

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Association of Chain Drug Stores, Inc. Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		159034.22
(b) Cash on Hand at Beginning of Reporting Period.....	154868.99	
(c) Total Receipts (from Line 19)	47512.62	62772.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	202381.61	221806.54
7. Total Disbursements (from Line 31).....	28367.61	47792.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	174014.00	174014.00
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, Inc. Political Action Committee

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

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).....	28545.32	32660.64
(ii) Unitemized	599.69	1319.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	29145.01	33979.78
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	22500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	46645.01	56479.78
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	867.61	1292.54
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	47512.62	62772.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	47512.62	62772.32

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	867.61	1292.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	867.61	1292.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	31500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	15000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28367.61	47792.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28367.61	47792.54

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46645.01	56479.78
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46645.01	56479.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	867.61	1292.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	867.61	1292.54

**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 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Staniforth, Karen, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 Bayou Rd
 City Longboat Key State FL Zip Code 34228-3023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rite Aid Corporation Occupation (for Individual) SVP, Clinical & Operational Pharmacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **04 / 05 / 2022**
Transaction ID : 47457626
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. Norman, Craig, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 646 S. Flores St
 City San Antonio State TX Zip Code 78204-1219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H-E-B Occupation (for Individual) Senior Vice President, Pharmacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **04 / 12 / 2022**
Transaction ID : 47473472
 Amount of Each Receipt this Period **2500.00**
 Memo Item

C. Heiser, Justin, , Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6055 Nathan Lane N Ste 200
 City Plymouth State MN Zip Code 55442-1675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Thrifty White Pharmacy Occupation (for Individual) Executive Vice President, Pharmacy Op
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1250.00**

Date of Receipt **04 / 12 / 2022**
Transaction ID : 47477434
 Amount of Each Receipt this Period **1250.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
<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, Inc. Political Action Committee

A. Rusk, Dain, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3300 Publix Corporate Pkwy

City Lakeland	State FL	Zip Code 33811-3311
------------------	-------------	------------------------

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

Name of Employer (for Individual) Publix Super Markets, Inc.	Occupation (for Individual) VP, Pharmacy
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2022

Transaction ID : 47480410

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Vice President of Government, Politica
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2022

Transaction ID : 47481141

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 6055 Nathan Ln N Ste 200

City Plymouth	State MN	Zip Code 55442-1675
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Thrifty White Pharmacy	Occupation (for Individual) Director - Specialty Pharmacy and Phar
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2022

Transaction ID : 47497250

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
	<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, Inc. Political Action Committee

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

Mailing Address 1 IMS Dr.

City Plymouth Meeting	State PA	Zip Code 19462-1722
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IQVIA	Occupation (for Individual) Vice President, Supplier Management
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		20		2022

Transaction ID : 47506507

Amount of Each Receipt this Period
365.00

Memo Item

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

Mailing Address 1110 W Lake Cook Rd Ste 372

City Buffalo Grove	State IL	Zip Code 60089-1991
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) The Swanson Group	Occupation (for Individual) Principal
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		20		2022

Transaction ID : 47506526

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 6055 Nathan Lane N Ste 200

City Plymouth	State MN	Zip Code 55442-1675
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Thrifty White Pharmacy	Occupation (for Individual) President and Chief Executive Officer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		20		2022

Transaction ID : 47506558

Amount of Each Receipt this Period
625.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1990.00
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 9 OF 31
<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, Inc. Political Action Committee

A. Huseby, Todd, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 227 W Monroe St Fl 41

City Chicago	State IL	Zip Code 60606-5087
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kearney	Occupation (for Individual) Partner
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2022

Transaction ID : 47509990

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 1 IMS Dr.

