

# KERR DRUG

---

RECEIVED  
FEC MAIL CENTER  
2009 JUL 28 PM 12: 21

July 24, 2009

Via Certified Mail, Return Receipt Requested

Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

Re: **Kerr Drug, Inc. PAC**

Dear Sir or Madam:

In connection with the above-referenced entity, enclosed please find Semi-Annual Report of Receipts and Disbursements for the period January 1, 2009 through June 30, 2009.

Should you have any questions, please contact me at (919) 544-3896, ext. 143.

Sincerely yours,



Mark J. Gregory  
Assistant Treasurer  
Kerr Drug, Inc. PAC

cc: G. Johnson Rice, Jr., Esq. (w/enclosure)

29030132204

RECEIVED  
FEC MAIL CENTER  
2009 JUL 28 PM 12:21

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. **12FE4M5**  
**KERR DRUG, INC. PAC**

ADDRESS (number and street) **3220 SPRING FOREST ROAD**  
 Check if different than previously reported. (ACC) **RALEIGH NC 27616-2822**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**C00368381**

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 **SEMI-ANNUAL** 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)

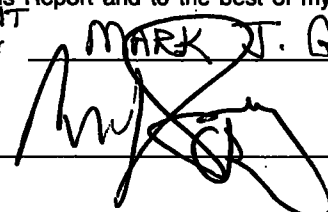
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] / [ ] / [ ] in the State of [ ]

(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period **01** / **01** / **2009** through **06** / **30** / **2009**

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 **ASSISTANT MARK J. GREGORY**

Signature of Treasurer **ASSISTANT**  Date **07** / **24** / **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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**KEPP DRUG, INC. PAC**

Report Covering the Period:

From:

01 ' 01 ' 2009

To:

06 ' 30 ' 2009

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2009	13,259.18	13,259.18
(b) Cash on Hand at Beginning of Reporting Period.....	13,259.18	
(c) Total Receipts (from Line 19) .....	12,208.00	12,208.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25,467.18	25,467.18
Total Disbursements (from Line 31).....	8,500.00	8,500.00
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	16,967.18	16,967.18
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	00	

298 50132206



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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

*KEAR PUG, INC. PAC*

Report Covering the Period: From: **01** ' **01** ' **3009**

To: **06** ' **30** ' **3009**

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1220800

1220800

(ii) Unitemized .....

00

00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1220800

1220800

(b) Political Party Committees .....

00

00

(c) Other Political Committees (such as PACs).....

00

00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1220800

1220800

12. Transfers From Affiliated/Other Party Committees.....

00

00

13. All Loans Received.....

00

00

14. Loan Repayments Received.....

00

00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

00

00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

00

00

17. Other Federal Receipts (Dividends, Interest, etc.).....

00

00

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

00

00

(b) Levin Funds (from Schedule H5).....

00

00

(c) Total Transfers (add 18(a) and 18(b))..

00

00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1220800

1220800

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1220800

1220800

2903012207

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	00	00
(ii) Non-Federal Share.....	00	00
(b) Other Federal Operating Expenditures .....	00	00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	00	00
22. Transfers to Affiliated/Other Party Committees.....	00	00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8,500.00	8,500.00
24. Independent Expenditures (use Schedule E) .....	00	00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	00	00
26. Loan Repayments Made.....	00	00
27. Loans Made.....	00	00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	00	00
(b) Political Party Committees .....	00	00
(c) Other Political Committees (such as PACs).....	00	00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	00	00
29. Other Disbursements .....	00	00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	00	00
(ii) "Levin" Share.....	00	00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	00	00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	00	00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8,500.00	8,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8,500.00	8,500.00

29030152208

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Expenditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3).....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

1220800
00
1220800
00
00
00

1220800
00
1220800
00
00
00

29050132209

**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 1 OF 3
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**KERR DRUG, INC. PAC**

A. Full Name (Last, First, Middle Initial) <b>BAXLEY, WILLIAM C.</b>		Date of Receipt <b>06 / 19 / 2009</b>
Mailing Address <b>2349 MOUNT VERNON CHURCH ROAD</b>		Amount of Each Receipt this Period <b>1,000.00</b>
City <b>RALEIGH, NC</b>	State Zip Code <b>27614</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>KERR DRUG, INC.</b>	Occupation <b>MANAGEMENT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1,000.00</b>	

