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# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man	All Authorize			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing, type er the lines.	12FE4M	.5
National Association of	Chain Drug S	Stores, Inc. F	Political Action Co	mmittee	
ADDRESS (number and street)	1776 Wilson Boule	evard			
▼ Check if different	Suite 200				
than previously reported. (ACC)	Arlington			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	22209
2. FEC IDENTIFICATION NU	MBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00022368		3. IS THIS REPORT	NEW (N) OF		MENDED )
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2	) May 20 (M		20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3	) Jun 20 (M6	S) Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q:	1)	Apr 20 (M4)	) Jul 20 (M7	) Oct	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	(c) 12-Day	ection	Primary (12P)	General	(12G) Runoff (12R)
October 15 Quarterly Report (Q:	Report	for the:	Convention (12C)	Special (	(12S)
January 31 Year-End Report (YE		Election on	M   M / D   D	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-E		General (30G)	Runoff (S	Special (30S)
Termination Report (TER)		Election on	10 30	2020	in the State of
5. Covering Period 10	15	2020	through 11	M / D D /	2020
I certify that I have examined this Type or Print Name of Treasurer	s Report and to the Fitzsimmons, Dav	e best of my kno vid M., , ,	owledge and belief it is	true, correct and	d complete.
Signature of Treasurer Fitzsin	nmons, David M., , ,		[Electronically Filed]	Date 12	/ 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, errone	ous, or incomplete i	information may s	ubject the person signing	this Report to the	he penalties of 52 U.S.C. § 3010
Office Use					FEC FORM 3X Rev. 05/2016

### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

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Write or Type Committee Name

### National Association of Chain Drug Stores, Inc. Political Action Committee

10 15 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 272819.13 January 1. 2020 (b) Cash on Hand at 135184.28 Beginning of Reporting Period..... 27578.91 133295.28 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 406114.41 162763.19 6(a) and 6(c) for Column B)..... 162.44 243513.66 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 162600.75 162600.75 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### National Association of Chain Drug Stores, Inc. Political Action Committee

10 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 15752.04 84414.02 (i) Itemized (use Schedule A)..... 164.43 1657.15 (ii) Unitemized ..... (iii) TOTAL (add 86071.17 15916.47 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 6500.00 37500.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 123571.17 22416.47 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 5000.00 7500.00 Political Committees..... 17. Other Federal Receipts 2224.11 (Dividends, Interest, etc.)..... 162.44 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (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))......▶ 133295.28 27578.91 20. Total Federal Receipts 27578.91 133295.28 (subtract Line 18(c) from Line 19) .......▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Allocated Federal/Non-Federal		- Caronida Tour to Dute
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) Federal Share	4 4	
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	162.44	2013.66
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	162.44	2013.66
2.	Transfers to Affiliated/Other Party	102.44	2010.00
3	Committees Contributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	0.00	219000.00
4.	Independent Expenditures (use Schedule E)	0.00	0.00
5.	Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
٠.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Delitical Berty Committees	4 4	4 4
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements (Including		00500.00
	Non-Federal Donations)	0.00	22500.00
).	Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated 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	7 7 7	4 4 4
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	162.44	243513.66
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	402.44	
		162.44	243513.66

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

ursements
Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
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)	22416.47	123571.17
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22416.47	123571.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	162.44	2013.66
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	162.44	2013.66

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nightengale, Brian, , Mr., Date of Receipt Mailing Address 5045 Jewell Ter 15 2020 City Zip Code State Transaction ID: 45278015 FL Palm Harbor 34685-2697 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Good Neighbor Pharmacy President Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Skokan, Mike, , Mr., Date of Receipt Mailing Address 5820 Westown Pkwy 10 2020 City State Zip Code Transaction ID: 45299917 IΑ West Des Moines 50266-8223 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hy-Vee, Inc. CFO and Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 833.40 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Weitzman, Debbie, , Ms., Date of Receipt Mailing Address 7000 Cardinal PI 10 18 2020 City Zip Code State Transaction ID: 45300994 OH Dublin 43017-1091 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medicine Shoppe International, Inc. President, Pharmaceutical Distribution Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 3083.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s)

