

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 07 01 2007 through 12 31 2007

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 24 2008

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							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		92896.62
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	127704.14									
(c) Total Receipts (from Line 19)	27892.34	137281.96								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	155596.48	230178.58								
7. Total Disbursements (from Line 31)	54062.75	128644.85								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	101533.73	101533.73								
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
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	19723.05	105017.63
(i) Itemized (use Schedule A)	1251.21	7425.48
(ii) Unitemized	20974.26	112443.11
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5000.00	21500.00
(c) Other Political Committees (such as PACs)	25974.26	133943.11
(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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1918.08	3338.85
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))	27892.34	137281.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	27892.34	137281.96

DETAILED SUMMARY PAGE

of Disbursements

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.....	51532.75	124832.75
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.....	2530.00	3812.10
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))..	54062.75	128644.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54062.75	128644.85

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	25974.26	133943.11
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25974.26	133943.11
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 / 37
(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)
Debra B Garza

Mailing Address 326 Helmuth Lane

City State Zip Code
Alexandria VA 22304-8667

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

Name of Employer Occupation
Walgreen Co. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
07 / 12 / 2007

Transaction ID: 26380862

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark Griffin

Mailing Address 2701 S. Minnesota Avenue
Suite 1

City State Zip Code
Sioux Falls SD 57105

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

Name of Employer Occupation
Lewis Drugs, Inc. President and CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
08 / 30 / 2007

Transaction ID: 26488177

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
Anthony Sartoris

Mailing Address 455 E. Reeds St.

City State Zip Code
Braidwood IL 60408-2090

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

Name of Employer Occupation
Doc's Drugs LTD. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2007

Transaction ID: 26788951

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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 / 37
	<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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mr. Charles Butt	Date of Receipt MM / DD / YYYY 11 / 09 / 2007
	Mailing Address 335 King William	Transaction ID: 26799205
	City State Zip Code San Antonio TX 78204-1317	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: H-E-B Foods/Drugs Inc. Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Robert D. Loeffler	Date of Receipt MM / DD / YYYY 11 / 09 / 2007
	Mailing Address 50 Arnold Palmer Drive	Transaction ID: 26799208
	City State Zip Code San Antonio TX 78257-1723	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: H-E-B Foods/Drugs Inc. Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Ms. Deborah Faucette	Date of Receipt MM / DD / YYYY 11 / 30 / 2007
	Mailing Address 2001Hawaii Ave. NE	Transaction ID: 26930859
	City State Zip Code Saint Petersburg FL 33703	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: LearnSomething, Inc. Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	6000.00
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 8 / 37
(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. Don Bell

Mailing Address 5800 Magnolia Lane

City Falls Church State VA Zip Code 22041

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Legal Affairs & Genera

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 956.56

Date of Receipt
M M / D D / Y Y Y Y Y
Transaction ID: PR1054895617362

Amount of Each Receipt this Period
565.24

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

B.

Full Name (Last, First, Middle Initial)
Mr. David Fitzsimmons

Mailing Address 8315 Fitt Court

City Lorton State VA Zip Code 22079

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

Name of Employer National Association of Chain Drug Sto
Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
Transaction ID: PR1054896217362

Amount of Each Receipt this Period
650.00

P/R Deduction (\$50.00 Bi-Weekly)

C.

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

Mailing Address 7817 Meadowgate Drive

City Manassas State VA Zip Code 20112

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 ▼ 956.56

Date of Receipt
M M / D D / Y Y Y Y Y
Transaction ID: PR1054897017362

Amount of Each Receipt this Period
565.24

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

SUBTOTAL of Receipts This Page (optional) ► **1780.48**

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 9 / 37		
	<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

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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. Steve Perlowski	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2689 Hillsman Street	Transaction ID: PR1054897317362
	City Falls Church State VA Zip Code 22043	Amount of Each Receipt this Period 169.52
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$13.04 Bi-Weekly)
	Name of Employer National Association of Chain Drug Sto Occupation Vice President, Industry Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.88	