B. Full Name (Last, First, Middle Initial) <b>BROWN, DOUGLAS P.</b>		Date of Receipt <b>06 / 19 / 2009</b>
Mailing Address <b>105 WOODMERE LANE</b>		Amount of Each Receipt this Period <b>348.00</b>
City <b>GOLDSBORO, NC</b>	State Zip Code <b>27530</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>KERR DRUG, INC.</b>	Occupation <b>MANAGEMENT</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>348.00</b>	

C. Full Name (Last, First, Middle Initial) <b>BROWN, LORI</b>		Date of Receipt <b>06 / 19 / 2009</b>
Mailing Address <b>25 AUTUMN RIDGE LANE</b>		Amount of Each Receipt this Period <b>25.00</b>
City <b>ASHEVILLE, NC</b>	State Zip Code <b>28803</b>	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>KERR DRUG, INC.</b>	Occupation <b>PHARMACIST</b>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>1,373.00</b>
TOTAL This Period (last page this line number only).....▶	

29030132210

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

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

FOR LINE NUMBER: PAGE 2 OF 13  
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)  
**KEEP DRUG, INC. PAC**

**A. BUCK, DONALD A.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**117 FORECASTLE COURT**  
City **WASHINGTON, NC** State Zip Code **27889**

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

Name of Employer **KEEP DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **6000**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **60.00**

**B. BURKE, CHRIS**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**3220 SPRING FOREST ROAD**  
City **RALEIGH, NC** State Zip Code **27614**

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

Name of Employer **KEEP DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **1000**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **1000**

**C. CALLICUTT, DOUGLAS**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**387 LENFORD CIRCLE**  
City **HIGH POINT, NC** State Zip Code **27265**

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

Name of Employer **KEEP DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date **2500**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **2500**

SUBTOTAL of Receipts This Page (optional)..... **9500**

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

29030132211



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

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 3 OF 13  
 (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)  
**KEER DRUG, INC. PAC**

**A. CAPLAN, ABIGALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **13006 EDSEL DRIVE**  
 City: **RALEIGH, NC** State: **NC** Zip Code: **27613**  
 Date of Receipt: **06 / 19 / 2009**  
 Amount of Each Receipt this Period: **25.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **KEER DRUG, INC.** Occupation: **PHARMACIST**  
 Receipt For:  Primary  General  
 Other (specify)  Aggregate Year-to-Date: **25.00**

**B. CARROLL, KATHRYN R.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **7816 MAYFAIRE CREST LANE, #206**  
 City: **RALEIGH, NC** State: **NC** Zip Code: **27615**  
 Date of Receipt: **06 / 19 / 2009**  
 Amount of Each Receipt this Period: **195.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **KEER DRUG, INC.** Occupation: **MANAGEMENT**  
 Receipt For:  Primary  General  
 Other (specify)  Aggregate Year-to-Date: **195.00**

**C. CIVELLO, ANTHONY N.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **6337 WAKEFALLS DRIVE**  
 City: **WAKE FOREST, NC** State: **NC** Zip Code: **27587**  
 Date of Receipt: **06 / 19 / 2009**  
 Amount of Each Receipt this Period: **3000.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **KEER DRUG, INC.** Occupation: **MANAGEMENT**  
 Receipt For:  Primary  General  
 Other (specify)  Aggregate Year-to-Date: **3000.00**

**SUBTOTAL of Receipts This Page (optional)** **3220.00**  
**TOTAL This Period (last page this line number only)**

29030132212

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

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

FOR LINE NUMBER: PAGE 4 OF 13  
(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)  
KEAR DRUG, INC. PAC

**A.** Full Name (Last, First, Middle Initial)  
COLLUMS, ELIZABETH F.

Mailing Address  
1416 DEAPA DRIVE  
City CARY, NC State Zip Code 27511

FEC ID number of contributing federal political committee. C

Name of Employer KEAR DRUG, INC. Occupation MANAGEMENT

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 15000

Date of Receipt 06 / 19 / 2009

Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
DAVIS, GEORGE IKE, JR.

