

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

WHOLESALER-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

ADDRESS (number and street) 1325 G Street, N.W. Suite 1000

Check if different than previously reported. (ACC) WASHINGTON DC 20005 3134

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00109306

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 01 01 2011 through 06 30 2011

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

Type or Print Name of Treasurer Beth Rivera Cruz

Signature of Treasurer Electronically Filed by Beth Rivera Cruz Date 07 12 2011

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2011"/>		7957.08
(b) Cash on Hand at Beginning of Reporting Period	7957.08	
(c) Total Receipts (from Line 19)	46000.00	46000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	53957.08	53957.08
7. Total Disbursements (from Line 31)	19513.21	19513.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34443.87	34443.87
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	46000.00	46000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	46000.00	46000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	46000.00	46000.00
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	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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))	46000.00	46000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	46000.00	46000.00

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.....	19513.21	19513.21
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19513.21	19513.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19513.21	19513.21

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)	46000.00	46000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46000.00	46000.00
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
WHOLEALER-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) Mr. Dan Blaylock	Date of Receipt MM / DD / YYYY 06 / 17 / 2011
	Mailing Address 1901 Stanford Ct	Transaction ID: SA11AI.6179
	City State Zip Code Landover MD 20785-3219	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Adams Burch Inc Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

B.	Full Name (Last, First, Middle Initial) Mr. Brad Blevins	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 421 Hart Lane-PO Box 160387	Transaction ID: SA11AI.6174
	City State Zip Code Nashville TN 37216-0387	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Blevins Inc Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

C.	Full Name (Last, First, Middle Initial) Tom Crone	Date of Receipt MM / DD / YYYY 02 / 01 / 2011
	Mailing Address 555 E. California Ave.	Transaction ID: SA11AI.6165
	City State Zip Code Sunnyvale CA 44086	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Valin Corp Occupation Chief Marketing Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 18
(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)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A. Full Name (Last, First, Middle Initial)
Mr. Matthew W. Geekie

Mailing Address 34 N Meramec Ave

City State Zip Code
St Louis MO 63105-1231

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

Name of Employer Graybar Electric Co Inc Occupation Sr VP/Sctry/Gen Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2011

Transaction ID: SA11AI.6147

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Dave Heffler

Mailing Address 555 E California Ave

City State Zip Code
Sunnyvale CA 94086-5147

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

Name of Employer Valin Corporation Occupation Executive VP & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2011

Transaction ID: SA11AI.6160

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
John D. Henderson

Mailing Address 501 N. Virginia

City State Zip Code
Oklahoma City OK 73125

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

Name of Employer Hunzicker Brothers Inc. Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2011

Transaction ID: SA11AI.6145

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<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)
WHOLEALER-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) Mr. C. Hornsby		Date of Receipt MM / DD / YYYY 01 / 31 / 2011		
	Mailing Address 12500 Jefferson Ave		Transaction ID: SA11AI.6154		
	City Newport News	State VA	Zip Code 23602-4314	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Wolseley PLC	Occupation Group Chief Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

B.	Full Name (Last, First, Middle Initial) Susie Johnston		Date of Receipt MM / DD / YYYY 01 / 21 / 2011		
	Mailing Address 3121 E. Cairo		Transaction ID: SA11AI.6141		
	City Springfield	State MO	Zip Code 65802	Amount of Each Receipt this Period 750.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Johnston Industrial Supply	Occupation CEO/President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

C.	Full Name (Last, First, Middle Initial) Mr. Mark Kramer		Date of Receipt MM / DD / YYYY 05 / 04 / 2011		
	Mailing Address 6800 Broken Sound Pkwy #150		Transaction ID: SA11AI.6178		
	City Boca Raton	State FL	Zip Code 33487	Amount of Each Receipt this Period 3000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Laird Plastics	Occupation President/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00			