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for each category of the Detailed Summary Page 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Narveson, Robert, J., Mr., Date of Receipt Mailing Address 6055 Nathan Lane N 2020 Ste 200 City State Zip Code Transaction ID: 45305380 MN 55442-1675 **Plymouth** Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President and Chief Executive Officer Thrifty White Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Green, Lyle, M., Mr., Date of Receipt Mailing Address 734 Jacon Way 10 2020 City State Zip Code Transaction ID: 45315715 Pacific Palisades CA 90272-2829 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MarkeTouch Media, Inc. Vice President, Sales & Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Weippert, Timothy, , Mr., Date of Receipt Mailing Address 14107 54th Ave N 10 23 2020 City State Zip Code Transaction ID: 45316208 MN Plymouth 55446-1959 Amount of Each Receipt this Period FEC ID number of contributing C 3000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Thrifty White Pharmacy **Chief Operating Officer** Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) 6500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

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Detailed Summary Page 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Page, Charles, , Mr., Date of Receipt Mailing Address 2175 Parklake Dr NE 2020 City State Zip Code Transaction ID: 45317821 GA Atlanta 30345-2845 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Assistant Pharmacy Merchandiser The Kroger Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fielder, Marla, , Ms., Date of Receipt Mailing Address 19245 David Memorial Dr 10 2020 City State Zip Code Transaction ID: 45318954 TX Houston 77001 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Kroger Co. Pharmacy Merchandiser Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 365.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Loesch, Jeff, , Mr., Date of Receipt Mailing Address 1014 Vine St 10 2020 City Zip Code State Transaction ID: 45318975 OH Cincinnati 45202-1141 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kroger Co., The Manager of Pharmacy Regulatory Comp Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1230.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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ITEMIZED RECEIPTS for each category of the Detailed Summary Page 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fisher, Cindy, , , Date of Receipt Mailing Address 800 Ridge Lake Blvd 2020 City Zip Code State Transaction ID: 45318977 TN Memphis 38120-9427 Amount of Each Receipt this Period FEC ID number of contributing C 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Health & Wellness Merchandiser - Delta The Kroger Co. Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Alzola, Leon, , Mr., Date of Receipt Mailing Address 1014 Vine St 10 2020 City State Zip Code Transaction ID: 45319093 OH Cincinnati 45202-1141 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kroger Co., The National Health and Wellness Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Erdle, Timothy, , Mr., Date of Receipt Mailing Address 6055 Nathan Lane N 10 2020 Ste 200 City State Zip Code Transaction ID: 45319200 MN Plymouth 55442-1675 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Thrifty White Pharmacy **Executive VP Store Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1365.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Aquilina, Chip, , Mr., Date of Receipt Mailing Address 6333 Route 298 2020 City Zip Code State Transaction ID: 45322021 NY East Syracuse 13057 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President, Pharmacy Supply Chair Kinney Drugs, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Marshall, Jay, , Mr., Date of Receipt Mailing Address 5820 Westown Pkwy 10 2020 City State Zip Code Transaction ID: 45322035 IΑ West Des Moines 50266-8223 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Hy-Vee, Inc. Executive Vice President & Chief Opera Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Williams, Kristin, , Mrs., Date of Receipt Mailing Address 5820 Westown Pkwy 10 29 2020 City State Zip Code Transaction ID: 45322037 IΑ West Des Moines 50266-8223 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior Vice President, Chief Health Of Hy-Vee, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF 19 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skokan, Mike, , Mr., Date of Receipt Mailing Address 5820 Westown Pkwy 19 2020 City Zip Code State Transaction ID: 45406660 IΑ West Des Moines 50266-8223 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CFO** and Treasurer Hy-Vee, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 916.74 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bell, Don, L., Mr., II Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City State Zip Code Transaction ID: PR1054895659963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 96.15 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Senior Vice President, Legal Affairs a Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$96.15 Bi-Weekly) Other (specify) 2019.15 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Fitzsimmons, David, M., Mr., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 23 2020 City Zip Code State Transaction ID: PR1054896259963 Arlington VA 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 288.45 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Senior Vice President, Finance and Adm Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$96.15 Bi-Weekly) 2211.45 Other (specify) 467.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... \_\_\_