Mailing Address  
7459 RIVER GLENN ROAD  
City ROCKY MOUNT, NC State Zip Code 27803

FEC ID number of contributing federal political committee. C

Name of Employer KEAR DRUG, INC. Occupation MANAGEMENT

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 35000

Date of Receipt 06 / 19 / 2009

Amount of Each Receipt this Period 35000

**C.** Full Name (Last, First, Middle Initial)  
DEADMON, PHIL

Mailing Address  
100 CARSON FARMS EAST DRIVE  
City DURLINGTON, NC State Zip Code 27215

FEC ID number of contributing federal political committee. C

Name of Employer KEAR DRUG, INC. Occupation MANAGEMENT

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date 10000

Date of Receipt 06 / 19 / 2009

Amount of Each Receipt this Period 10000

SUBTOTAL of Receipts This Page (optional).....▶ 60000

TOTAL This Period (last page this line number only).....▶ 60000

29030132213

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

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

FOR LINE NUMBER: PAGE 5 OF 13  
(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)  
KERR DRUG, INC. PAC

A. Full Name (Last, First, Middle Initial)  
DORSETT, BOBBY J.

Mailing Address  
8005 KUKUI COURT  
City RALEIGH, NC State NC Zip Code 27613

FEC ID number of contributing federal political committee. C

Name of Employer KERR DRUG, INC. Occupation MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
65000

Date of Receipt  
06 / 19 / 2009

Amount of Each Receipt this Period  
65000

B. Full Name (Last, First, Middle Initial)  
EDMUNDSON, EDWARD S.

Mailing Address  
4176 ENGLISH GARDEN WAY  
City RALEIGH, NC State NC Zip Code 27612

FEC ID number of contributing federal political committee. C

Name of Employer KERR DRUG, INC. Occupation MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000

Date of Receipt  
06 / 19 / 2009

Amount of Each Receipt this Period  
25000

C. Full Name (Last, First, Middle Initial)  
GABIG, DONALD L.

Mailing Address  
126 MERRY HILL DRIVE  
City CARY, NC State NC Zip Code 27518

FEC ID number of contributing federal political committee. C

Name of Employer KERR DRUG, INC. Occupation PHARMACIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
06 / 19 / 2009

Amount of Each Receipt this Period  
5000

SUBTOTAL of Receipts This Page (optional).....▶ 95000

TOTAL This Period (last page this line number only).....▶ 95000

29030132214

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

PAGE 6 OF 13

<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 type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)

KERR DRUG, INC. PAC

Full Name (Last, First, Middle Initial)

A. GIBSON, JOSEPH P.

Mailing Address

7212 LOWELL RIDGE ROAD

City State Zip Code

RALEIGH, NC 27616

FEC ID number of contributing federal political committee.

C

Name of Employer

KERR DRUG, INC.

Occupation

MANAGEMENT

Receipt For:

Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

130.00

Date of Receipt

06 ' 19 ' 2009

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

B. GRAY, RICHARD H.

Mailing Address

309 ALDERSON ROAD

City State Zip Code

WASHINGTON, NC 27889

FEC ID number of contributing federal political committee.

C

Name of Employer

KERR DRUG, INC.

Occupation

PHARMACIST

Receipt For:

Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

06 ' 19 ' 2009

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. GREGORY, MARK J.

Mailing Address

1709 CHATSWORTH LANE

City State Zip Code

RALEIGH, NC 27614

FEC ID number of contributing federal political committee.

C

Name of Employer

KERR DRUG, INC.

Occupation

MANAGEMENT

Receipt For:

Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

195.00

Date of Receipt

06 ' 19 ' 2009

Amount of Each Receipt this Period

195.00

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

335.00

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

29030132215

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

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

FOR LINE NUMBER: PAGE 7 OF 13  
(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)  
**KERR DRUG, INC. PAC**

**A.** Full Name (Last, First, Middle Initial)  
**HARSHMAN, DANIEL K.**

Mailing Address  
**702 S. THIRD STREET**

City **CAROLINA BEACH, NC** State Zip Code **28428**

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

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **14000**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **14000**

