

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 62
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 Community Pharmacists Association - PAC

Full Name (Last, First, Middle Initial) A. Kari Pastorek		Date of Receipt
Mailing Address 38 E 12th St		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
Grafton	ND	58237
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20150506145317-185
Name of Employer	Occupation	Amount of Each Receipt this Period
Grafton Drug	Owner/Manager	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Brian Joseph Petrucci		Date of Receipt
Mailing Address 313 E 20th St		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
Crane	TX	79731-5003
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20150506145317-187
Name of Employer	Occupation	Amount of Each Receipt this Period
Crane Pharmacy	Owner/Manager	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. Steven Pfister		Date of Receipt
Mailing Address 100 Daingerfield Rd		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
Alexandria	VA	22314
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 20150506145317-188
Name of Employer	Occupation	Amount of Each Receipt this Period
National Community Pharmacists Associa	Sr. VP	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="800.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>