

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1600 Duke Street  
 Check if different than previously reported. (ACC)  
Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00126763  
**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 04 01 2006 through 06 30 2006

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. Lyle Beckwith

Signature of Treasurer Electronically Filed by Mr. Lyle Beckwith Date 10 02 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
National Association of Convenience Stores Political Action Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		271013.89
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	392951.38									
(c) Total Receipts (from Line 19) .....	63406.69	305312.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	456358.07	576325.92								
7. Total Disbursements (from Line 31) .....	226635.43	346603.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	229722.64	229722.64								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
National Association of Convenience Stores Political Action Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	60234.29	282845.32
(i) Itemized (use Schedule A) .....	460.16	1069.79
(ii) Unitemized .....	60694.45	283915.11
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	16400.00
(c) Other Political Committees (such as PACs) .....	60694.45	300315.11
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
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) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	668.40	668.40
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2043.84	4328.52
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)) .....	63406.69	305312.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	63406.69	305312.03

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	219500.00	334500.00
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 .....	1250.00	1435.00
(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)) .....	1250.00	1435.00
29. Other Disbursements.....	5885.43	10668.28
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))..	226635.43	346603.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	226635.43	346603.28

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	60694.45	300315.11
34. Total Contribution Refunds (from Line 28(d)) .....	1250.00	1435.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	59444.45	298880.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Cliff Thomas, Jr. Mailing Address P.O. Box 1876 City State Zip Code Victoria TX 77902 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 6 <b>Transaction ID: 23837706</b> Amount of Each Receipt this Period 5000.00
Name of Employer: Speedy Stop Food Stores Occupation: Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Elizabeth Bogart Mailing Address 1605 King Street City State Zip Code Alexandria VA 22314-2726 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6 <b>Transaction ID: 23894278</b> Amount of Each Receipt this Period 38.47
Name of Employer: National Association of Convenience St Occupation: VP Industry Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 307.76		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. John Eichberger Mailing Address 1600 Duke Street City State Zip Code Alexandria VA 22314-3466 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6 <b>Transaction ID: 23894279</b> Amount of Each Receipt this Period 96.15
Name of Employer: National Association Occupation: VP Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 769.20		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5134.62</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Brian Kimmel		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 1600 Duke Street		<b>Transaction ID:</b> 23894282	
City State Zip Code Alexandria VA 22314-3466		Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association Occupation CFO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 307.76	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Charles Barnard, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6	
Mailing Address 114436 Bayhill Way		<b>Transaction ID:</b> 23908360	
City State Zip Code Indianapolis IN 46236-9235		Amount of Each Receipt this Period 365.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Village Pantry, LLC Occupation Chief Staff Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Randall Sheetz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6	
Mailing Address 5700 Sixth Avenue		<b>Transaction ID:</b> 23908361	
City State Zip Code Altoona PA 16602-1199		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sheetz, Inc. Occupation Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2903.47
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark Courtney

Mailing Address 5087 South Royal Atlanta Drive

City State Zip Code  
Tucker GA 30084-3019

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

Name of Employer  
Flowers Foods Snack Group LLC

Occupation  
Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: 23908363

Amount of Each Receipt this Period  
365.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert G. Gordon

Mailing Address 212 Northern Avenue (Suite 303)  
West Building

City State Zip Code  
Boston MA 02210-2049

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

Name of Employer  
Tierra Java LLC

Occupation  
Former President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 6

Transaction ID: 23908364

Amount of Each Receipt this Period  
365.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tom Wake

