

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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1101 KING STREET
SUITE 600
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00144766
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 05 01 2011 through 05 31 2011

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 Mr. Craig A. Purser

Signature of Treasurer Electronically Filed by Mr. Craig A. Purser Date 06 15 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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 5 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

 To:

| | |
|---|---|
| M | M |
| 0 | 5 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table> | X | Y | Y | Y | 2 | 0 | 1 | 1 | | 100019.91 |
| X | Y | Y | Y | | | | | | | |
| 2 | 0 | 1 | 1 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 804821.56 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 28682.78 | 1330308.27 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 833504.34 | 1430328.18 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 226079.35 | 822903.19 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 607424.99 | 607424.99 | | | | | | | | |
| 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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 5 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

 To:

| | |
|---|---|
| M | M |
| 0 | 5 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 1 |

| 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) | 26790.00 | 1295525.00 |
| (ii) Unitemized | 200.00 | 22623.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 26990.00 | 1318148.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 5000.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 26990.00 | 1323148.00 |
| 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) | 1422.00 | 1422.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 5000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 270.78 | 738.27 |
| 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)) | 28682.78 | 1330308.27 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 28682.78 | 1330308.27 |

| 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..... | 79.35 | 403.19 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 79.35 | 403.19 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees..... and Other Political Committees..... | 226000.00 | 817500.00 |
| 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 | 5000.00 |
| (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 | 5000.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 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)).. | 226079.35 | 822903.19 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 226079.35 | 822903.19 |

| 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) | 26990.00 | 1323148.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 5000.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 26990.00 | 1318148.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 79.35 | 403.19 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 1422.00 | 1422.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | -1342.65 | -1018.81 |

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 / 40 |
| | <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) Mr. Scott L. Ramsden | Date of Receipt MM / DD / YYYY 05 / 05 / 2011 |
| | Mailing Address 6347 Patton Blvd. NE | Transaction ID: ABCABF014C3984C70A12 |
| | City State Zip Code Moses Lake WA 98837-3206 | Amount of Each Receipt this Period 840.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Occupation Midway Beverage, Inc. General Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 840.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) Mr. Gerald J. Streva | Date of Receipt MM / DD / YYYY 05 / 05 / 2011 |
| | Mailing Address 4512 W. Admiral Doyle Dr. | Transaction ID: A4CE702A0A8FF4C3EABE |
| | City State Zip Code New Iberia LA 70560-9133 | Amount of Each Receipt this Period 500.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Occupation Streva Distributing Co. of New Iberia President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Mr. Mark E. Danner | Date of Receipt MM / DD / YYYY 05 / 05 / 2011 |
| | Mailing Address 2701 Dow Ave. | Transaction ID: A92246EF08DE34CCDAD9 |
| | City State Zip Code Tustin CA 92780-7209 | Amount of Each Receipt this Period 5000.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Occupation Straub Distributing Co., Ltd. President/CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 6340.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: PAGE 7 / 40
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth C. Schirmang

Mailing Address 199 Shepard Ave.

City State Zip Code
Wheeling IL 60090-6021

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

Name of Employer Skokie Valley Beverage Co. Occupation CEO/President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2011

Transaction ID: ABEB09726DCE348F1941

Amount of Each Receipt this Period
1000.00

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

Mailing Address 199 Shepard Ave.

City State Zip Code
Wheeling IL 60090-6021

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

Name of Employer Skokie Valley Beverage Co. Occupation Sr. Vice President/Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2011

Transaction ID: A461B3486C74F41E58CD

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Anton T. Schirmang

Mailing Address 199 Shepard Ave.

City State Zip Code
Wheeling IL 60090-6021

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

Name of Employer Skokie Valley Beverage Co. Occupation Sr. Vice President/Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2011

