

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (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 11 23 2010 through 12 31 2010

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

Type or Print Name of Treasurer R. James Huber

Signature of Treasurer Electronically Filed by R. James Huber Date 01 13 2011

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		29249.22
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	22807.93									
(c) Total Receipts (from Line 19)	3067.93	146513.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	25875.86	175762.56								
7. Total Disbursements (from Line 31)	3152.73	153039.43								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22723.13	22723.13								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Association of Chain Drug Stores Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	2551.72	116997.06
(ii) Unitemized	156.68	5956.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2708.40	122953.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	22000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2708.40	144953.50
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)	356.61	1534.56
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2.92	25.28
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3067.93	146513.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3067.93	146513.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	152.73	1968.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	152.73	1968.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	145000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	6070.50
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3152.73	153039.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3152.73	153039.43

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	2708.40	144953.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2708.40	144953.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	152.73	1968.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	356.61	1534.56
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-203.88	434.37

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 15	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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 Political Action Committee

A. Full Name (Last, First, Middle Initial)
National Association of Chain Drug Stores

Mailing Address 413 N. Lee Street

City	State	Zip Code
Alexandria	VA	22313-1480

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1534.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	1	0

Transaction ID: 32707769

Amount of Each Receipt this Period

356.61

Nov. 10 Bank Fees Reimbursement

SUBTOTAL of Receipts This Page (optional)	▶	356.61
TOTAL This Period (last page this line number only)	▶	356.61

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 15
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Mr. Don L. Bell, II

Mailing Address 413 N Lee St

City State Zip Code
Alexandria VA 22314-2301

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Senior Vice President, Legal Affairs a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1038.42

Date of Receipt: 12 / 31 / 2010
Transaction ID: PR1054895625047
Amount of Each Receipt this Period: 153.84
P/R Deduction (\$38.46 Bi-Weekly)

B.

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

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313-1480

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Vice President, Finance and Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
522.71

Date of Receipt: 12 / 31 / 2010
Transaction ID: PR1054896225047
Amount of Each Receipt this Period: 76.92
P/R Deduction (\$19.23 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mrs. Sandra Kay Guckian

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313-1480

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Vice President & Deputy Director, Stat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1312.50

Date of Receipt: 12 / 31 / 2010
Transaction ID: PR1054896925047
Amount of Each Receipt this Period: 192.32
P/R Deduction (\$48.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **423.08**

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

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

A.	Full Name (Last, First, Middle Initial) Ms. Rhoda Kelly	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address PO Box 1417-D49	Transaction ID: PR1054897025047
	City State Zip Code Alexandria VA 22313-1480	Amount of Each Receipt this Period 153.84
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Membership Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1041.63	

B.	Full Name (Last, First, Middle Initial) Mr. James A. Whitman	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address PO Box 1417-D49	Transaction ID: PR1054897925047
	City State Zip Code Alexandria VA 22313-1480	Amount of Each Receipt this Period 307.68
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$76.92 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Senior Vice President, Member Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2083.25	

C.	Full Name (Last, First, Middle Initial) Mr. Terrence Arth	Date of Receipt MM / DD / YYYY 12 / 31 / 2010
	Mailing Address PO Box 1417-D49	Transaction ID: PR1055162925047
	City State Zip Code Alexandria VA 22313-1480	Amount of Each Receipt this Period 44.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$11.00 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Meetings & Internation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.92	

SUBTOTAL of Receipts This Page (optional)	505.52
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 15
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Mr. Paul T. Kelly</p> <p>Mailing Address PO Box 1417-D49</p> <p>City State Zip Code <u>Alexandria</u> VA 22313-1480</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer National Association of Chain Drug Sto</p> <p>Occupation Vice President, Federal Legislative Af</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1565.16</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: PR1055164125047</p> <p>Amount of Each Receipt this Period 230.76</p> <p>P/R Deduction (\$57.69 Bi-Weekly)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	1	/	2	0	1	0												

<p>B. Full Name (Last, First, Middle Initial) Ms. Diane Darvey</p> <p>Mailing Address PO Box 1417-D49</p> <p>City State Zip Code <u>Alexandria</u> VA 22313-1480</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer National Association of Chain Drug Sto</p> <p>Occupation Director, Public Policy</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1043.44</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: PR1055165025047</p> <p>Amount of Each Receipt this Period 153.84</p> <p>P/R Deduction (\$38.46 Bi-Weekly)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	1	/	2	0	1	0												

<p>C. Full Name (Last, First, Middle Initial) Mr. Larry Lotridge</p> <p>Mailing Address PO Box 1417-D49</p> <p>City State Zip Code <u>Alexandria</u> VA 22313-1480</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer National Association of Chain Drug Sto</p> <p>Occupation Vice President, Conference Services</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 522.71</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Transaction ID: PR1055173625047</p> <p>Amount of Each Receipt this Period 76.92</p> <p>P/R Deduction (\$19.23 Bi-Weekly)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	1	/	2	0	1	0												

SUBTOTAL of Receipts This Page (optional)	461.52
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 15
(check only one)

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

A.

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

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313-1480

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Government Affairs & P

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1041.63

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: PR1055174725047

Amount of Each Receipt this Period
153.84

P/R Deduction (\$38.46 Bi-Weekly)

B.