Mailing Address 280 W. Shuman Blvd., Ste. 280  
P.O. Box 3067

City State Zip Code  
Naperville IL 60566

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

Name of Employer  
Eby-Brown Company LLC

Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 6

Transaction ID: 23908365

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1730.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Kerley LeBoeuf		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6	
Mailing Address 1600 Duke Street		<b>Transaction ID:</b> 23908367	
City Alexandria	State VA	Amount of Each Receipt this Period 250.00	
Zip Code 22314-3466			
FEC ID number of contributing federal political committee. C			
Name of Employer National Association	Occupation Past President 1980		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. John M. MacDougall		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 6	
Mailing Address 7840 Oxbow Rd.		<b>Transaction ID:</b> 23908519	
City Canastota	State NY	Amount of Each Receipt this Period 625.00	
Zip Code 13032			
FEC ID number of contributing federal political committee. C			
Name of Employer Nice N Easy	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. W. Merlin Maxey		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 6	
Mailing Address 206 McFarland St.		<b>Transaction ID:</b> 23908520	
City Kerrville	State TX	Amount of Each Receipt this Period 365.00	
Zip Code 78028-4427			
FEC ID number of contributing federal political committee. C			
Name of Employer Max-E-Stores, Inc.	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1240.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Jim White		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 6
Mailing Address 1503 North Tibbs Road		<b>Transaction ID:</b> 23908521
City State Zip Code Dalton GA 30720	Amount of Each Receipt this Period 365.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Calfee Co. of Dalton, Inc.	Occupation Store Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Edward J. Roitz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 6
Mailing Address P.O. Box 1 4000 Parkview Drive		<b>Transaction ID:</b> 23908522
City State Zip Code Pittsburg KS 66762-0001	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Fleming Corporation of Kansas	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Whitney Spinks		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address PO Box 8624		<b>Transaction ID:</b> 23935492
City State Zip Code Greenville SC 29604-8624	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Spinx Oil Company	Occupation Son of President of Spinks Oil	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6365.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. W. Alvin New		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6	
Mailing Address P.O. Box 5581		<b>Transaction ID:</b> 23935793	
City State Zip Code San Angelo TX 76902-5581	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Town & Country Food	Occupation Senior Staff		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Scott Hill		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address P.O. Box 397 One Snackfood Lane		<b>Transaction ID:</b> 23986459	
City State Zip Code Minong WI 54859-0397	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Link Snacks Incorporated	Occupation VP Convenience Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. William C. Girard, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 6	
Mailing Address 10025 S.W. Allen Blvd.		<b>Transaction ID:</b> 23986461	
City State Zip Code Beaverton OR 97005	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Plaid Pantries, Inc.	Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lyle Beckwith		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6	
Mailing Address 1600 Duke Street		<b>Transaction ID:</b> 23986463	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association of Convenience St	Occupation Sr. V.P., Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Samuel Turner		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 1503 North Tibbs Road		<b>Transaction ID:</b> 23986464	
City State Zip Code Dalton GA 30720-2971	Amount of Each Receipt this Period 1250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Calfee Co. of Dalton, Inc.	Occupation Chief Staff Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. W. David Tucker		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 1600 Duke Street		<b>Transaction ID:</b> 24024105	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period 38.47		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association of Convenience St	Occupation Sr. V.P. Industry Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.76		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3788.47
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. SunTrust Capital Markets</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address 303 Peachtree Street ATTN: MC3907 25th Floor		<b>Transaction ID: 24026853</b>
City Atlanta State GA Zip Code 30308-3201	Amount of Each Receipt this Period 1078.70	
FEC ID number of contributing federal political committee. <b>C</b>	Interest April 2006	
Name of Employer SunTrust Capital Markets Occupation	Aggregate Year-to-Date ▼ 3324.43	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ms. Elizabeth Bogart</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1605 King Street		<b>Transaction ID: 24054443</b>
City Alexandria State VA Zip Code 22314-2726	Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer National Association of Convenience St Occupation VP Industry Affairs	Aggregate Year-to-Date ▼ 346.23	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. John Eichberger</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 1600 Duke Street		<b>Transaction ID: 24054581</b>
City Alexandria State VA Zip Code 22314-3466	Amount of Each Receipt this Period 96.15	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer National Association Occupation VP Government Relations	Aggregate Year-to-Date ▼ 865.35	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1213.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Richard Oneslager		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 9171 East Arapahoe Road		<b>Transaction ID:</b> 24057546	
City State Zip Code Englewood CO 80112	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Balmar Petroleum	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Michael W. Griffith		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 1150 Wall Street		<b>Transaction ID:</b> 24057547	
City State Zip Code Bogart GA 30622	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Golden Pantry Food Stores Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Guy N. Oliver		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address P.O. Box 3338		<b>Transaction ID:</b> 24057549	
City State Zip Code Austin TX 78764	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MTG Management	Occupation Chief Staff Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Stephen Loehr Mailing Address 1626 Oak Street City La Crosse State WI Zip Code 54602 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID: 24057552</b> Amount of Each Receipt this Period 250.00
Name of Employer Kwik Trip, Inc. Occupation Office Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Sonja Hubbard Mailing Address 602 West Falvey P.O. Box 1426 City Texarkana State TX Zip Code 75501-6627 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID: 24057553</b> Amount of Each Receipt this Period 1250.00
Name of Employer E-Z Mart Stores, Inc. Occupation Chief Staff Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. James Tudor Mailing Address P.O. Box 855 City Snellville State GA Zip Code 30278-0855 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 <b>Transaction ID: 24057554</b> Amount of Each Receipt this Period 1250.00
Name of Employer Georgia Association of Convenience Sto Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 54
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Max Lenker

Mailing Address P.O. Box 105035

City State Zip Code  
Atlanta GA 30348

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

Name of Employer RaceTrac Petroleum, Inc. Occupation Chief Staff Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** 24057557

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wally Emery

Mailing Address 1188 Wigwam Parkway

City State Zip Code  
Henderson NV 89074-8154

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

Name of Employer Speedee Mart Inc. Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** 24057562

Amount of Each Receipt this Period  
1250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Sherolyn Jo Emery

Mailing Address 1188 Wigwam Parkway

City State Zip Code  
Henderson NV 89074-8154

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

Name of Employer Speedee Mart Inc. Occupation Store Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 6

