIMB. OF CAGING EXPENSES

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

011
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C []

Transaction ID : 23499204

Amount of Each Disbursement this Period

[] -174.62

Memo Item ADVANCE FOR FUTURE IN-KIND CONTRIBUTION

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

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

[] 12614.40

[]

**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. COMMUNICATIONS CORPORATION OF AMERICA

Mailing Address 13195 FREEDOM WAY
ATTN: ANN HUDSON

City BOSTON State VA Zip Code 22713

Purpose of Disbursement
NO EXPRESS ADVOCACY, PRINTING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 25 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : 23499848

Amount of Each Disbursement this Period

[REDACTED] 7999.64

Memo Item 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
REIMB. OF POSTAGE AND SHIPPING EXPENSES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : 23579096

Amount of Each Disbursement this Period

[REDACTED] 9.59

Memo Item REIMB. OF POSTAGE AND SHIPPING EXPENSES

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
REIMB. OF TRAVEL EXPENSES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : 23579097

Amount of Each Disbursement this Period

[REDACTED] 28.76

Memo Item REIMB. OF TRAVEL EXPENSES

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

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

[REDACTED] 8037.99

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

Full Name (Last, First, Middle Initial)

A. NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement REIMB. OF CAGING EXPENSES

006
Category/
Type

Candidate Name

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

Date of Disbursement
M M / D D / Y Y Y Y Y Y
11 / 15 / 2016

FEC Identification Number

C
Transaction ID : 23579098
Amount of Each Disbursement this Period
2273.64
REIMB. OF CAGING EXPENSES
 Memo Item

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 REIMB. OF PAC SALARY AND BENEFITS 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 Y Y
11 / 15 / 2016

FEC Identification Number

C
Transaction ID : 23579130
Amount of Each Disbursement this Period
11482.88
REIMB. OF PAC SALARY AND BENEFITS EXPENSES
 Memo Item

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 Y Y
10 / 31 / 2016

FEC Identification Number

C
Transaction ID : 23618035
Amount of Each Disbursement this Period
555.82
BANK FEES
 Memo Item

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

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

14312.34
35888.03

**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 Mcginty For Senate

Mailing Address PO Box 22447

City Philadelphia

State PA

Zip Code 19110

Purpose of Disbursement
IN-KIND CONTRIBUTION

011

Category/
Type

Candidate Name

McGinty, Kathleen, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: PA

District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C00582809

Transaction ID : 23499205

Amount of Each Disbursement this Period

174.62

IN-KIND CONTRIBUTION

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Cheri Bustos

Mailing Address 1050 17th St Nw Ste 590

City Washington

State DC

Zip Code 20036

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Bustos, Cheri, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify)

State: IL

District: 17

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C00498568

Transaction ID : 23499261

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

Full Name (Last, First, Middle Initial)

C. Maggie For Nh

Mailing Address PO Box 298

City Concord

State NH

Zip Code 03302

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Hassan, Margaret, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: NH

District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2016

FEC Identification Number

C00588772

Transaction ID : 23499268

Amount of Each Disbursement this Period

1000.00

Contribution

Memo Item

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

2174.62

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

A. Becerra for Congress

Full Name (Last, First, Middle Initial)
Date of Disbursement: 10 / 28 / 2016

Mailing Address: 625 Third Street, NE Suite 2
City: Washington State: DC Zip Code: 20002

Purpose of Disbursement: Contribution
Candidate Name: Becerra, Xavier, , ,
Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: CA District: 31

FEC Identification Number: C
Transaction ID: 23558313
Amount of Each Disbursement this Period: 1000.00
Contribution
 Memo Item

B.

Full Name (Last, First, Middle Initial)
Date of Disbursement: / /

Mailing Address
City: State: Zip Code:

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

FEC Identification Number: C
Amount of Each Disbursement this Period
 Memo Item

C.

Full Name (Last, First, Middle Initial)
Date of Disbursement: / /

Mailing Address
City: State: Zip Code:

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

FEC Identification Number: C
Amount of Each Disbursement this Period
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	3174.62