Transaction ID: A01DFF5D5F59D42F6BF3

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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 / 40 |
| | <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Mr. William A. Schirmang | Date of Receipt MM / DD / YYYY 05 / 05 / 2011 |
| | Mailing Address 199 Shepard Ave. | Transaction ID: AC7D8BDBD6399425CBE2 |
| | City State Zip Code Wheeling IL 60090-6021 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Skokie Valley Beverage Co. | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |
| B. | Full Name (Last, First, Middle Initial) Mr. Milan Knezovich, II | Date of Receipt MM / DD / YYYY 05 / 05 / 2011 |
| | Mailing Address P.O. Box 29289 | Transaction ID: A44E5E40927234585B3D |
| | City State Zip Code Lincoln NE 68529-0289 | Amount of Each Receipt this Period 500.00 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer K & Z Distributing Inc. | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| C. | Full Name (Last, First, Middle Initial) Ms. Debra A. Niezer | Date of Receipt MM / DD / YYYY 05 / 05 / 2011 |
| | Mailing Address 909 Grant Ave. | Transaction ID: A91F57001012344599D2 |
| | City State Zip Code Fort Wayne IN 46803-1347 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer AALCO Distributing Co., Inc. | Occupation Chief Operating Officer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | 2500.00 |
| 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 / 40 |
| | <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Mr. Michael P. Runser | Date of Receipt MM / DD / YYYY 05 / 17 / 2011 |
| | Mailing Address P.O. Box 8 | Transaction ID: AC3ED3B43C57F448B980 |
| | City State Zip Code Oakland ME 04963-0008 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Valley Distributors Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Mr. Daniel B. Levine | Date of Receipt MM / DD / YYYY 05 / 17 / 2011 |
| | Mailing Address P.O. Box 9300 | Transaction ID: A2BB9F4F2675C48B29B3 |
| | City State Zip Code Renton WA 98057-9300 | Amount of Each Receipt this Period 5000.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer K & L Distributors Inc. Washington Div Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Mr. Eugene Kloss | Date of Receipt MM / DD / YYYY 05 / 17 / 2011 |
| | Mailing Address 1333 Northwestern Ave. | Transaction ID: A4BA658195DCB47FE80D |
| | City State Zip Code Gurnee IL 60031-2347 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Kloss Distributing Co. In-c. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00 | |

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|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 40
(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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Vail K. Miller, Jr.
Mailing Address 1247 Leo St.
City Dayton State OH Zip Code 45404-1660
FEC ID number of contributing federal political committee. **C**
Name of Employer Heidelberg Distributing Co. Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 05 / 17 / 2011
Transaction ID: A0BDA133238184CFFA02
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald M. Aughenbaugh
Mailing Address P.O. Box 30658
City Portland State OR Zip Code 97294-3658
FEC ID number of contributing federal political committee. **C**
Name of Employer Morgan Distributing Inc. Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 05 / 17 / 2011
Transaction ID: A7C1FE07C1F1448DA951
Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Mr. Dean H. Schmalz
Mailing Address 300 Creske Ave.
City Rothschild State WI Zip Code 54474-7973
FEC ID number of contributing federal political committee. **C**
Name of Employer Central Beer Distributors Inc. Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 05 / 19 / 2011
Transaction ID: AA29765CA89464DE7B32
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 6200.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 11 / 40
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard D. Craig

Mailing Address 7675 Kerrisand Drive

City Aurora State IN Zip Code 47001-9469

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

Name of Employer Southeastern Beverages In-c. Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2011
Transaction ID: A22780945A1FC4BCDADD
 Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. T. D. Magruder, Jr.

Mailing Address 12100 Intraplex Dr.

City Gulfport State MS Zip Code 39503-4624

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

Name of Employer Rex Distributing Co., Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 25 / 2011
Transaction ID: A4126770930104D42ACD
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. John F. Fisher

Mailing Address P.O. Box 569

City Plattsburgh State NY Zip Code 12901-0569

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

Name of Employer Plattsburgh Distributing Co. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2011
Transaction ID: AF079C90F02A04043AFD
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

TOTAL This Period (last page this line number only) ► 26790.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|--|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 12 / 40 | |
| | (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 |

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | | | |
|---|--|---|---|
| A. | Full Name (Last, First, Middle Initial) Virginia Department of Taxation | | Date of Receipt |
| | Mailing Address | | <input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2011"/> |
| | City | State | Zip Code |
| | FEC ID number of contributing federal political committee. | | C <input type="text"/> |
| | Name of Employer | | Occupation |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: AD695193364E844E9AB0 Amount of Each Receipt this Period <input type="text" value="1422.00"/> Refund of Overpayment of taxes to VDOT. | |
| Aggregate Year-to-Date ▼ | | <input type="text" value="1422.00"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="1422.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="1422.00"/> |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 13 / 40 | |
| | (check only one) | | | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) Sun Trust Bank | | Date of Receipt |
| Mailing Address 1445 New York Avenue, NW | | <input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Washington | DC | 20005-2108 |
| FEC ID number of contributing federal political committee. | | Transaction ID: AEB6E77FA17CD4E56B41 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer | | <input type="text" value="270.78"/> |
| Occupation | | Bank Interest: 5/1/11-5/3-1/11 |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="738.27"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="270.78"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="270.78"/> |