**Transaction ID:** 24057563

Amount of Each Receipt this Period  
1250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Daniel Abraham		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 3925 Fortune Blvd. P.O. Box 5947		<b>Transaction ID:</b> 24057565
City State Zip Code Saginaw MI 48603-2287	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Garb-Ko, Inc.	Occupation Chief Staff Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. J. Scott Apter		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1224 Long Run Road		<b>Transaction ID:</b> 24057568
City State Zip Code McKeesport PA 15131-2035	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Apter Industries Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jay Ricker		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address P.O. Box 150		<b>Transaction ID:</b> 24057570
City State Zip Code Anderson IN 46015-0150	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ricker Oil Co.	Occupation Chief Staff Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David Deddens		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 27968 S.R. #1		Transaction ID: 24057571	
City West Harrison	State IN	Zip Code 47060	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer 3-D Mart, Inc.	Occupation Top Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Mike Roos		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address Three Lakes Dr		Transaction ID: 24057575	
City Northfield	State IL	Zip Code 60093-2753	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kraft Foods	Occupation VP C-Store Channel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Marilyn Fox		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6	
Mailing Address 126 E. Second Street P.O. Box 946		Transaction ID: 24057634	
City Perrysburg	State OH	Zip Code 43552	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer J.F. Enterprises Inc. dba	Occupation Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Logan Thomas		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 936 Grand Ave. P.O. Box W		<b>Transaction ID:</b> 24057637	
City State Zip Code Beattyville KY 41311-9077	Amount of Each Receipt this Period 365.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Thomas Investments, Inc.	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. W. A. Krause		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6400 Westown Parkway		<b>Transaction ID:</b> 24057693	
City State Zip Code West Des Moines IA 50266	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Krause Gentle Corporation	Occupation Top Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Nichole Cross Torsey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address P.O. Box 491687		<b>Transaction ID:</b> 24198539	
City State Zip Code Redding CA 96049	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mt. Counties Supply Co.	Occupation Risk Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5365.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Doug DuBois, Jr.		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2006	
Mailing Address 701 West 15th Street		<b>Transaction ID:</b> 24198543	
City State Zip Code Austin TX 78701-1503	Amount of Each Receipt this Period 365.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Texas Petroleum Marketing & Convenienc	Occupation Director, Membership & Education		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Chris Tampio		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2006	
Mailing Address 1600 Duke St		<b>Transaction ID:</b> 24198547	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer NACS	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Dae Kim		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2006	
Mailing Address 1600 Duke Street		<b>Transaction ID:</b> 24198548	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period 635.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association	Occupation Director Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. W. Geoffrey Lyden, III

Mailing Address 5565 Airport Highway

City Toledo State OH Zip Code 43615-7379

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

Name of Employer True North Management LLC Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: 24198549

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark E. Lyden

Mailing Address 5565 Airport Highway

City Toledo State OH Zip Code 43615

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

Name of Employer True North Management, LLC Occupation Top Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: 24198550

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Traver James Powers

Mailing Address 4605 Deanscroft Drive

City Charlotte State NC Zip Code 28226-3291

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

Name of Employer Kellog's Company Occupation Region Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 6

Transaction ID: 24198551

Amount of Each Receipt this Period  
365.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>865.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Lester Stewart Spinks		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 8624		<b>Transaction ID:</b> 24198552
City State Zip Code Greenville SC 29604-8624	Amount of Each Receipt this Period 4900.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer The Spinx Company, Inc.	Occupation Top Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4900.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Dean Onken		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 1751 Hwy. 30 East Box 368		<b>Transaction ID:</b> 24313784
City State Zip Code Carroll IA 51401-2671	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Farmer Bocken Company	Occupation V.P. Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Chasuk		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 2670		<b>Transaction ID:</b> 24313966
City State Zip Code Napa CA 94558-0528	Amount of Each Receipt this Period 365.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Napa Valley Petroleum	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6265.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Dan Custred		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 6	
Mailing Address 8101 Ridgepoint Dr		Transaction ID: 24314376	
City Irving	State TX	Zip Code 75063-3158	Amount of Each Receipt this Period 365.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer U.S. Smokeless Tobacco Company	Occupation Regional Chain Acct. Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Steve Salstrom		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 206 S. Cherokee Lane Ext.		Transaction ID: 24314888	
City Woodstock	State GA	Zip Code 30188	Amount of Each Receipt this Period 365.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer C First, Inc.	Occupation Chief Staff Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. W. David Tucker		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 1600 Duke Street		Transaction ID: 24318174	
City Alexandria	State VA	Zip Code 22314-3466	Amount of Each Receipt this Period 38.47
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association of Convenience St	Occupation Sr. V.P. Industry Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.23		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	768.47
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Elizabeth J. landoli

Mailing Address 505 Pleasant Street

City Worcester State MA Zip Code 01609-1894

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

Name of Employer Honey Farms Inc. Occupation Spouse of honey Farms President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 1 / 2 0 0 6

Transaction ID: 24691323

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$1250.00 This changes the YTD Total to \$0-.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. W. David Tucker