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for each category of the Detailed Summary Page 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guckian, Sandra, Kay, Mrs., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City Zip Code State Transaction ID: PR1054896959963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 288.45 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Vice President, Health Policy & Pharma Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$96.15 Bi-Weekly) 2211.45 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Perlowski, Steve, E., Mr., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City State Zip Code Transaction ID: PR1054897359963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 42.12 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Vice President, Industry Affairs & Mem Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$14.04 Bi-Weekly) Other (specify) 322.92 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Whitman, James, A., Mr., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City Zip Code State Transaction ID: PR1054897959963 Arlington VA 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 288.45 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Senior Vice President, Member Program Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$96.15 Bi-Weekly) 2211.45 Other (specify) 619.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Arth, Terrence, , Mr., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City Zip Code State Transaction ID: PR1055162959963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 42.12 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President, Member Programs & Se National Association of Chain Drug Sto Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$14.04 Bi-Weekly) 322.92 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nicholson, Kevin, N., Mr., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City State Zip Code Transaction ID: PR1055174759963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Vice President, Public Policy and Regu Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) Other (specify) 442.29 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

. Anderson, Steve, C., Ivir.,			Date of Receipt
Mailing Address 1776 Wilson Blvd Ste 200	)		11 23 2020
City	State	Zip Code	Transaction ID : PR2202229359963
Arlington	VA	22209-2516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		576.93
Name of Employer (for Individual)  National Association of Chain Drug Sto		ation (for Individual) ent and Chief Executive Officer	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 4423.13	P/R Deduction (\$192.31 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional	l)		676.74

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for e Deta 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Knotts, Leigh, , Ms., Date of Receipt Mailing Address 2548 Main St Ste C 2020 City Zip Code State Transaction ID: PR2576388159963 SC Elgin 29045-8844 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Director, State Government Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-Weekly) 460.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. O'Donnell, Thomas, , Mr., Date of Receipt Mailing Address 1776 Wilson Blvd Ste 200 2020 City State Zip Code Transaction ID : PR2595770259963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 576.93 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Senior Vice President, Government Affa Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$192.31 Bi-Weekly) Other (specify) 4423.13 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hampel, Vonnie, , Ms., Date of Receipt Mailing Address 909 New Jersey Ave SE 23 2020 Apt 809 City State Zip Code Transaction ID : PR2645976359963 DC Washington 20003-5310 Amount of Each Receipt this Period FEC ID number of contributing 57.69 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) National Association of Chain Drug Sto Director, Federal Government Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$19.23 Bi-Weekly) 442.29 Other (specify) 694.62 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

ı	FO	R LINE	NUMBER	: PAGE	E 15 OF	19
ı	(ch	eck only	one)			
	X	11a	11b	11c	12	
ı		13	14	15	16	17

Detailed Summary Page 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 Chain Drug Stores, Inc. Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Manko, Amber, , Ms., Date of Receipt Mailing Address 1776 Wilson Blvd. Suite 200 2020 City Zip Code State Transaction ID: PR2700395259963 VA Arlington 22209-2516 Amount of Each Receipt this Period FEC ID number of contributing 115.38 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Director, Federal Government Affairs National Association of Chain Drug Sto Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.46 Bi-Weekly) 884.58 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 115.38 SUBTOTAL of Receipts This Page (optional)..... 15752.04 TOTAL This Period (last page this line number only).....

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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 OF 19 (check only one)
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b <b>X</b> 11c 12 13 14 15 16 17
	ny information copied from such Reports and State for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  National Association of Chain Dr	ug Store	es, Inc. Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initial Kinney Drugs for a Healthier America PA		Organization Name	Date of Receipt
	Mailing Address 29 East Main Street			10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 45323945
	Gouverneur	NY	13642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0549162	4000.00
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General  Other (specify) ▼		5000.00	
В.	Full Name of Individual (Last, First, Middle Initial Rite Aid Corp. PAC	al) or Full C	Organization Name	Date of Receipt
	Mailing Address P.O. Box 3165			11 19 2020
	City	State	Zip Code	Transaction ID : 45406659
	Harrisburg	PA	17105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0104083	2500.00
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		2500.00	
c.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, iggi ogale	Total to Duto .	
	Other (specify)		7   7   7	
s	SUBTOTAL of Receipts This Page (optional)			6500.00

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

6500.00

В.