**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 / 40

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Sun Trust Bank

Mailing Address 1445 New York Avenue, NW

City Washington State DC Zip Code 20005-2108

Purpose of Disbursement
Bank Fees: 5/1/11-5/31/11

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: BB6334347B7784A5F9AE

Date of Disbursement

05 / 31 / 2011

Amount of Each Disbursement this Period

79.35

SUBTOTAL of Disbursements This Page (optional)

79.35

TOTAL This Period (last page this line number only)

79.35

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) STEVE FINCHER FOR CONGRESS</p> <p>Mailing Address PO BOX 11153</p> <p>City JACKSON State TN Zip Code 38308</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Steve Fincher</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BA229ABB284CF4CFE91E</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) TAMMY BALDWIN FOR CONGRESS</p> <p>Mailing Address P.O. Box 696</p> <p>City Madison State WI Zip Code 53701</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Tammy Baldwin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B91D1B2C0F77D45F7A99</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) PRICE FOR CONGRESS</p> <p>Mailing Address P.O. Box 425</p> <p>City Roswell State GA Zip Code 30077</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Thomas Edmunds Price</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B1CE7FE09EFC54D40BC2</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ►

12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) CHARLES BOUSTANY JR MD FOR CONGRESS INC</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Charles W. Boustany, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 07</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B6D0D97CB4B2C4CF1BD7</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) Rob Woodall for Congress</p> <p>Mailing Address PO Box 1871</p> <p>City State Zip Code Lawrenceville GA 30046</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Rob Woodall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 07</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B38F8EC7861FA4C92824</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS</p> <p>Mailing Address PO Box 701</p> <p>City State Zip Code Gainesville GA 30503</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. John Thomas Graves, JR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 09</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B83A738CA37CF4584B0A</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF TIM JOHNSON | Transaction ID: B5E0C53E82FFA4CA48C4 |
| | Mailing Address PO Box 17097 | Date of Disbursement 05 / 19 / 2011 |
| | City Urbana State IL Zip Code 61803 | Amount of Each Disbursement this Period 2500.00 |
| | Purpose of Disbursement Contribution to a Federal Candidate | Category/ Type |
| | Candidate Name Rep. Timothy V. Johnson | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 15 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. | Full Name (Last, First, Middle Initial) AUSTIN SCOTT FOR CONGRESS INC | Transaction ID: B4638A0E87D604214AED |
| | Mailing Address PO Box 27750 | Date of Disbursement 05 / 25 / 2011 |
| | City Macon State GA Zip Code 31221 | Amount of Each Disbursement this Period 2500.00 |
| | Purpose of Disbursement Contribution to a Federal Candidate | Category/ Type |
| | Candidate Name Rep. James Austin Scott | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. | Full Name (Last, First, Middle Initial) GARY MILLER FOR CONGRESS | Transaction ID: BC8EEE07FA4774971B96 |
| | Mailing Address 721 S. Brea Canyon Road, Suite 7 | Date of Disbursement 05 / 10 / 2011 |
| | City Diamond Bar State CA Zip Code 91789 | Amount of Each Disbursement this Period 5000.00 |
| | Purpose of Disbursement Contribution to a Federal Candidate | Category/ Type |
| | Candidate Name Rep. Gary G. Miller | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 42 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 10000.00 |
| 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)