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314-3466

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

Name of Employer National Association of Convenience St Occupation Sr. V.P. Industry Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.11

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

Transaction ID: PR1148614714553

Amount of Each Receipt this Period  
153.88

P/R Deduction (\$38.47 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gray Taylor

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314-3466

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

Name of Employer National Association Occupation VP Research

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.11

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

Transaction ID: PR1793326914553

Amount of Each Receipt this Period  
230.82

P/R Deduction (\$38.47 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>384.70</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Steven J. Montgomery		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 240 Dover Circle, Suite 101		<b>Transaction ID:</b> PR484546814553	
City State Zip Code Lake Forest IL 60045-3490	Amount of Each Receipt this Period _____ 365.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer b2b Solutions, LLC	Occupation Chief Staff Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 365.00		P/R Deduction (\$0.00 )

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Henry O. Armour		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address La Choumine #7 -- c/o Renezvous Mo P.O. Box 11338		<b>Transaction ID:</b> PR484572814553	
City State Zip Code Jackson WY 83002	Amount of Each Receipt this Period _____ 1250.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer National Association	Occupation President and CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2500.00		P/R Deduction (\$1250.00 )

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Eichberger		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1600 Duke Street		<b>Transaction ID:</b> PR486394214553	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period _____ 384.60		
FEC ID number of contributing federal political committee. C _____			
Name of Employer National Association	Occupation VP Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1249.95		P/R Deduction (\$96.15 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1999.60</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Ms. Elizabeth Bogart</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1605 King Street		<b>Transaction ID: PR486668714553</b>	
City State Zip Code Alexandria VA 22314-2726	Amount of Each Receipt this Period _____ 38.47		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association of Convenience St	Occupation VP Industry Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 384.70		P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Mr. Brian Kimmel</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1600 Duke Street		<b>Transaction ID: PR486842014553</b>	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period _____ 192.35		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association	Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.11		P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Ms. Jane Berzan</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1600 Duke Street		<b>Transaction ID: PR677535014553</b>	
City State Zip Code Alexandria VA 22314-3466	Amount of Each Receipt this Period _____ 230.82		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Association	Occupation VP Supplier Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.11		P/R Deduction (\$38.47 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>461.64</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____ <b>60234.29</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 54
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
SunTrust Capital Markets

Mailing Address 303 Peachtree Street  
ATTN: MC3907 25th Floor

City Atlanta State GA Zip Code 30308-3201

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

Name of Employer SunTrust Capital Markets Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4467.82

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 6

Transaction ID: 24259673

Amount of Each Receipt this Period  
1143.39

**B.** Full Name (Last, First, Middle Initial)  
SunTrust Capital Markets

Mailing Address 303 Peachtree Street  
ATTN: MC3907 25th Floor

City Atlanta State GA Zip Code 30308-3201

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

Name of Employer SunTrust Capital Markets Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5355.24

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 24317327

Amount of Each Receipt this Period  
887.42

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2030.81
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2030.81

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 54
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Friends Of Zach Wamp

Mailing Address P.O. Box 24804  
651 E. Fourth St. Suite 200

City State Zip Code  
Chattanooga TN 37422

FEC ID number of contributing federal political committee. **C** C00300681

Name of Employer Occupation

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
668.40

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	0	6

Transaction ID: 24313145

Amount of Each Receipt this Period  
668.40

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	668.40
<b>TOTAL</b> This Period (last page this line number only) .....	▶	668.40

**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 29 / 54

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

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

Full Name (Last, First, Middle Initial) <b>A. Sweeney For Congress</b>		Transaction ID: 23783151 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 6
Mailing Address c/o Mike Burton -Finance Director 1526 17th Street, NW, Suite 212		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20036		
Purpose of Disbursement	011 Category/ Type	
Candidate Name John E. Sweeney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Marsha Blackburn For Congress Inc.</b>		Transaction ID: 23787570 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 6
Mailing Address PO Box 682185		Amount of Each Disbursement this Period 2500.00
City Franklin State TN Zip Code 37068		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Marsha Blackburn Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 7 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Cantor For Congress</b>		Transaction ID: 23807854 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6
Mailing Address 4914 Fitzhugh Ave Ste 202		Amount of Each Disbursement this Period 5000.00
City Richmond State VA Zip Code 23230		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Eric I. Cantor Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 7 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> 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 30 / 54

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

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

Full Name (Last, First, Middle Initial) <b>A. Cantor For Congress</b>		Transaction ID: 23807856 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 6	
Mailing Address 4914 Fitzhugh Ave Ste 202		Amount of Each Disbursement this Period 5000.00	
City Richmond State VA Zip Code 23230	Purpose of Disbursement 011 Category/Type		
Candidate Name Eric I. Cantor			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

Full Name (Last, First, Middle Initial) <b>B. John Ensign for U.S. Senate</b>		Transaction ID: 23826177 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address P.O. Box 26568		Amount of Each Disbursement this Period 5000.00	
City Las Vegas State NV Zip Code 89126	Purpose of Disbursement 011 Category/Type		
Candidate Name John Ensign			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

