

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Association of Chain Drug Stores Political Action Committee

ADDRESS (number and street) 413 N. Lee Street
 Check if different than previously reported. (ACC)
Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00022368
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 25 2008 through 12 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer R. James Huber

Signature of Treasurer Electronically Filed by R. James Huber Date 01 09 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
National Association of Chain Drug Stores Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		101533.73
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	47591.94									
(c) Total Receipts (from Line 19)	2580.60	145806.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50172.54	247340.34								
7. Total Disbursements (from Line 31)	52.00	197219.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50120.54	50120.54								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
National Association of Chain Drug Stores Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	2429.01	108044.36
(i) Itemized (use Schedule A)	121.71	9837.15
(ii) Unitemized	2550.72	117881.51
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	25500.00
(c) Other Political Committees (such as PACs)	2550.72	143381.51
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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	1500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	29.88	925.10
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 Transfer (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))	2580.60	145806.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2580.60	145806.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	192250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	52.00	4969.80
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	52.00	197219.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52.00	197219.80

DETAILED SUMMARY PAGE
of Disbursements

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	2550.72	143381.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2550.72	143381.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Full Name (Last, First, Middle Initial)
SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 424.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 28978356

Amount of Each Receipt this Period
0.89

B. Full Name (Last, First, Middle Initial)
SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.48

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 28985890

Amount of Each Receipt this Period
16.23

C. Full Name (Last, First, Middle Initial)
SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 441.99

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 29148417

Amount of Each Receipt this Period
1.51

SUBTOTAL of Receipts This Page (optional) ► **18.63**

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 7 / 15	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A.

Full Name (Last, First, Middle Initial) SunTrust Bank		Date of Receipt
Mailing Address 1445 New York Ave, NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 3 1 / 2 0 0 8
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. C		Transaction ID: 29151329
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text"/> 11.25
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 453.24	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 11.25
TOTAL This Period (last page this line number only)	<input type="text"/> 29.88

**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 / 15
	<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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Don Bell	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 5800 Magnolia Lane	Transaction ID: PR1054895618513
	City State Zip Code Falls Church VA 22041-1661	Amount of Each Receipt this Period 130.44
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$43.48 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Legal Affairs & Genera	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1043.52	

B.	Full Name (Last, First, Middle Initial) Mr. David Fitzsimmons	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 8315 Fitt Court	Transaction ID: PR1054896218513
	City State Zip Code Lorton VA 22079-1316	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation VP, Finance & Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

C.	Full Name (Last, First, Middle Initial) Ms. Sandra K Guckian	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 8307 Lilac Lane	Transaction ID: PR1054896918513
	City State Zip Code Alexandria VA 22308-1923	Amount of Each Receipt this Period 132.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$44.00 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation VP, Public Policy & Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1012.00	

SUBTOTAL of Receipts This Page (optional)	412.44
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 / 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms. Rhoda Kelly

Mailing Address 2720 S. Arlington Mill Dr. Unite 8

City State Zip Code
Arlington VA 22204-1872

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Membership Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1043.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1054897018513

Amount of Each Receipt this Period
130.44

P/R Deduction (\$43.48 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Ms. Nancy Riegler

Mailing Address 235 Talahi Road

City State Zip Code
Vienna VA 22180-5867

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

Name of Employer National Association of Chain Drug Sto
Occupation VP, HR & Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2081.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1054897518513

Amount of Each Receipt this Period
261.00

P/R Deduction (\$87.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mr. James Whitman

Mailing Address 7982 Foxmoor Drive

City State Zip Code
Dunn Loring VA 22027-1146

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

Name of Employer National Association of Chain Drug Sto
Occupation SVP, Member Programs & Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2001.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1054897918513

Amount of Each Receipt this Period
261.00

P/R Deduction (\$87.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **652.44**

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 10 / 15
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Terrence Arth

Mailing Address 21141 Stonecrop Place

City State Zip Code
Ashburn VA 20147-5460

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Meetings & Internation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1055162918513

Amount of Each Receipt this Period 33.00

P/R Deduction (\$11.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mr. Phillip Schneider

Mailing Address 18 S. Manchester Street

City State Zip Code
Arlington VA 22204-1075

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

Name of Employer National Association of Chain Drug Sto
Occupation VP, External Relations/President Found

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1143.57

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1055163618513

Amount of Each Receipt this Period 143.49

P/R Deduction (\$47.83 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mr. Paul T Kelly

Mailing Address 2049 Greenwich Street

City State Zip Code
Falls Church VA 22043-1612

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

Name of Employer National Association of Chain Drug Sto
Occupation VP, Federal Legislative Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1199.91

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1055164118513

Amount of Each Receipt this Period 156.51

P/R Deduction (\$52.17 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **333.00**

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 11 / 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ms. Diane Darvey

Mailing Address 515 Princess Street

City State Zip Code
Alexandria VA 22314-2332

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

Name of Employer National Association of Chain Drug Sto
Occupation Director, Legislative & Regulatory Aff

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 828.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1055165018513

Amount of Each Receipt this Period

105.00

P/R Deduction (\$35.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mr. Larry Lotridge

Mailing Address 13962 Antonio Ford Ct.