City Plymouth Meeting	State PA	Zip Code 19462-1722
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IQVIA	Occupation (for Individual) Sr. Director Supplier Services
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

Transaction ID : 47510743

Amount of Each Receipt this Period
450.00

Memo Item

C. Long, Douglas, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 173 Clearlake Dr

City Ponte Vedra Beach	State FL	Zip Code 32082-2178
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IQVIA	Occupation (for Individual) Vice President, Industry Relations
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

Transaction ID : 47511679

Amount of Each Receipt this Period
450.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
	<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, Inc. Political Action Committee

A. Johnson, Gregg, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2400 NW 55th Ct

City Fort Lauderdale	State FL	Zip Code 33309-2672
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Trivida Health	Occupation (for Individual) SVP, North America
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

Transaction ID : 47511686

Amount of Each Receipt this Period
450.00

Memo Item

B. Kwait, Todd, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2288 Chatfield Dr

City Cleveland Heights	State OH	Zip Code 44106-3656
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Sheffield Pharmaceuticals	Occupation (for Individual) Executive V.P. of Global Sales & Busin
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2022

Transaction ID : 47511689

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 101 Innovation Pl, Santa Barbara,

City Santa Barbara	State CA	Zip Code 93108-2268
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kate Farms	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2022

Transaction ID : 47511707

Amount of Each Receipt this Period
450.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
<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, Inc. Political Action Committee

A. Bartell, George, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4025 Delridge Way SW Ste 400
 City Seattle State WA Zip Code 98106-1273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Henbart LLC Occupation (for Individual) Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 23 / 2022
Transaction ID : 47511715
 Amount of Each Receipt this Period 450.00
 Memo Item

B. Knightly, Kevin, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 Wooster Heights Rd
 City Danbury State CT Zip Code 06810-7548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IQVIA Occupation (for Individual) President, Info & Tech Solutions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 23 / 2022
Transaction ID : 47511717
 Amount of Each Receipt this Period 450.00
 Memo Item

C. Kramer, Bruce, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2900 N. Locust Street
 City Sterling State IL Zip Code 61081-9501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wahl Clipper Corporation Occupation (for Individual) Senior Vice President, N.A. Consumer C
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 23 / 2022
Transaction ID : 47511723
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
<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, Inc. Political Action Committee

A. Panzer, Mark, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7884 E. Santa Catalina Drive

City Scottsdale	State AZ	Zip Code 85255-2601
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retail Consulting Group	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2022

Transaction ID : 47511731

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 30825 Wiegman Rd

City Hayward	State CA	Zip Code 94544-7893
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E.&J. Gallo Winery	Occupation (for Individual) VP Customer Development Retail
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2022

Transaction ID : 47511733

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) SVP Congressional Relations and Com
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2022

Transaction ID : 47511735

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
<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, Inc. Political Action Committee

A. Brennan, Michael, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8201 104th St # 200

City Pleasant Prairie	State WI	Zip Code 53158-5811
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Quest Products Health Care	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2022

Transaction ID : 47528338

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 2525 Monroe Blvd Ste 1003

City Audubon	State PA	Zip Code 19403-2233
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Cleanlogic	Occupation (for Individual) VP of Sales
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2022

Transaction ID : 47528340

Amount of Each Receipt this Period
225.00

Memo Item

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

Mailing Address 2525 Monroe Blvd Ste 1003

City Audubon	State PA	Zip Code 19403-2233
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Cleanlogic	Occupation (for Individual) President/CEO
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2022

Transaction ID : 47528344

Amount of Each Receipt this Period
225.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
<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, Inc. Political Action Committee

A. Rose, Jim, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5100 Legacy Dr

City Plano	State TX	Zip Code 75024-3104
---------------	-------------	------------------------

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

Name of Employer (for Individual) CROSSMARK, Inc.	Occupation (for Individual) President, Marketing Services
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2022

Transaction ID : 47529151

Amount of Each Receipt this Period
450.00

Memo Item

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

Mailing Address 5985 Yucca Lane N.