Full Name (Last, First, Middle Initial) <b>C. McCrery for Congress</b>		Transaction ID: 23826175 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address P.O. Box 4650		Amount of Each Disbursement this Period 2000.00	
City Shreveport State LA Zip Code 71134	Purpose of Disbursement 011 Category/Type		
Candidate Name Jim McCrery			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Citizens for Arlen</b>		<b>Transaction ID: 23875569</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
Mailing Address 3700 Massachusetts Ave Suite 108		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20016		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Arlen Specter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Citizens for Arlen</b>		<b>Transaction ID: 23916335</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address 3700 Massachusetts Ave Suite 108		Amount of Each Disbursement this Period -5000.00
City Washington State DC Zip Code 20016		
Purpose of Disbursement Void - Citizens for Arlen	011 Category/ Type	
Candidate Name Arlen Specter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2010 Congressional P	

Full Name (Last, First, Middle Initial) <b>C. Citizens for Arlen</b>		<b>Transaction ID: 23931084</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 3700 Massachusetts Ave Suite 108		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20016		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Arlen Specter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 1	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2010 Primary Congres	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Putnam for Congress</b>		<b>Transaction ID: 23931086</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address PO Box 2257		Amount of Each Disbursement this Period 1000.00
City Bartow State FL Zip Code 33831	Purpose of Disbursement 011 Category/Type	
Candidate Name Adam Hughes Putnam	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Friends Of Craig Thomas</b>		<b>Transaction ID: 23931091</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 3907 Dorsel Ct		Amount of Each Disbursement this Period 3000.00
City Casper State WY Zip Code 82609	Purpose of Disbursement 011 Category/Type	
Candidate Name Craig Thomas	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JOHN BOEHNER</b>		<b>Transaction ID: 23935800</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 7908-I CINCINNATI DAYTON ROAD		Amount of Each Disbursement this Period 2500.00
City WEST CHESTER State OH Zip Code 45069	Purpose of Disbursement 011 Category/Type	
Candidate Name John A. Boehner	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 8	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Northern Lights PAC</b>		<b>Transaction ID: 23935578</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 1537 Shipsview Road		Amount of Each Disbursement this Period 5000.00
City Annapolis State MD Zip Code 21401	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Nelson 2006</b>		<b>Transaction ID: 23947804</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 426 C Street NE		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement		
Candidate Name E. Benjamin (Be Nelson)		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Republican National Committee Majority Fund</b>		<b>Transaction ID: 23954986</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 310 First Street, SE		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	23000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Committee to Re-Elect Ed Towns</b>		<b>Transaction ID:</b> 23979894 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 360 Clinton Avenue # 6 R		Amount of Each Disbursement this Period 3000.00
City Brooklyn State NY Zip Code 11238		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Edolphus Towns		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jon Kyl For U S Senate</b>		<b>Transaction ID:</b> 23980216 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 4442 E Camelback Road #160		Amount of Each Disbursement this Period 1000.00
City Phoenix State AZ Zip Code 85018		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Jon Kyl		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Roger Wicker</b>		<b>Transaction ID:</b> 23979572 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address P.O. Box 874		Amount of Each Disbursement this Period 1000.00
City Tupelo State MS Zip Code 38802		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Roger Wicker		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 1	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Hall for Congress Committee</b>		Transaction ID: 23979885 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address P.O. Box 711		Amount of Each Disbursement this Period 5000.00	
City Rockwall	State TX	Zip Code 75087	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	
Candidate Name Ralph M. Hall			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 4		

Full Name (Last, First, Middle Initial) <b>B. Bill Shuster for Congress</b>		Transaction ID: 23980038 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address P.O. Box 27		Amount of Each Disbursement this Period 2000.00	
City Hollidaysburg	State PA	Zip Code 16648	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Bill Shuster			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 9		

Full Name (Last, First, Middle Initial) <b>C. ERIC PAC</b>		Transaction ID: 23983312 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6	
Mailing Address (Eric Cantor's Leadership PAC) 209 Pennsylvania Avenue, SE		Amount of Each Disbursement this Period 5000.00	
City Washington	State DC	Zip Code 20003	011 Category/ Type
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> 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

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(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Charles Boustany Jr Md For Congress Inc</b>		<b>Transaction ID: 23983304</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address Post Office Box 80126		Amount of Each Disbursement this Period 1000.00
City Lafayette State LA Zip Code 70598	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Charles Boustany, Jr.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 7	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Brian Bilbray For Congress</b>		<b>Transaction ID: 23980263</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 2466 Unicornio Street		Amount of Each Disbursement this Period 5000.00
City Carlsbad State CA Zip Code 92009	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Brian Bilbray		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends For Mike McGavick</b>		<b>Transaction ID: 23980737</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address PO Box 9247		Amount of Each Disbursement this Period 5000.00
City Seattle State WA Zip Code 98109	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Michael McGavick		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Tim Murphy For Congress</b>		Transaction ID: 23987501 Date of Disbursement 05 / 11 / 2006	
Mailing Address PO Box 24551		Amount of Each Disbursement this Period 2500.00	
City Pittsburgh	State PA	Zip Code 15234	011 Category/ Type
Purpose of Disbursement			
Candidate Name Mr. Tim Murphy			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 18		