**B.** Full Name (Last, First, Middle Initial)  
**HAYES, ANGELIA**

Mailing Address  
**10 SILO GLEN LANE**

City **WAKE FOREST, NC** State Zip Code **27587**

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

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **5500**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **5500**

**C.** Full Name (Last, First, Middle Initial)  
**HOUSTON, O. WAYNE**

Mailing Address  
**880 SUMNER ROAD**

City **PINK HILL, NC** State Zip Code **28572**

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

Name of Employer **KERR DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **1000**

**SUBTOTAL** of Receipts This Page (optional).....▶ **20500**

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

29030132216

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

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

FOR LINE NUMBER: PAGE 8 OF 13

(check only one)

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

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)  
**KERR DRUG, INC. PAC**

**A. KOMPARE, TARA**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**5500 AUTUMN HARVEST DRIVE**  
City **KEENERVILLE, NC** State Zip Code **27284**

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

Name of Employer **KERR DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2500**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **2500**

**B. LAMB, GERALD J.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**104 KENILWORTH ROAD**  
City **SUMMERVILLE, SC** State Zip Code **29485**

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

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2600**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **2600**

**C. LINGERFELDT, THEODORE**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**106 WINDROCK LANE**  
City **CARY, NC** State Zip Code **27511**

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

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **19500**

Date of Receipt **06 ' 19 ' 2009**

Amount of Each Receipt this Period **19500**

**SUBTOTAL** of Receipts This Page (optional)..... ► **48000**

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

29030132217

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

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

FOR LINE NUMBER: PAGE 9 OF 13  
(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

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)  
KERR DRUG, INC. PAC

A. Full Name (Last, First, Middle Initial)  
MAILE, JOSEPH M.

Mailing Address  
100 MEADOWVALE CIRCLE

City State Zip Code  
CARY, NC 27519

FEC ID number of contributing federal political committee.  
C

Name of Employer  
KERR DRUG, INC.

Occupation  
MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
06 ' 19 ' 2009

Amount of Each Receipt this Period  
350.00

B. Full Name (Last, First, Middle Initial)  
PETRI, RALPH

Mailing Address  
2320 SUNNY STONE WAY

City State Zip Code  
RALEIGH, NC 27613

FEC ID number of contributing federal political committee.  
C

Name of Employer  
KERR DRUG, INC.

Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
06 ' 19 ' 2009

Amount of Each Receipt this Period  
230.00

C. Full Name (Last, First, Middle Initial)  
RANKIN, DON

Mailing Address  
105 SHOSHONE ROAD

City State Zip Code  
LEXINGTON, NC 27295

FEC ID number of contributing federal political committee.  
C

Name of Employer  
KERR DRUG, INC.

Occupation  
PHARMACIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
130.00

Date of Receipt  
06 ' 19 ' 2009

Amount of Each Receipt this Period  
130.00

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

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

7100.00

29030132218

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

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

FOR LINE NUMBER: PAGE 10 OF 13  
(check only one)

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

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)  
**KERR DRUG, INC. PAC**

**A. RICE, G. JOHNSON, JR.**

Full Name (Last, First, Middle Initial)

Mailing Address  
**1924 HORNBECK COURT**

City **RALEIGH, NC** State Zip Code **27614**

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

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1,000.00**

Date of Receipt **06 '19' 2009**

Amount of Each Receipt this Period **1,000.00**

**B. RIDDLE, J. GLENN**

Full Name (Last, First, Middle Initial)

Mailing Address  
**3175 ODOM ROAD**

City **HOPE MILLS, NC** State Zip Code **28348**

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

Name of Employer **KERR DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **65.00**

Date of Receipt **06 '19' 2009**

Amount of Each Receipt this Period **65.00**

**C. ROGERS, MICHELLE**

Full Name (Last, First, Middle Initial)

Mailing Address  
**1509 HAYWARDS HEALTH LANE**

City **APEX, NC** State Zip Code **27502**

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

Name of Employer **KERR DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **20.00**

Date of Receipt **06 '19' 2009**

Amount of Each Receipt this Period **20.00**

**SUBTOTAL of Receipts This Page (optional)..... ▶** **1,085.00**

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

29030132219



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

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

FOR LINE NUMBER: PAGE 1 OF 13  
(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			