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

Mailing Address 7577 Central Parke Blvd Ste 124

City State Zip Code
Mason OH 45040-6834

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547.77

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: PR1055176325047

Amount of Each Receipt this Period
80.76

P/R Deduction (\$20.19 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Ms. Julie Khani

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313-1480

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

Name of Employer National Association of Chain Drug Sto
Occupation Vice President, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1067.63

Date of Receipt
MM / DD / YYYY
12 / 31 / 2010

Transaction ID: PR1055177425047

Amount of Each Receipt this Period
157.68

P/R Deduction (\$39.42 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **392.28**

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

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

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

FOR LINE NUMBER: PAGE 11 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Yong Choe

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313-1480

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

Name of Employer: National Association of Chain Drug Sto
Occupation: Director, Federal Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.17

Date of Receipt: 12 / 31 / 2010
Transaction ID: PR1597971925047
 Amount of Each Receipt this Period: 38.48
 P/R Deduction (\$9.62 Bi-W-weekly)

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

Mailing Address 4855 Evergreen Lane N.

City State Zip Code
Plymouth MN 55442-2275

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.99

Date of Receipt: 12 / 31 / 2010
Transaction ID: PR2183668825047
 Amount of Each Receipt this Period: 38.48
 P/R Deduction (\$9.62 Bi-W-weekly)

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

Mailing Address PO Box 1417-D49

City State Zip Code
Alexandria VA 22313-1480

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

Name of Employer: National Association of Chain Drug Sto
Occupation: SVP, Marketing, Communications, & Medi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2040.18

Date of Receipt: 12 / 31 / 2010
Transaction ID: PR2231851425047
 Amount of Each Receipt this Period: 307.72
 P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 384.68

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 15
(check only one)

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

A. Full Name (Last, First, Middle Initial)
Ms. Christine M. Kopple

Mailing Address PO Box 1417-D49

City Alexandria State VA Zip Code 22313-1480

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 778.95

Date of Receipt 12 / 31 / 2010
Transaction ID: PR2257462225047
Amount of Each Receipt this Period 115.40
P/R Deduction (\$28.85 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ms. Nora Reich

Mailing Address PO Box 1417-D49

City Alexandria State VA Zip Code 22313-1480

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.54

Date of Receipt 12 / 31 / 2010
Transaction ID: PR2257462525047
Amount of Each Receipt this Period 38.48
P/R Deduction (\$9.62 Bi-W-ekly)

C. Full Name (Last, First, Middle Initial)
Mr. Marc Schloss

Mailing Address PO Box 1417-D49

City Alexandria State VA Zip Code 22313-1480

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

Name of Employer National Association of Chain Drug Sto
Occupation Director, Federal Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 519.21

Date of Receipt 12 / 31 / 2010
Transaction ID: PR2390680725047
Amount of Each Receipt this Period 76.92
P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 230.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 15	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Jennifer Anne Foley		Date of Receipt		
	Mailing Address 218 7th Street NE Apt B		M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 1 0		
	City Washington	State DC	Zip Code 20002-6075	Transaction ID: PR2489082325047	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84		
	Name of Employer National Association of Chain Drug Sto	Occupation Director, Political Affairs	P/R Deduction (\$38.46 Bi-Weekly)		

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.76

SUBTOTAL of Receipts This Page (optional)	▶	153.84
TOTAL This Period (last page this line number only)	▶	2551.72

**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 14 / 15

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

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

A.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: 32705788 Date of Disbursement 11 / 30 / 2010
	Mailing Address 1445 New York Ave, NW	
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 1.00
	Purpose of Disbursement 11/30/10 Check Image Fee	
	Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		11/30/10 Check Image Fee

B.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: 32830596 Date of Disbursement 12 / 31 / 2010
	Mailing Address 1445 New York Ave, NW	
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 140.73
	Purpose of Disbursement 12/31/10 Merchant Fees	
	Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		12/31/10 Merchant Fees

C.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: 32830597 Date of Disbursement 12 / 31 / 2010
	Mailing Address 1445 New York Ave, NW	
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 11.00
	Purpose of Disbursement 12/31/10 Acct. Analysis Fee/Ck. Imaging Fee	
	Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		12/31/10 Acct. Analysis Fee/Ck. Imaging Fee

SUBTOTAL of Disbursements This Page (optional)	152.73
TOTAL This Period (last page this line number only)	152.73

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Friends Of Max Baucus		Transaction ID: 32752583		
	Mailing Address PO Box 586		Date of Disbursement 12 / 20 / 2010		
	City Helena	State MT	Zip Code 59624	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement		011 Category/ Type		
	Candidate Name Sen. Max Baucus				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MT District:					

B.	Full Name (Last, First, Middle Initial) Dan Coats For Indiana		Transaction ID: 32752584		
	Mailing Address PO Box 301141		Date of Disbursement 12 / 20 / 2010		
	City Indianapolis	State IN	Zip Code 46230	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement		011 Category/ Type		
	Candidate Name Mr. Daniel Coats				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: IN District:					

C.	Full Name (Last, First, Middle Initial) Senate Majority Fund		Transaction ID: 32752585		
	Mailing Address 507 Capitol Court, NE, #100		Date of Disbursement 12 / 20 / 2010		
	City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement		011 Category/ Type		
	Candidate Name Senate Majority Fund				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

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