C

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

mage# 202012029337414997					
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 OF 19 (check only one)			
Any information copied from such Reports and S or for commercial purposes, other than using the		· ·			
NAME OF COMMITTEE (In Full)  National Association of Chain D	Orug Stores, Inc. Political Action	Committee			
Full Name of Individual (Last, First, Middle Ini National Association of Chain Drug Stor	es	Date of Receipt			
Mailing Address 1776 Wilson Blvd. Suite 200  City	State Zip Code	11 19 2020 Transaction ID : 45406046			
Arlington	VA 22209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	162.44			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2224.11	Oct.20 - Bank Fees Reimb.			
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt			
Mailing Address		M = M / D = D / Y = Y = Y			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name of Individual (Last First Middle In	tial) or Full Organization Namo				

Other (specify) ▼		
Full Name of Individual (Last, First, Middle II Mailing Address	, , , , , , , , , , , , , , , , , , , ,	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	State Zip Code  C Occupation (for Individual)	Amount of Each Receipt this Period  Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SURTOTAL of Receipts This Page (optional)		162.44

162.44

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 OF 19 (check only one)  11a 11b 11c 12 13 14 15			
			for each category of the Detailed Summary Page				
	ny information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full)  National Association of Chain Di	rug Store	es, Inc. Political Action	Committee			
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Safeway Inc. PAC			Date of Receipt			
	Mailing Address 5918 Stoneridge Mall Rd			10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 45299918			
	Pleasanton	CA	94588-3229	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C co	0194084	2500.00			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General		2500.00	1			
	Other (specify) ▼		2500.00				
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Organization Name				
В.				Date of Receipt			
	Mailing Address 8510 Blaboa Boulevard			10 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 45322038			
	Northridge	CA 91325		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C co	0410654	2500.00			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		2500.00				
<del>С</del> .	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organization Name	Date of Receipt			
	Mailing Address	M = M / D = D / Y = Y = Y					
	City	State	Zip Code	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	[C]					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
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	Primary General Aggreg			1			
_	Other (specify)	<u> </u>	<del></del>				
8	SUBTOTAL of Receipts This Page (optional)			5000.00			