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)  
**KERR DRUG, INC. PAC**

**A. RUSSELL, LISA**

Full Name (Last, First, Middle Initial)

Mailing Address  
**4704 WATERFORD COVE DRIVE**

City **RALEIGH, NC** State **NC** Zip Code **27606**

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

Date of Receipt **06 / 19 / 2009**

Amount of Each Receipt this Period **10.00**

Name of Employer **KERR DRUG, INC.** Occupation **PHARMACIST**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **10.00**

**B. SMITH, JOHN H. JR.**

Full Name (Last, First, Middle Initial)

Mailing Address  
**643 AIKEN PARKWAY**

City **FUQUAY-VARINA, NC** State **NC** Zip Code **27526**

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

Date of Receipt **06 / 19 / 2009**

Amount of Each Receipt this Period **50.00**

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **50.00**

**C. SMITH, JIM D.**

Full Name (Last, First, Middle Initial)

Mailing Address  
**23161 DAN SMITH ROAD**

City **WAGRAM, NC** State **NC** Zip Code **28396**

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

Date of Receipt **06 / 19 / 2009**

Amount of Each Receipt this Period **100.00**

Name of Employer **KERR DRUG, INC.** Occupation **MANAGEMENT**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **100.00**

**SUBTOTAL of Receipts This Page (optional).....▶** **160.00**

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

29030132220

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 13
(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)
KERR DRUG, INC. PAC

A. Full Name (Last, First, Middle Initial)
TRIDDLE, ARTHUR
Mailing Address
205 ROCKY RIDGE DRIVE
City ALMOND, NC State Zip Code
FEC ID number of contributing federal political committee.
C
Name of Employer
KERR DRUG, INC. Occupation
PHARMACIST
Receipt For:
Primary General
Other (specify)
Aggregate Year-to-Date
11000

Date of Receipt
06 19 2009
Amount of Each Receipt this Period
11000

B. Full Name (Last, First, Middle Initial)
VOORHEES, BRIONY W.
Mailing Address
12920 GARFFE SHERRON ROAD
City WAKE FOREST, NC State Zip Code
FEC ID number of contributing federal political committee.
C
Name of Employer
KERR DRUG INC. Occupation
MANAGEMENT
Receipt For:
Primary General
Other (specify)
Aggregate Year-to-Date
100000

Date of Receipt
06 19 2009
Amount of Each Receipt this Period
100000

C. Full Name (Last, First, Middle Initial)
WHITEHEAD, CHARLES M.
Mailing Address
1051 WOODSIDE PLACE
City ASHEBORO, NC State Zip Code
FEC ID number of contributing federal political committee.
C
Name of Employer
KERR DRUG, INC. Occupation
PHARMACIST
Receipt For:
Primary General
Other (specify)
Aggregate Year-to-Date
5000

Date of Receipt
06 19 2009
Amount of Each Receipt this Period
5000

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

116000

2903013221

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

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

FOR LINE NUMBER: PAGE **3** OF **3**  
(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)

**KERR DRUG, INC. PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAMS, DOUGLAS M.**

Mailing Address

**57 PINEBROOK DRIVE**

City State Zip Code

**PINEHURST, NC 28374**

FEC ID number of contributing federal political committee.

**C**

Date of Receipt

**06 / 19 / 2009**

Amount of Each Receipt this Period

**50.00**

Name of Employer

**KERR DRUG, INC.**

Occupation

**PHARMACIST**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**50.00**

Full Name (Last, First, Middle Initial)

**B. ZANILLA, EMIL**

Mailing Address

**1014 LYLEBOURNE COURT**

City State Zip Code

**APEX, NC 27502**

FEC ID number of contributing federal political committee.

**C**

Date of Receipt

**06 / 19 / 2009**

Amount of Each Receipt this Period

**1,495.00**

Name of Employer

**KERR DRUG, INC.**

Occupation

**MANAGEMENT**

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

**1,495.00**

Full Name (Last, First, Middle Initial)

**C. ROOT, JERRY W.**

Mailing Address

**2925 DAHLGREEN ROAD**

City State Zip Code

**RALEIGH, NC 27615**

FEC ID number of contributing federal political committee.