PAGE 18 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) KINZINGER FOR CONGRESS <hr/> Mailing Address PO Box 1050 <hr/> City State Zip Code Bourbonnais IL 60914 <hr/> Purpose of Disbursement Contribution to a Federal Candidate <hr/> Candidate Name Rep. Adam Kinzinger <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 11 | Transaction ID: BD79ADCEF9AF440C4AD7 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) DAN LIPINSKI FOR CONGRESS <hr/> Mailing Address P.O. BOX 520 <hr/> City State Zip Code WESTERN SPRINGS IL 60558 <hr/> Purpose of Disbursement Contribution to a Federal Candidate <hr/> Candidate Name Rep. Daniel Lipinski <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 03 | Transaction ID: B5C98880ADE514646A92 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Landry for Louisiana <hr/> Mailing Address PO Box 13816 <hr/> City State Zip Code New Iberia LA 70562 <hr/> Purpose of Disbursement Contribution to a Federal Candidate <hr/> Candidate Name Rep. Jeffrey M. Landry <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District: 03 | Transaction ID: B743A2179C1C14207816 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)

PAGE 19 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) BRALEY FOR CONGRESS <hr/> Mailing Address PO Box 390 <hr/> City Waterloo State IA Zip Code 50704 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Bruce L. Braley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BBF1D8E0552C44D09821 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) SCHOCK FOR CONGRESS <hr/> Mailing Address PO Box 10555 <hr/> City Peoria State IL Zip Code 61612 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Aaron Schock <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BD99446D723CD4D38957 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) COMMITTE TO RE-ELECT ED TOWNS <hr/> Mailing Address 438 Lewis Avenue <hr/> City Brooklyn State NY Zip Code 11233 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Edolphus Towns <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BED72719AAD4B4981864 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ►

12500.00

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)

PAGE 20 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) WESTMORELAND FOR CONGRESS</p> <p>Mailing Address P.O. Box 458</p> <p>City State Zip Code Sharpsburg GA 30277</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Lynn A. Westmoreland</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B7A430BAC8F8C4360A29</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) Stivers For Congress</p> <p>Mailing Address 4679 WINTERSET DRIVE</p> <p>City State Zip Code COLUMBUS OH 43220</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Steve Stivers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BC63C14A624D3492DAFF</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) TOM ROONEY FOR CONGRESS</p> <p>Mailing Address 2336 S. East Ocean Blvd. #313</p> <p>City State Zip Code Stuart FL 34996</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Thomas Joe Rooney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BDECF8503F9B9468D99A</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) CASTOR FOR CONGRESS</p> <p>Mailing Address 301 W. Platt Street #385</p> <p>City Tampa State FL Zip Code 33606</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Kathy Castor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 11</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BE891379ADE7740BBAD8</p> <p>Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) Tim Griffin for Congress Campaign Committee</p> <p>Mailing Address P.O. Box 7526</p> <p>City Little Rock State AR Zip Code 72217</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Tim Griffin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BD7BCF94B149D46A191B</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) Stabenow For Us Senate</p> <p>Mailing Address P.O. BOX 4945</p> <p>City EAST LANSING State MI Zip Code 48826</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Sen. Debbie Stabenow</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B12AE5EE794214CF48D7</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) RODNEY ALEXANDER FOR CONGRESS INC. <hr/> Mailing Address 319 NANCY'S ROAD <hr/> City QUITMAN State LA Zip Code 71268 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Rodney Alexander <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 05 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BF641DAA5902D4FA2A8F Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| B. Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS <hr/> Mailing Address PO Box 1924 <hr/> City Muskogee State OK Zip Code 74402 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Dan Boren <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B4F1A460A53AC40D483C Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| C. Full Name (Last, First, Middle Initial) MCCOTTER CONGRESSIONAL COMMITTEE <hr/> Mailing Address PO Box 530788 <hr/> City Livonia State MI Zip Code 48153 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Thaddeus McCotter <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B25E5DC53AAB24B3483A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |

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| SUBTOTAL of Disbursements This Page (optional) | 7500.00 |
| 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)

PAGE 23 / 40

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) CHARLES BOUSTANY JR MD FOR CONGRESS INC</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Charles W. Boustany, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 07</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B4576A9EF3DBA4D1D9DE</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) KIND FOR CONGRESS COMMITTEE</p> <p>Mailing Address 205 5th Avenue South</p> <p>City State Zip Code La Crosse WI 54601</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Ron Kind</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BA974A4F99FFD44539DE</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) BILL JOHNSON FOR CONGRESS COMMITTEE</p> <p>Mailing Address 3755 HUNTERS HILL</p> <p>City State Zip Code POLAND OH 44514</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Bill Johnson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B4E12766A41424D20BB9</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) TIM MURPHY FOR CONGRESS <hr/> Mailing Address P.O. BOX 24551 <hr/> City PITTSBURGH State PA Zip Code 15234 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Tim F. Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BC9DCF0D14CD043FBAF2 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) BILL CASSIDY FOR CONGRESS <hr/> Mailing Address 8550 United Plaza Blvd. <hr/> City Baton Rouge State LA Zip Code 70809 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Bill Cassidy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B72450997FB8B43FC94A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) FRIENDS OF DAVE REICHERT <hr/> Mailing Address P. O. Box 53322 <hr/> City Bellevue State WA Zip Code 98015 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Dave G. Reichert <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B81D0C9D634EF40E898A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)