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

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5000.00

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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 Chain Drug Stores, Inc. Political Action Committee  Full Name (Last, First, Middle Initial)  A. SunTrust Bank  Mailing Address 1445 New York Ave, NW  City Washington Office Sought: House Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State Zip Code Purpose of Disbursement City State: District:  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State Zip Code Purpose of Disbursement Candidate Name  Category/ Type  162.44  Cott.20 - Bank Fees  City State: District:  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State: District: Senate President Senate	SCHEDULE B (FEC Form 3X)			FOR LIN	E NUMBER:	PAGE 19 OF 19		
Detailed Summary Page   280   280   280   280   300	ITEMIZED DISBURSEMENTS			I `	· ′			
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 Ptul)  National Association of Chain Drug Stores, Inc. Political Action Committee  Full Name (Last, First, Middle Initial)  A. SunTrust Bank  Mailing Address 1445 New York Ave, NW  City Washington  Oct. 20 - Bank Fees  Candidate Name  Oct. 20 - Bank Fees  Transaction ID : 43397736  Amount of Each Disbursement this Period  Transaction ID : 43397736  Amount of Each Disbursement this Period  Transaction ID : 43397736  Amount of Each Disbursement this Period  Oct. 20 - Bank Fees  Memoritem  Transaction ID : 43397736  Amount of Each Disbursement this Period  Transaction ID : 43397736  Amount of Each Disbursement this Period  Oct. 20 - Bank Fees  Oct. 20 - Bank Fees  Memoritem  Transaction ID : 43397736  Amount of Each Disbursement this Period  Oct. 20 - Bank Fees  Oct. 20 - Bank Fees  Memoritem  Transaction ID : 43397736  Amount of Each Disbursement this Period  Oct. 20 - Bank Fees  Memoritem  Date of Disbursement this Period  Memoritem  Date of Disbursement this Period  Oct. 20 - Bank Fees  Oct. 20 - Bank Fees  Memoritem  Date of Disbursement this Period  Oct. 20 - Bank Fees  Oct. 20 - Bank Fees  Memoritem  Date of Disbursement this Period  Oct. 20 - Bank Fees  Oct. 20 - Bank Fees  Memoritem  Date of Disbursement this Period  Oct. 20 - Bank Fees  Oct. 20 - Bank Fees  Memoritem  Memorite								
NAME OF COMMITTEE (In Full) National Association of Chain Drug Stores, Inc. Political Action Committee  Full Name (Last, First, Middle Initial)  A. SunTrust Bank  Mailing Address  City State Disbursement Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  B. Date of Disbursement Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code Office Sought: House President Other (specify) Memo Item  Date of Disbursement this Period  Category/ Type  Transaction ID : 45397736  Transac	Any information copied from such Reports and State	ements may	not be sold or us					
National Association of Chain Drug Stores, Inc. Political Action Committee  Full Name (Last, First, Middle Initial)  City								
A. SunTrust Bank  Mailing Address 1445 New York Ave, NW  City Washington Oct. 20- Bank Fees Candidate Name  Office Sought:   House   Disbursement For:   Senate   Primary   General   Gen	1 \							
A. SunTrust Bank  Mailing Address 1445 New York Ave, NW  City Washington Directory Purpose of Disbursement Oct 20 - Bank Fees Candidate Name  Office Sought: State: District:  Full Name (Last, First, Middle Initial) B.  Mailing Address  City Purpose of Disbursement Candidate Name  Disbursement  District:  Full Name (Last, First, Middle Initial)  B.  Mailing Address  City State: District:  Full Name (Last, First, Middle Initial)  Date of Disbursement ton: Senate Primary Oct.20 - Bank Fees  Amount of Each Disbursement  Candidate Name  Category  Amount of Each Disbursement this Period  FEC Identification Number  Candidate Name  Category  Amount of Each Disbursement this Period  FEC Identification Number  Category  Amount of Each Disbursement this Period  FEC Identification Number  Category  Amount of Each Disbursement this Period  FEC Identification Number  Category  Amount of Each Disbursement this Period  FEC Identification Number  Category  Amount of Each Disbursement  Category  FEC Identification Number  Category  Amount of Each Disbursement  Category  Category  Amount of Each Disbursement this Period  Category  Category  Amount of Each Disbursement this Period  Category  Category  Amount of Each Disbursement this Period  Category  Category  Category  Amount of Each Disbursement this Period  Category  Category  Category  Category  Amount of Each Disbursement this Period  Category  Category  Category  Category  Category  Category  Category  Amount of Each Disbursement this Period  Category  Category  Category  Category  Category  Category  Category  Category  Amount of Each Disbursement this Period  Category	National Association of Chain Dru	g Stores	s, Inc. Politica	al Action (	Committee			
Mailing Address 1445 New York Ave, NW  City	_				Data of Di	-1		
Mailing Address 1445 New York Ave, NW  City Washington Purpose of Disbursement Oct.20 - Bank Fees Candidate Name  Office Sought: House Sanate Primary General Other (specify) ▼  Bull Name (Last, First, Middle Initial)  B.  Mailing Address  City State Zip Code Purpose of Disbursement Candidate Name  Office Sought: House Disbursement For: General Other (specify) ▼  State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Disbursement For: General Other (specify) ▼  State Zip Code Purpose of Disbursement  Candidate Name  Category/  Office Sought: House Disbursement For: General Other (specify)  District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code Primary General Other (specify)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/  Memo Item  Date of Disbursement  Candidate Name  Category/  Amount of Each Disbursement this Period  FEC Identification Number  Category/  Amount of Each Disbursement this Period  FEC Identification Number  Category/  Amount of Each Disbursement  Candidate Name  Date of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  FEC Identification Number  Category/  Amount of Each Disbursement this Period  Memo Item  Memo Item	A. SunTrust Bank	SunTrust Bank						
