

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 106
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Bradley A. Smith</b>		Date of Receipt
Mailing Address 175 Schoolhouse Loop		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Kalispell	State MT	Zip Code 59901-7925
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A737D419F3A63461CBD5</b>
Name of Employer Fun Beverage Inc.	Occupation Beer Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mr. Brian C. Clark</b>		Date of Receipt
Mailing Address 175 Schoolhouse Loop		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Kalispell	State MT	Zip Code 59901-7925
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : ADE1E5729AA524DD7A3F</b>
Name of Employer Fun Beverage Inc.	Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1400.00"/>
	<input type="text" value="1400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Ms. Marie Clark</b>		Date of Receipt
Mailing Address 175 Schoolhouse Loop		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City Kalispell	State MT	Zip Code 59901-7925
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : A210EBF7B5EB14661AEE</b>
Name of Employer Fun Beverage Inc.	Occupation Benefits Coordinator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>