SUBTOTAL of Receipts This Page (optional)	▶	4750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<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)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) Mr. Andre B. Lacy	Date of Receipt MM / DD / YYYY 01 / 31 / 2011
	Mailing Address 54 Monument Circle #800	Transaction ID: SA11AI.6153
	City State Zip Code Indianapolis IN 46204-2942	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer L D I Ltd Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Charles Merinoff	Date of Receipt MM / DD / YYYY 04 / 30 / 2011
	Mailing Address 60 E 42nd St #1915	Transaction ID: SA11AI.6176
	City State Zip Code New York NY 10165	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Charmer Sunbelt Group (The) Occupation CEO & Vice Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Thomas Neri	Date of Receipt MM / DD / YYYY 01 / 31 / 2011
	Mailing Address 1666 E. Touhy Ave.	Transaction ID: SA11AI.6150
	City State Zip Code Des Plaines IL 60018	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Lawson Products, Inc. Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	10500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 18
	<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)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) Edward Orlet		Date of Receipt
	Mailing Address 1181 Corporate Lake Drive		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	St. Louis	MO	63017
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6161
Name of Employer NAED		Occupation Sr. Dir of Development & Govt Affairs	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"/>

B.	Full Name (Last, First, Middle Initial) Mr. George Pattee		Date of Receipt
	Mailing Address 1563 Hubbard Avenue		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Batavia	IL	60510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6131
Name of Employer Parksite Group (The)		Occupation Chief Executive Officer	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="750.00"/>

C.	Full Name (Last, First, Middle Initial) Eric Peabody		Date of Receipt
	Mailing Address 200 Research Drive		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Milford	CT	06460
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6163
Name of Employer Eastern Bag & Paper Group		Occupation Vice 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="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 18
(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)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A. Full Name (Last, First, Middle Initial)
Mr. Daniel E. Proctor

Mailing Address 12005 E Pike St

City State Zip Code
Santa Fe Spgs CA 90623

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

Name of Employer Occupation
Tri West Ltd CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: SA11AI.6167

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert A. Reynolds, Jr.

Mailing Address 34 N Meramec Ave

City State Zip Code
St Louis MO 63105-1231

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

Name of Employer Occupation
Graybar Electric Co Inc Chairman/President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2011

Transaction ID: SA11AI.6177

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
James Risk

Mailing Address P. O. Box 5089

City State Zip Code
Lafayette IN 47903

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

Name of Employer Occupation
Kirby Risk Corp CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2011

Transaction ID: SA11AI.6175

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ▶ 6000.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A. Full Name (Last, First, Middle Initial)
 Eveline Roberts
 Mailing Address 14626 Chesterfield Rd
 City State Zip Code
 Rockville MD 20853
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 1 1
Transaction ID: SA11AI.6173
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

B. Full Name (Last, First, Middle Initial)
 William Roberts
 Mailing Address P. O. Box 5507
 City State Zip Code
 Rockville MD 20855
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 1 1
Transaction ID: SA11AI.6171
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Roberts Oxygen Company, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

C. Full Name (Last, First, Middle Initial)
 Kevin M. Short
 Mailing Address 10737 King William Drive
 City State Zip Code
 Dallas TX 75220
 Date of Receipt
 M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 1 1
Transaction ID: SA11AI.6137
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Laird Plastics Occupation Regional Exec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) ► **10500.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 13 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A. Full Name (Last, First, Middle Initial)
 Andrew Skipp
 Mailing Address P. O. Box 790
 City State Zip Code
Waterbury CT 06720-0790
 Date of Receipt
 M M / D D / Y Y Y Y
01 18 2011
Transaction ID: SA11AI.6134
 Amount of Each Receipt this Period
500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Hubbard-Hall Inc President/CEO
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **500.00**

B. Full Name (Last, First, Middle Initial)
 Roy Vallee
 Mailing Address 2211 S. 47th Street
 City State Zip Code
Phoenix AZ 85034
 Date of Receipt
 M M / D D / Y Y Y Y
04 30 2011
Transaction ID: SA11AI.6168
 Amount of Each Receipt this Period
5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Avnet Inc Chairman and CEO
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **5000.00**

C. Full Name (Last, First, Middle Initial)
 Mr. Douglas York
 Mailing Address 3441 E Harbour Dr
 City State Zip Code
Phoenix AZ 85034-7229
 Date of Receipt
 M M / D D / Y Y Y Y
01 31 2011
Transaction ID: SA11AI.6155
 Amount of Each Receipt this Period
500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Ewing Irrigation Products President
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **500.00**