B.	Full Name (Last, First, Middle Initial) Ms. Nancy Riegler	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1808 Fallbrook Lane	Transaction ID: PR1054897517362
	City Vienna State VA Zip Code 22182	Amount of Each Receipt this Period 1040.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$80.00 Bi-Weekly)
	Name of Employer National Association of Chain Drug Sto Occupation VP, HR & Administration Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1760.00	

C.	Full Name (Last, First, Middle Initial) Ms. Mary Ann Wagner	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1605 B Hunting Creek Drive	Transaction ID: PR1054897817362
	City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 1413.10
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$108.70 Bi-Weekly)
	Name of Employer National Association of Chain Drug Sto Occupation SVP, Policy Pharmacy Regulatory Affar Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2391.40	

SUBTOTAL of Receipts This Page (optional)	2622.62
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 / 37
(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

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 ▼ 242.00

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

Transaction ID: PR1055162917362

Amount of Each Receipt this Period 143.00

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

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 ▼ 956.56

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

Transaction ID: PR1055163617362

Amount of Each Receipt this Period 565.24

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

C.

Full Name (Last, First, Middle Initial)
Mr. John Covert

Mailing Address 7631 Holmes Run Drive

City State Zip Code
Falls Church VA 22042

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

Name of Employer National Association of Chain Drug Sto
Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.36

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

Transaction ID: PR1055163817362

Amount of Each Receipt this Period 191.23

P/R Deduction (\$14.71 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **899.47**

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 / 37
(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)
Ms. Diane Darvey

Mailing Address 801 15th Street S, #202

City Arlington State VA Zip Code 22202

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

Name of Employer National Association of Chain Drug Sto
Occupation Director, Pharmacy Regulatory Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 483.00

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

Transaction ID: PR1055165017362

Amount of Each Receipt this Period 299.00

P/R Deduction (\$23.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Ms. Nicole Valentine

Mailing Address 413 N. Lee Street

City Alexandria State VA Zip Code 22314

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

Name of Employer National Association of Chain Drug Sto
Occupation Director, State Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

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

Transaction ID: PR1055172617362

Amount of Each Receipt this Period 143.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. Stuart Gordon

Mailing Address 1339 Blackwalnut Court

City Annapolis State MD Zip Code 21403

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

Name of Employer National Association of Chain Drug Sto
Occupation Director, Policy & Programs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: PR1055173517362

Amount of Each Receipt this Period 195.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **637.00**

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 12 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 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. Larry Lotridge

Mailing Address 413 N. Lee Street

City State Zip Code
Alexandria VA 22314

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 ▼ 456.54

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1055173617362

Amount of Each Receipt this Period: 282.62

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

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

Mailing Address 413 N. Lee Street

City State Zip Code
Alexandria VA 22314

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 ▼ 956.56

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1055174717362

Amount of Each Receipt this Period: 565.24

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

C. Full Name (Last, First, Middle Initial)
Mr. Dale Masten

Mailing Address 413 N Lee Street

City State Zip Code
Alexandria VA 22313

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Director, State Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1055176317362

Amount of Each Receipt this Period: 325.00

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

SUBTOTAL of Receipts This Page (optional) ► 1172.86

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 / 37
(check only one)
 11a 11b 11c 12
 13 14 15 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)
Ms. Julie Khani

Mailing Address 413 N. Lee Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer: National Association of Chain Drug Sto
Occupation: VP, Federal Health Care Programs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 748.00

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1055177417362

Amount of Each Receipt this Period: 442.00

P/R Deduction (\$34.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. John Coster

Mailing Address 413 N. Lee Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1159939417362

Amount of Each Receipt this Period: 100.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. Daniel Faoro

Mailing Address 4228 35th Street South

City State Zip Code
Arlington VA 22206

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Vice President, Comm. Prod. & Strategi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.40

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1597972117362

Amount of Each Receipt this Period: 141.31

P/R Deduction (\$10.87 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **683.31**

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 / 37
(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)
Mr. Will P. Murchison

Mailing Address 3705 8th Street, South

City State Zip Code
Arlington VA 22204

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Director, CCPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.00

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1900997617362

Amount of Each Receipt this Period: 286.00

P/R Deduction (\$22.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Ms. Jennifer Sargeant

Mailing Address 3304 Wyndham Circle

City State Zip Code
Alexandria VA 22302

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Manager, Education & Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.14

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1900997817362

Amount of Each Receipt this Period: 141.31

P/R Deduction (\$10.87 Bi-Weekly)

C.