Full Name (Last, First, Middle Initial) <b>B. Tim Murphy For Congress</b>		Transaction ID: 23987724 Date of Disbursement 05 / 11 / 2006	
Mailing Address PO Box 24551		Amount of Each Disbursement this Period -2500.00	
City Pittsburgh	State PA	Zip Code 15234	011 Category/ Type
Purpose of Disbursement Void - Tim Murphy For Congress			
Candidate Name Mr. Tim Murphy			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 18		
		Void - Tim Murphy For Congress	

Full Name (Last, First, Middle Initial) <b>C. Tim Murphy For Congress</b>		Transaction ID: 23987734 Date of Disbursement 05 / 11 / 2006	
Mailing Address PO Box 24551		Amount of Each Disbursement this Period 2500.00	
City Pittsburgh	State PA	Zip Code 15234	011 Category/ Type
Purpose of Disbursement			
Candidate Name Mr. Tim Murphy			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 18		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Citizens For Gillmor</b>		Transaction ID: 24021983 Date of Disbursement 05 / 15 / 2006	
Mailing Address PO Box 910		Amount of Each Disbursement this Period 1000.00	
City Port Clinton	State OH	Zip Code 43452	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	
Candidate Name Paul E. Gillmor			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 5		

Full Name (Last, First, Middle Initial) <b>B. Friends Of Mark Foley For Congress</b>		Transaction ID: 24021982 Date of Disbursement 05 / 15 / 2006	
Mailing Address 1316 Lake Victoria Dr		Amount of Each Disbursement this Period 1000.00	
City Lake Worth	State FL	Zip Code 33461	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Mark Foley			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 16		

Full Name (Last, First, Middle Initial) <b>C. Pickering for Congress</b>		Transaction ID: 24021979 Date of Disbursement 05 / 15 / 2006	
Mailing Address 811 Chetworth Place		Amount of Each Disbursement this Period 2000.00	
City Alexandria	State VA	Zip Code 22314	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Charles W. Pickering			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MS District: 3		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Tom Feeney For Congress</b>		<b>Transaction ID:</b> 24022117 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address 1420 Alafaya Trail #103		Amount of Each Disbursement this Period 2500.00
City Oviedo State FL Zip Code 32765	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Tom Feeney		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	

Full Name (Last, First, Middle Initial) <b>B. Doris Matsui for Congress</b>		<b>Transaction ID:</b> 24021980 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 1738		Amount of Each Disbursement this Period 2500.00
City Sacramento State CA Zip Code 95812	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Doris Matsui		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	

Full Name (Last, First, Middle Initial) <b>C. Cathy McMorris For Congress</b>		<b>Transaction ID:</b> 24021970 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address Box 137		Amount of Each Disbursement this Period 2500.00
City Spokane State WA Zip Code 99210	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Cathy McMorris		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> 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 Association of Convenience Stores Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Boren For Congress 2006</b>		Transaction ID: 24013932 Date of Disbursement 05 / 15 / 2006	
Mailing Address PO Box 1924		Amount of Each Disbursement this Period 1500.00	
City Muskogee State OK Zip Code 74401	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Daniel Boren			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Friends Of Zach Wamp</b>		Transaction ID: 24021996 Date of Disbursement 05 / 15 / 2006	
Mailing Address P.O. Box 24804 651 E. Fourth St. Suite 200		Amount of Each Disbursement this Period 5000.00	
City Chattanooga State TN Zip Code 37422	Purpose of Disbursement 011 Category/ Type		
Candidate Name Rep. Zach Wamp			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Committee to Re-Elect Ed Towns</b>		Transaction ID: 24023244 Date of Disbursement 05 / 16 / 2006	
Mailing Address 360 Clinton Avenue # 6 R		Amount of Each Disbursement this Period 5000.00	
City Brooklyn State NY Zip Code 11238	Purpose of Disbursement 011 Category/ Type		
Candidate Name Edolphus Towns			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Nelson 2006</b>		Transaction ID: 24025647 Date of Disbursement 05 / 16 / 2006	
Mailing Address 426 C Street NE		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/ Type	Candidate Name E. Benjamin (Be Nelson)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

Full Name (Last, First, Middle Initial) <b>B. Melissa Bean For Congress</b>		Transaction ID: 24022790 Date of Disbursement 05 / 16 / 2006	
Mailing Address 426 C Street NE		Amount of Each Disbursement this Period 2500.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/ Type	Candidate Name Rep. Melissa Bean	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

