

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

| | | |
|--|--------------|--|
| Full Name (Last, First, Middle Initial) A. Michaud For Congress | | Transaction ID: 12219575 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 |
| Mailing Address 213 Lisbon Street | | Amount of Each Disbursement this Period 1000.00 |
| City Lewiston State ME Zip Code 04240 | Contribution | |
| Purpose of Disbursement Contribution Candidate Name Rep. Michael H. Michaud Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 2 | | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Category/Type 011 | | |

| | | |
|--|--------------|--|
| Full Name (Last, First, Middle Initial) B. Lois Murphy For Congress | | Transaction ID: 12219560 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 |
| Mailing Address P.O. Box 312 | | Amount of Each Disbursement this Period 2000.00 |
| City Narberth State PA Zip Code 19072 | Contribution | |
| Purpose of Disbursement Contribution Candidate Name Lois Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 6 | | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Category/Type 011 | | |

| | | |
|---|--------------|--|
| Full Name (Last, First, Middle Initial) C. Friends Of John Barrow | | Transaction ID: 12219523 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 |
| Mailing Address PO Box 8166 | | Amount of Each Disbursement this Period 2000.00 |
| City Savannah State GA Zip Code 31412 | Contribution | |
| Purpose of Disbursement Contribution Candidate Name Mr. John Barrow Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12 | | Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Category/Type 011 | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5000.00 |
| TOTAL This Period (last page this line number only) ▶ | |