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

Mailing Address 2412 Cameron Mills Road

City State Zip Code
Alexandria VA 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 ▼ 1000.00

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR2231851417362

Amount of Each Receipt this Period: 1000.00

P/R Deduction (\$200.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 1427.31

TOTAL This Period (last page this line number only) ► 19723.05

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 37
(check only one)

11a 11b 11c 12
 13 14 15 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)
NACDS PAC - Dreyfus Gov't Cash Mgmt.
Mailing Address 413 N. Lee St.

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1585.62

Date of Receipt
MM / DD / YYYY
07 / 31 / 2007

Transaction ID: 26443497

Amount of Each Receipt this Period
266.94

B. Full Name (Last, First, Middle Initial)
NACDS PAC - Dreyfus Gov't Cash Mgmt.
Mailing Address 413 N. Lee St.

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1939.03

Date of Receipt
MM / DD / YYYY
08 / 31 / 2007

Transaction ID: 26554658

Amount of Each Receipt this Period
353.41

C. Full Name (Last, First, Middle Initial)
NACDS PAC - Dreyfus Gov't Cash Mgmt.
Mailing Address 413 N. Lee St.

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2272.37

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: 26700828

Amount of Each Receipt this Period
333.34

SUBTOTAL of Receipts This Page (optional) ► **953.69**

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 / 37
(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"/> 14	<input type="checkbox"/> 15	<input checked="" 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)
NACDS PAC - Dreyfus Gov't Cash Mgmt.
Mailing Address 413 N. Lee St.

City: Alexandria State: VA Zip Code: 22314

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

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.76

Date of Receipt: 10 / 31 / 2007
Transaction ID: 26799834
Amount of Each Receipt this Period: 328.39

B. Full Name (Last, First, Middle Initial)
NACDS PAC - Dreyfus Gov't Cash Mgmt.
Mailing Address 413 N. Lee St.

City: Alexandria State: VA Zip Code: 22314

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

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2901.24

Date of Receipt: 11 / 30 / 2007
Transaction ID: 26946552
Amount of Each Receipt this Period: 300.48

C. Full Name (Last, First, Middle Initial)
NACDS PAC - Dreyfus Gov't Cash Mgmt.
Mailing Address 413 N. Lee St.

City: Alexandria State: VA Zip Code: 22314

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

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3197.50

Date of Receipt: 12 / 31 / 2007
Transaction ID: 27124677
Amount of Each Receipt this Period: 296.26

SUBTOTAL of Receipts This Page (optional)	925.13
TOTAL This Period (last page this line number only)	1878.82

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 37
(check only one)

11a 11b 11c 12
 13 14 15 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)
Rite Aid Corp. PAC

Mailing Address P.O. Box 3165

City State Zip Code
Harrisburg PA 17105

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 7

Transaction ID: 26799169

Amount of Each Receipt this Period
5000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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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) Friends Of Max Baucus <hr/> Mailing Address PO Box 586 <hr/> City Helena State MT Zip Code 59624 <hr/> Purpose of Disbursement 011 Candidate Name Sen. Max Baucus Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 01	Transaction ID: 26224759 Date of Disbursement 07 / 16 / 2007 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>
B.	Full Name (Last, First, Middle Initial) Lot Of People For Dave Obey <hr/> Mailing Address 525 Washington St PO Box 1322 <hr/> City Wausau State WI Zip Code 54402 <hr/> Purpose of Disbursement 011 Candidate Name Rep. David R. Obey Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 07	Transaction ID: 26224762 Date of Disbursement 07 / 16 / 2007 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>
C.	Full Name (Last, First, Middle Initial) Pat Roberts For Senate <hr/> Mailing Address PO Box 433 <hr/> City Great Bend State KS Zip Code 67530 <hr/> Purpose of Disbursement 011 Candidate Name Sen. Pat Roberts Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 02	Transaction ID: 26224766 Date of Disbursement 07 / 16 / 2007 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">4500.00</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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 19 / 37