SUBTOTAL of Receipts This Page (optional) ► **6000.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) Dan Zumarraga		Date of Receipt																					
	Mailing Address 9302 NW 101 St.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		3	1		2	0	1	1														
	City	State	Zip Code		Transaction ID: SA11AI.6156																			
	Miami	FL	33178																					
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period																				
Name of Employer Zuma & Sons Dist.		Occupation Owner		500.00																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		500.00																						

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	46000.00

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)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A. Full Name (Last, First, Middle Initial)
BOB CORKER FOR SENATE 2012

Mailing Address PO BOX 848

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement
Political Contribution

Candidate Name
ROBERT P JR CORKER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TN District: 00

Transaction ID: SB23.6100

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
BUSINESS-INDUSTRY POLITICAL ACTION COMMITTEE

Mailing Address 888 16TH STREET, NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Political Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.6082

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
DAVE CAMP FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE
SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement
Political Contribution

Candidate Name
DAVID LEE CAMP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 04

Transaction ID: SB23.6103

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)

<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)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARRASSO	Transaction ID: SB23.6109
	Mailing Address PO BOX 52008	Date of Disbursement MM / DD / YYYY 06 / 03 / 2011
	City CASPER State WY Zip Code 82605	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Political Contribution Candidate Name JOHN BARRASSO Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type
B.	Full Name (Last, First, Middle Initial) GARDNER FOR CONGRESS	Transaction ID: SB23.6094
	Mailing Address PO BOX 2408	Date of Disbursement MM / DD / YYYY 03 / 04 / 2011
	City LOVELAND State CO Zip Code 80539	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Debt Retirement Candidate Name CORY GARDNER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 04	Category/ Type
C.	Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS	Transaction ID: SB23.6084
	Mailing Address PO BOX 17192	Date of Disbursement MM / DD / YYYY 03 / 04 / 2011
	City FT MITCHELL State KY Zip Code 41017	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Political Contribution Candidate Name GEOFFREY C. DAVIS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 04	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 18

<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)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) HELLER FOR SENATE	Transaction ID: SB23.6115 Date of Disbursement
	Mailing Address PO BOX 371907	<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
	City LAS VEGAS State NV Zip Code 89137	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution Candidate Name DEAN HELLER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 00	<input type="text" value="2500.00"/>
B.	Full Name (Last, First, Middle Initial) JIM HUFFMAN FOR SENATE	Transaction ID: SB23.6124 Date of Disbursement
	Mailing Address 228 S WASHINGTON STREET SUITE 115	<input type="text" value="02"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Contrib in-kind, srvc to cand campaign Candidate Name JAMES LLOYD II HUFFMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 00	<input type="text" value="13.21"/>
C.	Full Name (Last, First, Middle Initial) MONTANANS FOR REHBERG	Transaction ID: SB23.6121 Date of Disbursement
	Mailing Address PO BOX 1597	<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City HELENA State MT Zip Code 59624	Amount of Each Disbursement this Period
	Purpose of Disbursement Political Contribution Candidate Name DENNIS R REHBERG Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 00	<input type="text" value="2000.00"/>

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 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)

WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A.	Full Name (Last, First, Middle Initial) RIBBLE FOR CONGRESS	Transaction ID: SB23.6097
	Mailing Address PO BOX 7200	Date of Disbursement MM / DD / YYYY 03 / 09 / 2011
	City APPLETON State WI Zip Code 54912	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution Candidate Name REID RIBBLE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
B.	Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS	Transaction ID: SB23.6106
	Mailing Address 2931 E DUBLIN GRANVILLE ROAD SUITE 190	Date of Disbursement MM / DD / YYYY 05 / 17 / 2011
	City COLUMBUS State OH Zip Code 43231	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution Candidate Name PATRICK J. TIBERI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
C.	Full Name (Last, First, Middle Initial) WALBERG FOR CONGRESS	Transaction ID: SB23.6118
	Mailing Address PO BOX 1362	Date of Disbursement MM / DD / YYYY 06 / 21 / 2011
	City JACKSON State MI Zip Code 49204	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contribution Candidate Name TIMOTHY L. HON. WALBERG Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

19513.21