City State Zip Code
Centreville VA 20121-3568

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Conference Services

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 521.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1055173618513

Amount of Each Receipt this Period

65.22

P/R Deduction (\$21.74 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mr. Kevin Nicholson

Mailing Address 3703 3rd Street S.

City State Zip Code
Arlington VA 22204-1638

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Pharmacy Regulatory

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1043.52

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR1055174718513

Amount of Each Receipt this Period

130.44

P/R Deduction (\$43.48 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶

300.66

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 / 15
	<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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Dale Masten	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 10234 Kenwood Road	Transaction ID: PR1055176318513
	City State Zip Code Cincinnati OH 45242-4702	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
	Name of Employer National Association of Chain Drug Sto	
Occupation Director, State Govt Affairs Aggregate Year-to-Date 600.00		

B.	Full Name (Last, First, Middle Initial) Ms. Julie Khani	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 5619 Herberts Crossing	Transaction ID: PR1055177418513
	City State Zip Code Burke VA 22015-2120	Amount of Each Receipt this Period 132.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$44.00 Bi-Weekly)
	Name of Employer National Association of Chain Drug Sto	
Occupation VP, Federal Health Care Programs Aggregate Year-to-Date 1046.00		

C.	Full Name (Last, First, Middle Initial) Mr. Daniel Faoro	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 4228 35th Street South	Transaction ID: PR1597972118513
	City State Zip Code Arlington VA 22206-1802	Amount of Each Receipt this Period 32.61
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.87 Bi-Weekly)
	Name of Employer National Association of Chain Drug Sto	
Occupation Vice President, Comm. Prod. & Strategi Aggregate Year-to-Date 260.88		

SUBTOTAL of Receipts This Page (optional)	239.61
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 13 / 15
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mr. Will P. Murchison

Mailing Address 3705 8th Street, South

City Arlington State VA Zip Code 22204-1527

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

Name of Employer National Association of Chain Drug Sto
Occupation Director, Media Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 528.10

Date of Receipt 12 / 31 / 2008
Transaction ID: PR1900997618513

Amount of Each Receipt this Period 72.30

P/R Deduction (\$24.10 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Ms. Laura Miller

Mailing Address 4700 Marble Wood Lane

City Chantilly State VA Zip Code 20151-2484

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

Name of Employer National Association of Chain Drug Sto
Occupation Senior Economist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.92

Date of Receipt 12 / 31 / 2008
Transaction ID: PR2183668818513

Amount of Each Receipt this Period 34.08

P/R Deduction (\$11.36 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mr. Christopher Krese

Mailing Address 2412 Cameron Mills Road

City Alexandria State VA Zip Code 22302-3301

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President Marketing, Communicatio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.02

Date of Receipt 12 / 31 / 2008
Transaction ID: PR2231851418513

Amount of Each Receipt this Period 214.29

P/R Deduction (\$71.43 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **320.67**

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 14 / 15
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Christine Kopple

Mailing Address 3714 Holmes Lane

City State Zip Code
Alexandria VA 22302-2012

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

Name of Employer
National Association of Chain Drug Sto

Occupation
Vice President, Media Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.79

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: PR2257462218513

Amount of Each Receipt this Period
65.19

P/R Deduction (\$21.73 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Nora A Reich

Mailing Address 3150-M Covewood Court

City State Zip Code
Falls Church VA 22042-7566

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

Name of Employer
National Association of Chain Drug Sto

Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: PR2257462518513

Amount of Each Receipt this Period
30.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Gary J Wirth

Mailing Address 10233 Glastonbury Road

City State Zip Code
Ellicott City MD 21042-5839

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

Name of Employer
National Association of Chain Drug Sto

Occupation
Vice President, State Government Affa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: PR2257462618513

Amount of Each Receipt this Period
75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	170.19
TOTAL This Period (last page this line number only)	2429.01

**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)

PAGE 15 / 15

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

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Full Name (Last, First, Middle Initial) SunTrust Bank <hr/> Mailing Address 1445 New York Ave, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 28978437 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 26.00
B. Full Name (Last, First, Middle Initial) SunTrust Bank <hr/> Mailing Address 1445 New York Ave, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 29148419 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 26.00

SUBTOTAL of Disbursements This Page (optional) ►

52.00

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

52.00