<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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee	Transaction ID: 26224768 Date of Disbursement 07 / 16 / 2007
	Mailing Address P.O. Box 8331	Amount of Each Disbursement this Period 2500.00
	City Fremont State CA Zip Code 94537	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Fortney Peter Stark	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Rely on Your Beliefs (ROYB) Fund	Transaction ID: 26224763 Date of Disbursement 07 / 16 / 2007
	Mailing Address 209 Pennsylvania Ave, SE	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Leadership PAC	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Max Baucus	Transaction ID: 26380977 Date of Disbursement 08 / 08 / 2007
	Mailing Address PO Box 586	Amount of Each Disbursement this Period 1000.00
	City Helena State MT Zip Code 59624	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Max Baucus	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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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) Pallone For Congress	Transaction ID: 26380976 Date of Disbursement 08 / 08 / 2007
	Mailing Address PO Box 3176	Amount of Each Disbursement this Period 1000.00
	City Long Branch State NJ Zip Code 07740	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Frank Pallone, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of Mike Ferguson	Transaction ID: 26380971 Date of Disbursement 08 / 08 / 2007
	Mailing Address C/O Ron Gravino P.O. Box 225	Amount of Each Disbursement this Period 1500.00
	City Colonia State NJ Zip Code 07067	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Mike Ferguson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Committee To Elect Mchugh	Transaction ID: 26380972 Date of Disbursement 08 / 08 / 2007
	Mailing Address 228 S. Washington St. Ste. 115 Suite 115	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. John M. McHugh	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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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) Committee To Elect Mchugh Mailing Address 228 S. Washington St. Ste. 115 Suite 115 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Void - Committee To Elect Mchugh Candidate Name Rep. John M. McHugh Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26381018 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 7	Amount of Each Disbursement this Period -1000.00 Void - Committee To Elect Mchugh
B.	Full Name (Last, First, Middle Initial) Mike R Fund Mailing Address P O Box 2485 City Springfield State VA Zip Code 22152 Purpose of Disbursement Leadership PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26389476 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00 Leadership PAC
C.	Full Name (Last, First, Middle Initial) John D. Dingell For Congress Committee Mailing Address 607 14th Street N.W. Suite 800 City Washington State DC Zip Code 20005 Purpose of Disbursement Candidate Name Rep. John D. Dingell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26516046 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00

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

**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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Team Emerson For Jo Ann Emerson	Transaction ID: 26515883 Date of Disbursement 09 / 11 / 2007
	Mailing Address PO Box 822 P.O. Box 822	Amount of Each Disbursement this Period 500.00
	City Cape Girardeau State MO Zip Code 63702	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Jo Ann Emerson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens For Harkin	Transaction ID: 26512437 Date of Disbursement 09 / 11 / 2007
	Mailing Address P O Box 811	Amount of Each Disbursement this Period 1000.00
	City Des Moines State IA Zip Code 50304	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Tom Harkin	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sue Myrick For Congress	Transaction ID: 26515573 Date of Disbursement 09 / 11 / 2007
	Mailing Address P.O. Box 37091	Amount of Each Disbursement this Period 1000.00
	City Charlotte State NC Zip Code 28237	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Sue Wilkins Myrick	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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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)
Congressman Bart Gordon Committee

Mailing Address P.O. Box 2008

City Murfreesboro State TN Zip Code 37133

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Bart Gordon

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: TN District: 06

Transaction ID: 26515705
Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Pat Roberts For Senate

Mailing Address PO Box 433

City Great Bend State KS Zip Code 67530

Purpose of Disbursement

011
Category/
Type

Candidate Name
Sen. Pat Roberts

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: KS District: 02

Transaction ID: 26615802
Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Friends Of Gordon Smith

Mailing Address 228 S Washington Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011
Category/
Type