PAGE 25 / 40

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) CONYERS FOR CONGRESS</p> <p>Mailing Address 1831 Bay St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. John Conyers, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 14</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B60C197B4F92F47B587F</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) ED ROYCE FOR CONGRESS</p> <p>Mailing Address P.O. Box 2525</p> <p>City Orange State CA Zip Code 92859</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Ed R. Royce</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B02771190DB01408AA4E</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) ADRIAN SMITH FOR CONGRESS</p> <p>Mailing Address 3321 Avenue I</p> <p>City Scottsbluff State NE Zip Code 69361</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Adrian Smith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B1F260EFAA3534DE39A8</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) KILDEE FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box 317</p> <p>City Flint State MI Zip Code 48501</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Dale E. Kildee</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 05</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BE9C83E427DAB4913A21</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) CLAY JR. FOR CONGRESS</p> <p>Mailing Address P.O. BOX 4544</p> <p>City ST. LOUIS State MO Zip Code 63108</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. William Lacy Clay</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BA7E06D513F914EC3B7E</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) KISSELL FOR CONGRESS</p> <p>Mailing Address P.O. Box 1530</p> <p>City Biscoe State NC Zip Code 27209</p> <p>Purpose of Disbursement VOID-Cont to Fed. Cand. Orig Rpted in 4/20/2011 FEC Rpt</p> <p>Candidate Name Rep. Larry Kissell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B97FF998942594F2896D</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period -2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF BENNIE THOMPSON | Transaction ID: BBE3C860641694B3D9EC Date of Disbursement |
| | Mailing Address P.O. Box 100 | <input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="11"/> |
| | City Bolton State MS Zip Code 39041 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Contribution to a Federal Candidate | <input type="text" value="2500.00"/> |
| | Candidate Name Rep. Bennie G. Thompson | Category/ Type |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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|----|---|--|
| B. | Full Name (Last, First, Middle Initial) BILIRAKIS FOR CONGRESS | Transaction ID: B4E02EEC44A7E4626B38 Date of Disbursement |
| | Mailing Address PO Box 606 | <input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="11"/> |
| | City Tarpon Springs State FL Zip Code 34688 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Contribution to a Federal Candidate | <input type="text" value="2500.00"/> |
| | Candidate Name Rep. Gus Michael Bilirakis | Category/ Type |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 09 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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|----|---|--|
| C. | Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS | Transaction ID: B2CBC7C0FE3684D16AC9 Date of Disbursement |
| | Mailing Address 38 Risley Road | <input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="11"/> |
| | City Vernon State CT Zip Code 06066 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Contribution to a Federal Candidate | <input type="text" value="2500.00"/> |
| | Candidate Name Rep. Joe Courtney | Category/ Type |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="7500.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**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 28 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS <hr/> Mailing Address PO BOX 17192 <hr/> City FT MITCHELL State KY Zip Code 41017 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Geoff Davis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B73614885021243FABB7 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) PAUL TONKO FOR CONGRESS <hr/> Mailing Address 911 Central Avenue <hr/> City Albany State NY Zip Code 12206 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Paul D. Tonko <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B5050E6CBBEAD4D9AB7C Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) KISSELL FOR CONGRESS <hr/> Mailing Address P.O. Box 1530 <hr/> City Biscoe State NC Zip Code 27209 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Larry Kissell <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BCA0491C0842542F0811 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 7500.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS <hr/> Mailing Address 5915 Eastman Avenue Suite 100 <hr/> City Midland State MI Zip Code 48640 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Dave Camp <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BD494C222636040CC9F5 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Jon Runyan for Congress, Inc. <hr/> Mailing Address PO Box 225 <hr/> City Colonia State NJ Zip Code 07067 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Jon Runyan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B4A365BFA40FB4EF486C Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) KIND FOR CONGRESS COMMITTEE <hr/> Mailing Address 205 5th Avenue South <hr/> City La Crosse State WI Zip Code 54601 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Ron Kind <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B1145F340201E42C097A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | 7500.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) TODD AKIN FOR CONGRESS <hr/> Mailing Address PO BOX 31222 <hr/> City ST LOUIS State MO Zip Code 63131 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Todd Akin <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B88965D6DF7FE4946828 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) Bill Keating Committee; The <hr/> Mailing Address PO Box 690353 <hr/> City Quincy State MA Zip Code 02269 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. William R. Keating <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 10 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B14DCC82789C0462798F Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Benishek for Congress <hr/> Mailing Address 802 Pentoga Trail <hr/> City Crystal Falls State MI Zip Code 49920 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Daniel Benishek <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BBE527AACC7DF4AD689C Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 10000.00 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) CARNAHAN IN CONGRESS</p> <p>Mailing Address 7000 CHIPPEWA ST</p> <p>City ST LOUIS State MO Zip Code 63123</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Russ Carnahan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B11CC1E216B634A0EA4D</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) PASCRELL FOR CONGRESS INC.