**C**

Date of Receipt

**06 / 19 / 2009**

Amount of Each Receipt this Period

**290.00**

Name of Employer

Receipt For:

Primary  General  
 Other (specify) ▼

Occupation

Aggregate Year-to-Date ▼

**290.00**

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

**1,835.00**

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

**1,220.80**

2903013222

**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 1 OF 3

<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

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)

KEER DRUG, INC. PAC

Full Name (Last, First, Middle Initial)

A. NC DEMOCRATIC PARTY

Date of Disbursement

01 / 09 / 2009

Mailing Address

220 HILLSBOROUGH STREET

City State Zip Code

RALEIGH NC 27603

Purpose of Disbursement

CONTRIBUTION

011

Amount of Each Disbursement this Period

100000

Candidate Name

BEVERLY PERDUE

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: NC District:

Full Name (Last, First, Middle Initial)

B. MIKE ROSS FOR CONGRESS

Date of Disbursement

03 / 13 / 2009

Mailing Address

P.O. BOX 360

City State Zip Code

PRESCOTT AR 71857

Purpose of Disbursement

CONTRIBUTION

011

Amount of Each Disbursement this Period

100000

Candidate Name

MIKE ROSS

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: AR District: 4TH

Full Name (Last, First, Middle Initial)

C. MORAN FOR KANSAS (CO NACAS)

Date of Disbursement

04 / 01 / 2009

Mailing Address

413 NORTH LEE STREET

City State Zip Code

ALEXANDRIA VA 22314

Purpose of Disbursement

CONTRIBUTION

011

Amount of Each Disbursement this Period

100000

Candidate Name

JERRY MORAN

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: KS District: 1ST

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

300000

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

29030132223

**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 2 OF 3

<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

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)  
**KERR DRUG, INC. PAC**

A. **FRIENDS OF JIM CLYBURN**

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 12567**

City: **COLUMBIA SC** State: **SC** Zip Code: **29211**

Purpose of Disbursement: **CONTRIBUTION**

Candidate Name: **JIM CLYBURN**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **SC** District: **6TH**

Date of Disbursement: **05/07/2009**

Amount of Each Disbursement this Period: **2000.00**

Category/Type: **011**

B. **CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address: **6380 WILSHIRE BLVD. #1612**

City: **LOS ANGELES CA** State: **CA** Zip Code: **90048**

Purpose of Disbursement: **CONTRIBUTION**

Candidate Name: **HENRY A. WAXMAN**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **CA** District: **30TH**

Date of Disbursement: **05/07/2009**

Amount of Each Disbursement this Period: **5000.00**

Category/Type: **011**

C. **FRIENDS OF ROY BLUNT**

Full Name (Last, First, Middle Initial)

Mailing Address: **333 PARK CENTRAL EAST #818**

City: **SPRINGFIELD MO** State: **MO** Zip Code: **65806**

Purpose of Disbursement: **CONTRIBUTION**

Candidate Name: **ROY BLUNT**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **MO** District: **7TH**

Date of Disbursement: **05/13/2009**

Amount of Each Disbursement this Period: **1500.00**

Category/Type: **011**

SUBTOTAL of Disbursements This Page (optional)..... ▶ **4000.00**

TOTAL This Period (last page this line number only)..... ▶ **4000.00**

29030132224

**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 <u>3</u> OF <u>3</u>
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a
	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c
	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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)  
**KERR CLUB, INC. PAC**

**A. NC DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial)

Mailing Address  
**230 HILLSBOROUGH STREET**

City **RALEIGH** State **NC** Zip Code **27603**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**06 / 10 / 2009**

Amount of Each Disbursement this Period  
**50000**

Category/Type  
**011**

**B. DEAL FOR GOVERNOR COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address  
**P.O. Box 2495**

City **GAINESVILLE** State **GA** Zip Code **30503**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name  
**NATHAN DEAL**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **GA** District:

Date of Disbursement  
**06 / 24 / 2009**

Amount of Each Disbursement this Period  
**100000**

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **150000**

TOTAL This Period (last page this line number only)..... **850000**

29030132225

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

29030132226

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*EW*  
 PREPARER  
 (3/2005)

7/28/09  
 DATE PREPARED