Candidate Name
Sen. Gordon H. Smith

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: OR District: 02

Transaction ID: 26615746
Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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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) Nathan Deal For Congress <hr/> Mailing Address PO Box 902 <hr/> City Gainesville State GA Zip Code 30503 <hr/> Purpose of Disbursement 011 Candidate Name Rep. Nathan Deal <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26615722 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>
B.	Full Name (Last, First, Middle Initial) Committe To Re-Elect Ed Towns <hr/> Mailing Address 438 Lewis Avenue <hr/> City Brooklyn State NY Zip Code 11233 <hr/> Purpose of Disbursement 011 Candidate Name Rep. Edolphus Towns <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26615716 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>
C.	Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn <hr/> Mailing Address PO Box 12567 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement 011 Candidate Name Rep. James E. Clyburn <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26615724 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 7 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 2px; font-weight: bold;">3000.00</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

**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)

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<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 Association of Chain Drug Stores Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Nancy Boyda For Congress</p> <p>Mailing Address PO Box 1474</p> <p>City Topeka State KS Zip Code 66612</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Nancy Boyda</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: KS District: 02</p>	<p>Transaction ID: 26615782</p> <p>Date of Disbursement 09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Schakowsky For Congress</p> <p>Mailing Address P.O. Box 5130</p> <p>City Evanston State IL Zip Code 60204</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Janice D. Schakowsky</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 09</p>	<p>Transaction ID: 26615801</p> <p>Date of Disbursement 09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends Of Patrick J. Kennedy Inc.</p> <p>Mailing Address P.O. Box 321</p> <p>City Pawtucket State RI Zip Code 02860</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Patrick J. Kennedy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: RI District: 01</p>	<p>Transaction ID: 26725525</p> <p>Date of Disbursement 10 / 18 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p>

SUBTOTAL of Disbursements This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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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) Moran For Kansas	Transaction ID: 26725248 Date of Disbursement 10 / 18 / 2007
	Mailing Address P.O. Box 1151	Amount of Each Disbursement this Period 1000.00
	City Hays State KS Zip Code 67601	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Jerry Moran	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends For Harry Reid	Transaction ID: 26725231 Date of Disbursement 10 / 18 / 2007
	Mailing Address P.O. Box 19163	Amount of Each Disbursement this Period 1000.00
	City Las Vegas State NV Zip Code 89132	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Sen. Harry Reid	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2010 Primary

C.	Full Name (Last, First, Middle Initial) Friends For Harry Reid	Transaction ID: 26725242 Date of Disbursement 10 / 18 / 2007
	Mailing Address P.O. Box 19163	Amount of Each Disbursement this Period -1000.00
	City Las Vegas State NV Zip Code 89132	
	Purpose of Disbursement Void - Friends For Harry Reid	011 Category/Type
	Candidate Name Sen. Harry Reid	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2010 Primary

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

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

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

FOR LINE NUMBER:
(check only one)

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

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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) Friends For Harry Reid	Transaction ID: 26725243 Date of Disbursement 10 / 18 / 2007
	Mailing Address P.O. Box 19163	Amount of Each Disbursement this Period 1000.00
	City Las Vegas State NV Zip Code 89132	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Harry Reid	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2010 Primary

B.	Full Name (Last, First, Middle Initial) Blue Dog PAC	Transaction ID: 26726095 Date of Disbursement 10 / 18 / 2007
	Mailing Address 236 Massachusetts Ave, NE, Suite 5	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Leadership PAC	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Issa For Congress	Transaction ID: 26725200 Date of Disbursement 10 / 18 / 2007
	Mailing Address P O Box 760	Amount of Each Disbursement this Period 1000.00
	City Vista State CA Zip Code 92085	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Darrell E. Issa	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 49	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Rely on Your Beliefs (ROYB) Fund</p> <p>Mailing Address 209 Pennsylvania Ave, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Leadership PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 26725221</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>Leadership PAC</p>
<p>B. Full Name (Last, First, Middle Initial) Vine PAC</p> <p>Mailing Address 236 Massachusetts Ave, NE, Suite 5</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Leadership PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 26725212</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>Leadership PAC</p>
<p>C. Full Name (Last, First, Middle Initial) Voinovich For Senate Committee</p> <p>Mailing Address 865 Macon Alley</p> <p>City Columbus State OH Zip Code 43206</p> <p>Purpose of Disbursement</p> <p>Candidate Name Sen. George V. Voinovich</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>2010 Primary</p>	<p>Transaction ID: 26725251</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4000.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