</p> <p>Mailing Address P.O. BOX 640</p> <p>City TOTOWA State NJ Zip Code 07511</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Bill J. Pascrell, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BE051154B92C642E5879</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) MICHAUD FOR CONGRESS</p> <p>Mailing Address 213 Lisbon St</p> <p>City Lewiston State ME Zip Code 04240</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Mike H. Michaud</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B8C5B5FA7C2054A77B65</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Richmond for Congress</p> <p>Mailing Address 1631 Elysian Fields Suite 150</p> <p>City New Orleans State LA Zip Code 70126</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Cedric L. Richmond</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B6DB97E0748ED4B79A9D</p> <p>Date of Disbursement 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS</p> <p>Mailing Address PO Box 3176</p> <p>City Long Branch State NJ Zip Code 07740</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Frank Pallone, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BF270929B82234BA78AA</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) CITIZENS FOR RUSH</p> <p>Mailing Address P. O. Box 7292</p> <p>City CHICAGO State IL Zip Code 60680</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Bobby L. Rush</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B621B72F131C34C49B4C</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) CANDICE MILLER FOR CONGRESS</p> <p>Mailing Address P.O. Box 182152</p> <p>City Shelby Township State MI Zip Code 48318</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Candice S. Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B1411B67655464340B91</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) KENNY MARCHANT FOR CONGRESS</p> <p>Mailing Address PO Box 110187</p> <p>City Carrollton State TX Zip Code 75011</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Kenny E. Marchant</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 24</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B403526133E674433AE2</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) SOUTHERLAND FOR CONGRESS</p> <p>Mailing Address PO BOX 1692</p> <p>City LYNN HAVEN State FL Zip Code 32444</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. William Steve Southerland, II</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B7C3715B131B94655A82</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) CLARKE FOR CONGRESS <hr/> Mailing Address 111-36 200th. Street <hr/> City Hollis State NY Zip Code 11412 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Yvette D. Clarke <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 11 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BBDA414E2CF744C478C0 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) PERLMUTTER FOR CONGRESS <hr/> Mailing Address 3440 Youngfield Street <hr/> City Wheat Ridge State CO Zip Code 80033 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Ed Perlmutter <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B4F1ADFF5E18C4FB7B6C Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) CARNAHAN IN CONGRESS <hr/> Mailing Address 7000 CHIPPEWA ST <hr/> City ST LOUIS State MO Zip Code 63123 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Russ Carnahan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BEED577D745FB48AEB96 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| | Category/ Type |
| | Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) BILL NELSON FOR U S SENATE</p> <p>Mailing Address 972 W WHITMIRE DRIVE</p> <p>City MELBOURNE State FL Zip Code 32935</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Sen. Bill Nelson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B1F438EC7769C43EFA87</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) WICKER FOR SENATE</p> <p>Mailing Address PO BOX 64</p> <p>City JACKSON State MS Zip Code 39205</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Sen. Roger F. Wicker</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B2D54CF2FB1D1432FBF9</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) KING FOR CONGRESS</p> <p>Mailing Address 116 N Main St.</p> <p>City Early State IA Zip Code 50535</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Steve A. King</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BBE6368C8ED5D47D4951</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) TED DEUTCH FOR CONGRESS COMMITTEE <hr/> Mailing Address 7777 Glades Rd, Ste 100 <hr/> City Boca Raton State FL Zip Code 33434 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Ted Deutch <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B2C06C7BA77D442F3839 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| B. Full Name (Last, First, Middle Initial) PASTOR FOR ARIZONA <hr/> Mailing Address PO Box 1978 <hr/> City Phoenix State AZ Zip Code 85001 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. Ed Pastor <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BC28EF0CC524546B785D Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |
| C. Full Name (Last, First, Middle Initial) FLEMING FOR CONGRESS <hr/> Mailing Address P.O. BOX 1236 <hr/> City MINDEN State LA Zip Code 71058 <hr/> Purpose of Disbursement Contribution to a Federal Candidate Candidate Name Rep. John Fleming <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BF783915402074832A35 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 2500.00 |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) | 10000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) CANTOR FOR CONGRESS</p> <p>Mailing Address P. O. Box 17813</p> <p>City Richmond State VA Zip Code 23226</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Eric Cantor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B1A3C780DE4E14D94807</p> <p>Date of Disbursement 05 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) TOM REED FOR CONGRESS</p> <p>Mailing Address 99 W 1st Street</p> <p>City Corning State NY Zip Code 14830</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Thomas W Reed, II</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B9A267E991BEC4CF7A51</p> <p>Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) Quayle for Congress</p> <p>Mailing Address 4247 N. 44th Street</p> <p>City Phoenix State AZ Zip Code 85018</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Ben Eugene Quayle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B1AE93D4B9C7E4F21870</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)