Full Name (Last, First, Middle Initial) <b>C. Ben Chandler For Congress</b>		Transaction ID: 24027230 Date of Disbursement 05 / 16 / 2006	
Mailing Address P. O. Box 12678		Amount of Each Disbursement this Period 1000.00	
City Lexington State KY Zip Code 40508	Purpose of Disbursement 011 Category/ Type	Candidate Name Rep. Benjamin Chandler	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> 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

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

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

Full Name (Last, First, Middle Initial) <b>A. Simmons For Congress</b>		<b>Transaction ID: 24033838</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 12 Roosevelt Ave Box 4		Amount of Each Disbursement this Period 2500.00
City State Zip Code Mystic CT 06355	Purpose of Disbursement 011 Category/Type	
Candidate Name Rob Simmons	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. National Republican Congressional Committee</b>		<b>Transaction ID: 24035784</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 320 First Street SE		Amount of Each Disbursement this Period 15000.00
City State Zip Code Washington DC 20003	Purpose of Disbursement 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Friends Of Jim Clyburn</b>		<b>Transaction ID: 24035927</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address Post Office Box 12567		Amount of Each Disbursement this Period 2500.00
City State Zip Code Columbia SC 29211	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. James Clyburn	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 6	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	20000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. King For Congress</b>		Transaction ID: 24051796 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 126 Des Moines Street P.O. Box 576		Amount of Each Disbursement this Period 2000.00
City Odebolt State IA Zip Code 51458	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Steve King		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tom Kean For Us Senate Inc</b>		Transaction ID: 24071845 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address PO Box 225		Amount of Each Disbursement this Period 5000.00
City Colonia State NJ Zip Code 07067	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Thomas Kean		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Rely On Your Beliefs Fund</b>		Transaction ID: 24127457 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address P.O. Box 5412		Amount of Each Disbursement this Period 5000.00
City Arlington State VA Zip Code 22205	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. PRYCE FOR CONGRESS</b>		<b>Transaction ID:</b> 24127455 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 340 EAST GAY STREET		Amount of Each Disbursement this Period 5000.00
City COLUMBUS State OH Zip Code 43215		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Deborah Pryce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

Full Name (Last, First, Middle Initial) <b>B. Friends of Cliff Stearns</b>		<b>Transaction ID:</b> 24127458 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address P.O. Box 308		Amount of Each Disbursement this Period 2500.00
City Silver Springs State FL Zip Code 34489		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Cliff Stearns Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 6 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. The Freedom Project</b>		<b>Transaction ID:</b> 24127461 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 509 7th St NW Third Floor		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20004		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Jim Gerlach For Congress Committee</b>		Transaction ID: 24145351 Date of Disbursement 06 / 12 / 2006	
Mailing Address 704 Haywood Drive		Amount of Each Disbursement this Period 5000.00	
City Exton	State PA	Zip Code 19341	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	
Candidate Name Mr. Jim Gerlach			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 6		

Full Name (Last, First, Middle Initial) <b>B. Thelma Drake for Congress</b>		Transaction ID: 24145350 Date of Disbursement 06 / 12 / 2006	
Mailing Address P.O. Box 61480		Amount of Each Disbursement this Period 2500.00	
City Virginia Beach	State VA	Zip Code 23446	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Thelma Drake			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 2		

Full Name (Last, First, Middle Initial) <b>C. Lindsey Graham For Senate</b>		Transaction ID: 24160723 Date of Disbursement 06 / 15 / 2006	
Mailing Address PO Box 1155		Amount of Each Disbursement this Period 1000.00	
City Seneca	State SC	Zip Code 29679	011 Category/ Type
Purpose of Disbursement		Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 Congressional P	
Candidate Name Lindsey Graham			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 2		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Bishop for Congress</b>		Transaction ID: 24197792 Date of Disbursement 06 / 22 / 2006	
Mailing Address P.O. Box 909		Amount of Each Disbursement this Period 2500.00	
City Columbus State GA Zip Code 31902	Purpose of Disbursement 011 Category/Type		
Candidate Name Sanford D. Bishop, Jr.			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Christopher Cannon for Congress</b>		Transaction ID: 24197758 Date of Disbursement 06 / 22 / 2006	
Mailing Address 51 South University Avenue		Amount of Each Disbursement this Period 5000.00	
City Provo State UT Zip Code 84606	Purpose of Disbursement 011 Category/Type		
Candidate Name Chris Cannon			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Keller for Congress</b>		Transaction ID: 24198216 Date of Disbursement 06 / 22 / 2006	
Mailing Address P.O. Box 1453		Amount of Each Disbursement this Period 1000.00	
City Orlando State FL Zip Code 32803-1453	Purpose of Disbursement 011 Category/Type		
Candidate Name Rick Keller			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 8	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Lieberman</b>		Transaction ID: 24197794 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address 320 4th Street, NE		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/Type		
Candidate Name Joseph Lieberman			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. The Mike R Fund</b>		Transaction ID: 24198218 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address P.O. Box 65796		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20035	Purpose of Disbursement 011 Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Committee To Elect Linda Sanchez</b>		Transaction ID: 24197785 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6	
Mailing Address 601 S Glenoaks Blvd Suite 211		Amount of Each Disbursement this Period 1500.00	
City Burbank State CA Zip Code 91502	Purpose of Disbursement 011 Category/Type		
Candidate Name Rep. Linda Sanchez			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Tom Kean For Us Senate Inc</b>		Transaction ID: 24198222 Date of Disbursement 06 / 22 / 2006
Mailing Address PO Box 225		Amount of Each Disbursement this Period 5000.00
City Colonia State NJ Zip Code 07067	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Thomas Kean		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	