City Plymouth	State MN	Zip Code 55446-3527
------------------	-------------	------------------------

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

Name of Employer (for Individual) Thrifty White Stores	Occupation (for Individual) Vice President of Information Technolo
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2022

Transaction ID : 47531999

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 29 E Main St

City Gouverneur	State NY	Zip Code 13642-1401
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Kinney Drugs, Inc.	Occupation (for Individual) Executive Chairman of the Board
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2022

Transaction ID : 47585635

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6950.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 31
	<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, Inc. Political Action Committee

A. Ecker, Heidi, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Vice President of Government, Politica
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2022

Transaction ID : 47597972

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 407 E Lancaster Ave

City Wayne	State PA	Zip Code 19087-4202
---------------	-------------	------------------------

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

Name of Employer (for Individual) The Emerson Group	Occupation (for Individual) Corporate President, Chairman, and Cf
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2022

Transaction ID : 47617166

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address PO Box 160

City Spring House	State PA	Zip Code 19477-0160
----------------------	-------------	------------------------

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

Name of Employer (for Individual) The Compliance Team, Inc.	Occupation (for Individual) Executive Vice President
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2022

Transaction ID : 47617168

Amount of Each Receipt this Period
450.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	960.00
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 16 OF 31
<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, Inc. Political Action Committee

A. McClure, David, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 520 E. Main Street

City Gouverneur	State NY	Zip Code 13642-1561
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Kinney Drugs, Inc.	Occupation (for Individual) Vice President, Retail Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2022

Transaction ID : 47622139

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Vice President of Government, Politica
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2022

Transaction ID : 47647747

Amount of Each Receipt this Period
10.00

Memo Item

C. Fitzsimmons, David, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Senior Vice President, Finance and Adr
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1249.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2022

Transaction ID : PR1054896265284

Amount of Each Receipt this Period
576.90

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	2086.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 31
<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, Inc. Political Action Committee

A. Guckian, Sandra, Kay, Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Vice President of State Relations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1249.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2022

Transaction ID : PR1054896965284

Amount of Each Receipt this Period
576.90

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

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

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Senior Vice President, Member Progran
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1249.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2022

Transaction ID : PR1054897965284

Amount of Each Receipt this Period
576.90

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

C. Nicholson, Kevin, N., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Vice President of Public Policy, Regul
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
249.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2022

Transaction ID : PR1055174765284

Amount of Each Receipt this Period
115.38

Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1269.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 31
<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, Inc. Political Action Committee

A. Anderson, Steve, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
-------------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) President and Chief Executive Officer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2022

Transaction ID : PR2202229365284

Amount of Each Receipt this Period
1153.86

Memo Item

P/R Deduction (\$192.31 Bi-Weekly)

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

Mailing Address 2548 Main St Ste C

City Elgin	State SC	Zip Code 29045-8844
---------------	-------------	------------------------

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

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Director, State Government Affairs
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2022

Transaction ID : PR2576388165284

Amount of Each Receipt this Period
120.00

Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

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

Mailing Address 1776 Wilson Blvd Ste 200

City Arlington	State VA	Zip Code 22209-2516
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) National Association of Chain Drug Sto	Occupation (for Individual) Director, Federal Government Affairs
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
249.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2022

Transaction ID : PR2645976365284

Amount of Each Receipt this Period
115.38

Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1389.24
TOTAL This Period (last page this line number only).....	28545.32

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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, Inc. Political Action Committee

A. Publix Super Markets, Inc. Associates PAC

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

Mailing Address P.O. Box 407

City Lakeland	State FL	Zip Code 33802
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00400705

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2022

Transaction ID : 47617164

Amount of Each Receipt this Period
2500.00

Memo Item

B. Cardinal Health Inc. PAC

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

Mailing Address 7000 CARDINAL PLACE

City Dublin	State OH	Zip Code 43017
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00332833

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2022

Transaction ID : 47617165

Amount of Each Receipt this Period
2500.00

Memo Item

C. WAKEPAC

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

Mailing Address 33 Northfield Avenue

City Edison	State NJ	Zip Code 08837
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00048900

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2022

Transaction ID : 47636611

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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, Inc. Political Action Committee

A. Pharmavite PAC

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

Mailing Address 8510 Blaboa Boulevard

City Northridge	State CA	Zip Code 91325
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410654

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2022

Transaction ID : 47718711

Amount of Each Receipt this Period
2500.00

Memo Item

B. Walmart Inc. Political Action Committee for Responsible Government

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

Mailing Address 702 SW 8th St

City Bentonville	State AR	Zip Code 72716
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2022

Transaction ID : 47723683

Amount of Each Receipt this Period
5000.00

Memo Item

C.