PAGE 38 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS</p> <p>Mailing Address 700 13th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Steny H. Hoyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BCF277E57E2CE4203A74</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 5000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) BRALEY FOR CONGRESS</p> <p>Mailing Address PO Box 390</p> <p>City Waterloo State IA Zip Code 50704</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Bruce L. Braley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B6CA588AFFC554943BD0</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS</p> <p>Mailing Address PO Box 437</p> <p>City Farmingville State NY Zip Code 11738</p> <p>Purpose of Disbursement Contribution to a Federal Candidate</p> <p>Candidate Name Rep. Timothy H. Bishop</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B592512EC876E46F1828</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> |

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|---|-----------------|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p>10000.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | |

**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 39 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) MAJORITY IN CONGRESS PAC Mailing Address 601 N Ferncreek Ave, Suite 200 City Orlando State FL Zip Code 32803 Purpose of Disbursement Contribution to a Leadership PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other2011 | Transaction ID: B0F7B7B35C8C74886ADD Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/ Type |
| | Category/ Type |
| B. Full Name (Last, First, Middle Initial) Every Republican is Crucial PAC Mailing Address 25 East Main Street Suite 200 City Richmond State VA Zip Code 23219 Purpose of Disbursement Contribution to a Leadership PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other2011 | Transaction ID: B9C52180B925D4A5EB58 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/ Type |
| | Category/ Type |
| C. Full Name (Last, First, Middle Initial) Republican Main Street Partnerhip PAC Mailing Address 1220 L Street NW Suite 100-263 City Washington State DC Zip Code 20005 Purpose of Disbursement Contribution to a Leadership PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other2011 | Transaction ID: BA6339A5263D94D5C876 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/ Type |
| | Category/ Type |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional) | 15000.00 |
| 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)

PAGE 40 / 40

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Green Mountain PAC <hr/> Mailing Address PO Box 1142 <hr/> City Montpelier State VT Zip Code 05601 <hr/> Purpose of Disbursement Contribution to a Leadership PAC Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2011 | Transaction ID: BB9CB31C7CC8446D69FA Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |
| B. Full Name (Last, First, Middle Initial) DAWG PAC <hr/> Mailing Address PO BOX 83142 <hr/> City GAITHERSBURG State MD Zip Code 20883 <hr/> Purpose of Disbursement Contribution to a Leadership PAC Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2011 | Transaction ID: BAF2E3B31B615444BB80 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1 |
| | Amount of Each Disbursement this Period 5000.00 |

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

226000.00