Full Name (Last, First, Middle Initial) <b>B. Hoyer For Congress</b>		Transaction ID: 24197766 Date of Disbursement 06 / 22 / 2006
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 5000.00
City Clinton State MD Zip Code 20735	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Steny Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Hoyer For Congress</b>		Transaction ID: 24197777 Date of Disbursement 06 / 22 / 2006
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 5000.00
City Clinton State MD Zip Code 20735	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Steny Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 Association of Convenience Stores Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Allyson Schwartz For Congress</b>		Transaction ID: 24197784 Date of Disbursement 06 / 22 / 2006	
Mailing Address P.O. Box 45706		Amount of Each Disbursement this Period 1000.00	
City Philadelphia State PA Zip Code 19149	Purpose of Disbursement 011 Category/Type	Candidate Name Rep. Allyson Schwartz	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General Electio		

Full Name (Last, First, Middle Initial) <b>B. Charlie Melancon Campaign Committee Inc</b>		Transaction ID: 24197801 Date of Disbursement 06 / 22 / 2006	
Mailing Address 511 Congress St PO Box 549		Amount of Each Disbursement this Period 1000.00	
City Napoleonville State LA Zip Code 70390	Purpose of Disbursement 011 Category/Type	Candidate Name Rep. Charles Melancon	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Peter Hoekstra For Congress</b>		Transaction ID: 24198221 Date of Disbursement 06 / 22 / 2006	
Mailing Address 1454 Cimarron Drive		Amount of Each Disbursement this Period 500.00	
City Holland State MI Zip Code 49423	Purpose of Disbursement 011 Category/Type	Candidate Name Rep. Peter Hoekstra	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 2	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Stupak for Congress</b>		Transaction ID: 24208013 Date of Disbursement 06 / 28 / 2006
Mailing Address P.O. Box 143		Amount of Each Disbursement this Period 1000.00
City Menominee	State MI Zip Code 49858	
Purpose of Disbursement		
Candidate Name Bart Stupak		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
State: MI District: 1		

Full Name (Last, First, Middle Initial) <b>B. Heartland Values PAC</b>		Transaction ID: 24209558 Date of Disbursement 06 / 28 / 2006
Mailing Address P.O. Box 505		Amount of Each Disbursement this Period 2000.00
City Sioux Falls	State SD Zip Code 57101	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Graves For Congress</b>		Transaction ID: 24216012 Date of Disbursement 06 / 29 / 2006
Mailing Address 1115 Massachusetts Ave NW Lower Level		Amount of Each Disbursement this Period 2500.00
City Washington	State DC Zip Code 20005	
Purpose of Disbursement		
Candidate Name Samuel B. (Sam) Graves, Jr.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
State: MO District: 6		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Convenience Stores Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Roskam For Congress Committee

Mailing Address 423 W. Wesley Street

City Wheaton State IL Zip Code 60189

Purpose of Disbursement

Category/  
Type

Candidate Name  
Mr. Peter Roskam

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IL District: 6

2006 General Electio

Transaction ID: 24216015

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Convenience Stores Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Mrs. Elizabeth J. Iandoli

Mailing Address 505 Pleasant Street

City Worcester State MA Zip Code 01609-1894

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: 23812696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. SunTrust Bank</b>		<b>Transaction ID:</b> 24026779 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 6
Mailing Address 1650 King Street		Amount of Each Disbursement this Period 350.53
City Alexandria State VA Zip Code 22314	Credit Card Fees for CC Charges	
Purpose of Disbursement Credit Card Fees for CC Charges		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Texas Freedom Fund</b>		<b>Transaction ID:</b> 24021961 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
Mailing Address c/o Epiphany Productions 102 Hume Avenue		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22301	Category/ Type 011	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. SunTrust Bank</b>		<b>Transaction ID:</b> 24259628 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6
Mailing Address 1650 King Street		Amount of Each Disbursement this Period 269.63
City Alexandria State VA Zip Code 22314	Category/ Type 001	
Purpose of Disbursement May Credit Card Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	May Credit Card Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5620.16
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Convenience Stores Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** SunTrust Bank

Mailing Address 1650 King Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Bank fees for contributions made by cred

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 24317322

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Bank fees for contributions made by credit card

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

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