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	17500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 31
<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 checked="" type="checkbox"/> 17

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

A. National Association of Chain Drug Stores

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
National Association of Chain Drug Stores

Mailing Address 1776 Wilson Blvd. Suite 200

City Arlington	State VA	Zip Code 22209
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
477.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2022

Transaction ID : 47480499

Amount of Each Receipt this Period
52.67

Memo Item

Apr.22 - Bank Fees Reimb.

B. National Association of Chain Drug Stores

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
National Association of Chain Drug Stores

Mailing Address 1776 Wilson Blvd. Suite 200

City Arlington	State VA	Zip Code 22209
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
985.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2022

Transaction ID : 47616974

Amount of Each Receipt this Period
508.28

Memo Item

May 22 - Bank Fees Reimb

C. National Association of Chain Drug Stores

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
National Association of Chain Drug Stores

Mailing Address 1776 Wilson Blvd. Suite 200

City Arlington	State VA	Zip Code 22209
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1153.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2022

Transaction ID : 47646517

Amount of Each Receipt this Period
167.76

Memo Item

Jun.22 - CC Fees Reimb.

SUBTOTAL of Receipts This Page (optional).....	728.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 31
<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 checked="" type="checkbox"/> 17

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

A. National Association of Chain Drug Stores

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

Mailing Address 1776 Wilson Blvd. Suite 200

City Arlington	State VA	Zip Code 22209
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1292.54

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2022

Transaction ID : 47723720

Amount of Each Receipt this Period
138.90

Memo Item

Jun.22 - Merchant Fees Reimb.

B.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	138.90
TOTAL This Period (last page this line number only).....	867.61

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Apr.22 - Bank Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : 47472784

Amount of Each Disbursement this Period

[REDACTED] 52.67

Apr.22 - Bank Fees

Memo Item

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
May 22 - Bank Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		5	1		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : 47601637

Amount of Each Disbursement this Period

[REDACTED] 508.28

May 22 - Bank Fees

Memo Item

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Jun.22 - AMEX Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : 47641230

Amount of Each Disbursement this Period

[REDACTED] 167.76

Jun.22 - AMEX Fees

Memo Item

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

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

[REDACTED] 728.71

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Jun.22 - VI/MC Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 47688997

Amount of Each Disbursement this Period

Jun.22 - VI/MC Fees

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anna Eshoo For Congress

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

011

Category/
Type

Candidate Name

Eshoo, Anna, G., Rep.,

Office Sought: House Senate President

Disbursement For: 2022
 Primary General Other (specify) ▼

State: CA District: 18

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2022

FEC Identification Number

C C00258475

Transaction ID : 47723684

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Barragan For Congress

Mailing Address 1840 South Gaffey Street #421

City San Pedro State CA Zip Code 90731

Purpose of Disbursement

011

Category/
Type

Candidate Name

Barragan, Nanette, Diaz, Rep.,

Office Sought: House Senate President

Disbursement For: 2022
 Primary General Other (specify) ▼

State: CA District: 44

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2022

FEC Identification Number

C C00577353

Transaction ID : 47723685

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bilirakis For Congress

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688

Purpose of Disbursement

011

Category/
Type

Candidate Name

Bilirakis, Gus, M., Rep.,

Office Sought: House Senate President

Disbursement For: 2022
 Primary General Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2022

FEC Identification Number

C C00408534

Transaction ID : 47723686

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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"/> 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, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Buddy Carter For Congress

Mailing Address PO Box 10570

City Savannah

State GA

Zip Code 31412

Purpose of Disbursement

011

Category/Type

Candidate Name

Carter, Earl, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: GA

District: 01

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2022

FEC Identification Number

C00543967

Transaction ID : 47723687

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Curtis For Congress

Mailing Address 370 East South Temple, Suite 580

City Salt Lake City

State UT

Zip Code 84111

Purpose of Disbursement

011

Category/Type

Candidate Name

Curtis, John, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: UT

District: 03

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2022

FEC Identification Number

C00647339

Transaction ID : 47723688

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Raja For Congress

Mailing Address PO Box 681202

City Schaumburg

State IL

Zip Code 60168

Purpose of Disbursement

011

Category/Type

Candidate Name

Krishnamoorthi, Raja, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: IL

District: 08

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2022

FEC Identification Number

C00575092

Transaction ID : 47723689

Amount of Each Disbursement this Period

1000.00

Memo Item

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"/> 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, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Guthrie For Congress