Washington Purpose of Disbursement Oct.20 - Bank Fees Candidate Name  Office Sought:	Mailing Address 1445 New York Ave, NW	Mailing Address 1445 New York Ave, NW			_			
Purpose of Disbursement Oct.20 - Bank Fees Candidate Name Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House Purpose of Disbursement State: District:  Full Name (Last, First, Middle Initial)  B.  Category/ Type  Office Sought: House President Sanate President State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  FEC Identification Number  Category/ Type  Date of Disbursement this Period  FEC Identification Number  Category/ Type  Date of Disbursement this Period  FEC Identification Number  Category/ Type  Memo Item  FEC Identification Number  Category/ Type  Memo Item  Memo Item  FEC Identification Number  Category/ Type  Memo Item  Memo Item  Memo Item  FEC Identification Number  Category/ Type  Memo Item  Memo It	•	·   '			FEC Identi	ification Number		
City   State   Disbursement For:   Senate   President   State:   District:   Disbursement For:   Senate   President   Disbursement For:   Senate   President   Disbursement For:   Senate   Disbursement   Disbursement	· ·	DC	20005					
Candidate Name  Office Sought: House Senate Primary General Primary General President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code President State: Disbursement For: Gategory/ Type  Office Sought: House Senate Primary General Other (specify) ✓ Amount of Each Disbursement this Period  FEC Identification Number Category/ Type  C. Category/ T								
Office Sought:	Candidate Name							
Senate Primary General Other (specify)   Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code FEC Identification Number  Candidate Name Disbursement For: Senate Primary General Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  Candidate Name Disbursement For: Senate Primary General Other (specify)  Memo Item  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Date of Disbursement this Period  The primary General Other (specify)  Memo Item  FEC Identification Number  Category/ Type  Date of Disbursement  Category/ Type  Office Sought: House Disbursement  Candidate Name Category/ Type  Office Sought: House Disbursement  Candidate Name Disbursement For: Senate Primary General Other (specify)   Memo Item  Memo Item  Memo Item  Memo Item  Memo Item  Memo Item						400.44		
State: District: Other (specify)   Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code Purpose of Disbursement  Candidate Name Disbursement For: Senate Primary Other (specify)  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  Mailing Address  City State Zip Code FEC Identification Number  Category/ Type  Date of Disbursement this Period  Memo Item  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought: House Disbursement For: Senate Purpose of Disbursement Candidate Name Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item  FEC Identification Number  Category/ Type  Memo Item  Memo Item  Memo Item		_	Gonoral		162.44			
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City  Purpose of Disbursement  Candidate Name  Category/  Office Sought: House Primary General President  State: District:  Full Name (Last, First, Middle Initial)  City  Purpose of Disbursement For:  Senate Primary General Other (specify)  Date of Disbursement  Category/  Type  FEC Identification Number  Category/  Memo Item  FEC Identification Number  Category/  Type  FEC Identification Number  Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Other (specify) ✓  Memo Item  Memo Item	В.							
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Office Sought: House Senate Primary General Other (specify)  State: District: Memo Item  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Other (specify)  Office Sought: House Primary General Other (specify)  Office Sought: House Primary General Other (specify)  State: District: Memo Item  Memo Item  Memo Item  Memo Item  Memo Item  Memo Item								
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State: District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City  Purpose of Disbursement  Candidate Name  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Memo Item  Memo Item  Memo Item  Memo Item  Memo Item  Memo Item		7	Primary General		7 7 7			
Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought:  House Senate Primary General Other (specify)  State:  District:  Date of Disbursement  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Memo Item					Memo Item			
City State Zip Code FEC Identification Number  Candidate Name Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Date of Disbursement  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Memo Item								
City State Zip Code FEC Identification Number  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District: Memo Item	C.				Date of Di	sbursement		
City  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  State Zip Code  FEC Identification Number  Category/ Type  Amount of Each Disbursement this Period  Memo Item						M M M / D D / Y Y Y Y		
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District: House Senate Primary General Other (specify) ▼  Memo Item	Mailing Address							
Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Category/ Type  Amount of Each Disbursement this Period  Memo Item	City	State	Zip Code		FEC Identi	fication Number		
Category/ Type  Office Sought: House Senate Primary General President President  State: District: Amount of Each Disbursement this Period  Memo Item	Purpose of Disbursement				C			
Office Sought: House Senate Primary General President State: District: Memo Item								
Office Sought: House Senate Primary General Other (specify) ▼  State: District: Memo Item	Category/			Amount of	Each Disbursement this Period			
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TOTAL This Period (last page this line number only).	TOTAL This Deviced (least name this line area)					162.44		