Use separate schedule(s)
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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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Becerra For Congress	Transaction ID: 26726304 Date of Disbursement 10 / 18 / 2007
	Mailing Address P.O. Box 261060	Amount of Each Disbursement this Period 1000.00
	City Los Angeles State CA Zip Code 90026	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Xavier Becerra	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) John Kerry For Senate	Transaction ID: 26726498 Date of Disbursement 10 / 18 / 2007
	Mailing Address 10 G Street Ne Suite 710	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. John F. Kerry	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Pallone For Congress	Transaction ID: 26746996 Date of Disbursement 10 / 24 / 2007
	Mailing Address PO Box 3176	Amount of Each Disbursement this Period 4000.00
	City Long Branch State NJ Zip Code 07740	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Frank Pallone, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Pallone For Congress Mailing Address PO Box 3176 City Long Branch State NJ Zip Code 07740 Purpose of Disbursement Candidate Name Rep. Frank Pallone, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26747077 Date of Disbursement 10 / 24 / 2007 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Rogers For Congress Mailing Address PO Box 581 Post Office Box 581 City Brighton State MI Zip Code 48116 Purpose of Disbursement Candidate Name Mr. Michael Rogers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26747119 Date of Disbursement 10 / 24 / 2007 Amount of Each Disbursement this Period 250.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 First St. SE City Washington State DC Zip Code 20003 Purpose of Disbursement In-Kind Contribution for Rep. Frank Pallone Breakfast Candidate Name Rep. Frank Pallone, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26748670 Date of Disbursement 10 / 25 / 2007 Amount of Each Disbursement this Period 332.75 011 Category/ Type In-Kind Contribution for Rep. Frank Pallone Break- ast

SUBTOTAL of Disbursements This Page (optional) ▶

1582.75

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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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)
John D. Dingell For Congress Committee

Mailing Address 607 14th Street N.W.
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. John D. Dingell

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: MI District: 15

Transaction ID: 26789792
Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
Boozman For Congress

Mailing Address PO Box 671

City Rogers State AR Zip Code 72757

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. John N. Boozman

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: AR District: 03

Transaction ID: 26812614
Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Rely on Your Beliefs (ROYB) Fund

Mailing Address 209 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Void - Rely on Your Beliefs (ROYB) Fund

011
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Transaction ID: 26812561
Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

-1000.00

Void - Rely on Your Beliefs (ROYB) Fund

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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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) Congressional Black Caucus - PAC	Transaction ID: 26812624 Date of Disbursement 11 / 14 / 2007
	Mailing Address 227 Massachusetts Ave., NE, Suite	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Leadership PAC Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Leadership PAC

B.	Full Name (Last, First, Middle Initial) Steve Chabot For Congress	Transaction ID: 26812633 Date of Disbursement 11 / 14 / 2007
	Mailing Address 3339 Harrison Ave. 3014 Harrison Ave.	Amount of Each Disbursement this Period 1000.00
	City Cincinnati State OH Zip Code 45211	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Steve Chabot	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Max Baucus	Transaction ID: 26952026 Date of Disbursement 12 / 11 / 2007
	Mailing Address PO Box 586	Amount of Each Disbursement this Period 1500.00
	City Helena State MT Zip Code 59624	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Sen. Max Baucus	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER:
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<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 Association of Chain Drug Stores Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lot Of People For Dave Obey	Transaction ID: 26952029 Date of Disbursement 12 / 11 / 2007
	Mailing Address 525 Washington St PO Box 1322	Amount of Each Disbursement this Period 1000.00
	City Wausau State WI Zip Code 54402	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. David R. Obey	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tim Johnson For South Dakota Inc	Transaction ID: 26952024 Date of Disbursement 12 / 11 / 2007
	Mailing Address PO Box 1536	Amount of Each Disbursement this Period 1000.00
	City Sioux Falls State SD Zip Code 57101	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Tim Johnson	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Walden For Congress Inc.	Transaction ID: 26952031 Date of Disbursement 12 / 11 / 2007
	Mailing Address PO Box 1091	Amount of Each Disbursement this Period 700.00
	City Hood River State OR Zip Code 97031	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Greg Walden	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2700.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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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) Boucher For Congress Committee Mailing Address PO Box 2000 City Abingdon State VA Zip Code 24212 Purpose of Disbursement Candidate Name Rep. Rick Boucher Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26952028 Date of Disbursement 12 / 11 / 2007 Amount of Each Disbursement this Period 1000.00 011 Category/Type
B.	Full Name (Last, First, Middle Initial) Searchlight Leadership Fund Mailing Address 426 C St., NE Rear Building City Washington State DC Zip Code 20002 Purpose of Disbursement Leadership PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26952030 Date of Disbursement 12 / 11 / 2007 Amount of Each Disbursement this Period 1000.00 011 Category/Type Leadership PAC
C.	Full Name (Last, First, Middle Initial) Friends Of Charlie Wilson Mailing Address P.O. Box 61 City St. Clairsville State OH Zip Code 43950 Purpose of Disbursement Candidate Name Rep. Charles Wilson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26952032 Date of Disbursement 12 / 11 / 2007 Amount of Each Disbursement this Period 1000.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<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 Association of Chain Drug Stores Political Action Committee