Mailing Address PO Box 9639

City
Bowling Green

State
KY

Zip Code
42102

Purpose of Disbursement

011

Category/
Type

Candidate Name

Guthrie, Brett, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C00445023

Transaction ID : 47723690

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hudson For Congress

Mailing Address PO Box 5053

City
Concord

State
NC

Zip Code
28027

Purpose of Disbursement

011

Category/
Type

Candidate Name

Hudson, Richard, L., Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify)

State: NC District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C00504522

Transaction ID : 47723691

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. John Rose For Tennessee

Mailing Address PO Box 2404

City
Cookeville

State
TN

Zip Code
38502

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rose, John, W., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C00652743

Transaction ID : 47723693

Amount of Each Disbursement this Period

2000.00

Memo Item

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

5500.00

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"/> 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, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matsui For Congress

Mailing Address PO Box 1738

City
Sacramento

State
CA

Zip Code
95812

Purpose of Disbursement

011

Category/
Type

Candidate Name

Matsui, Doris, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: CA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C C00409219

Transaction ID : 47723695

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Kelly For Congress

Mailing Address PO Box 476

City
Lyndora

State
PA

Zip Code
16045

Purpose of Disbursement

011

Category/
Type

Candidate Name

Kelly, Mike, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify)

State: PA District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C C00474189

Transaction ID : 47723697

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mullin For America

Mailing Address PO Box 3681

City
Muskogee

State
OK

Zip Code
74402

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mullin, Markwayne, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022

Primary General
 Other (specify) ▼

State: OK District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C C00498345

Transaction ID : 47723698

Amount of Each Disbursement this Period

1000.00

Memo Item

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"/> 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, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul Tonko For Congress

Mailing Address 911 Central Avenue
221

City Albany State NY Zip Code 12206

Purpose of Disbursement

Category/
Type

Candidate Name
Tonko, Paul, David, Rep.,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General
 Other (specify) ▼
State: NY District: 20

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 47723699

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement

Category/
Type

Candidate Name
Neal, Richard, E., Rep.,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General
 Other (specify) ▼
State: MA District: 01

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 47723701

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Rodney For Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement

Category/
Type

Candidate Name
Davis, Rodney, L., Rep.,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General
 Other (specify) ▼
State: IL District: 13

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 47723703

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Schneider For Congress

Mailing Address PO Box 1318

City
Deerfield

State
IL

Zip Code
60015

Purpose of Disbursement

011

Category/
Type

Candidate Name

Schneider, Bradley, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C00495952

Transaction ID : 47723705

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tom O'Halleran For Congress

Mailing Address PO Box 63992

City
Phoenix

State
AZ

Zip Code
85082

Purpose of Disbursement

011

Category/
Type

Candidate Name

O'Halleran, Tom, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: AZ District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C00582890

Transaction ID : 47723706

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Vicente Gonzalez For Congress

Mailing Address PO Box 6270

City
Brownsville

State
TX

Zip Code
78523

Purpose of Disbursement

011

Category/
Type

Candidate Name

Gonzalez, Vicente, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: TX District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	2

FEC Identification Number

C00592659

Transaction ID : 47723707

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

4500.00

**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"/> 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, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wyden For Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2022

Mailing Address 1220 Sw Morrison St
Ste 910

City Portland State OR Zip Code 97205

FEC Identification Number

C C00308676

Transaction ID : 47723708

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement

011
Category/
Type

Candidate Name

Wyden, Ron, , Sen.,

Office Sought: House
 Senate
 President
State: OR District:

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

FEC Identification Number

C

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

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

2500.00

27500.00