A. Full Name (Last, First, Middle Initial) Rogers For Congress <hr/> Mailing Address PO Box 581 Post Office Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement Void - Rogers For Congress <hr/> Candidate Name Mr. Michael Rogers <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27007527 Date of Disbursement 12 / 18 / 2007 <hr/> Amount of Each Disbursement this Period -250.00 <hr/> Void - Rogers For Congress
	Category/ Type 011
B. Full Name (Last, First, Middle Initial) Rogers For Congress <hr/> Mailing Address PO Box 581 Post Office Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Michael Rogers <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27007529 Date of Disbursement 12 / 18 / 2007 <hr/> Amount of Each Disbursement this Period 250.00
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	51532.75

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 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

<p>A. Full Name (Last, First, Middle Initial) Truitt for District 98</p> <p>Mailing Address P.O. Box 886</p> <p>City Keller State TX Zip Code 76244</p> <p>Purpose of Disbursement Vicki Truitt, STATE HOUSE 98th TX</p> <p>Candidate Name Representa Vicki Truitt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 98</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 26643840 Date of Disbursement: 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Vicki Truitt, STATE HOUSE 98th TX</p>
<p>B. Full Name (Last, First, Middle Initial) Senator Van de Putte Campaign</p> <p>Mailing Address 700 N. St. Mary's Suite 1725-A</p> <p>City San Antonio State TX Zip Code 78205</p> <p>Purpose of Disbursement Leticia Van de Putte, STATE SENATE 26th TX</p> <p>Candidate Name Senator Leticia Van de Putte</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 26643861 Date of Disbursement: 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Leticia Van de Putte, STA- TE SENATE 26th TX</p>
<p>C. Full Name (Last, First, Middle Initial) Chuck Hopson Campaign</p> <p>Mailing Address 506 E. Commerce</p> <p>City Jacksonville State TX Zip Code 75766</p> <p>Purpose of Disbursement Chuck Hopson, STATE HOUSE 11th TX</p> <p>Candidate Name Representa Chuck Hopson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 26643860 Date of Disbursement: 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Chuck Hopson, STATE HOUSE 11th TX</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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) Friends of Senator Jane Nelson <hr/> Mailing Address P.O. Box 608 <hr/> City Grapevine State TX Zip Code 76051 Purpose of Disbursement Jane Nelson, STATE SENATE 12th TX Candidate Name Senator Jane Nelson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 12 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26643824 Date of Disbursement 10 / 05 / 2007
	Amount of Each Disbursement this Period 500.00 Jane Nelson, STATE SENATE 12th TX
B. Full Name (Last, First, Middle Initial) Leo Berman Campaign <hr/> Mailing Address 2109 Dover Lane <hr/> City Tyler State TX Zip Code 75703 Purpose of Disbursement Leo Berman, STATE HOUSE 6th TX Candidate Name Representa Leo Berman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 26643849 Date of Disbursement 10 / 05 / 2007
	Amount of Each Disbursement this Period 500.00 Leo Berman, STATE HOUSE 6th TX

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

2500.00