

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Community Pharmacists Association - PAC

A. Full Name (Last, First, Middle Initial) Solidarity Pac <hr/> Mailing Address 607 14th Street, NW, Suite 800 <hr/> City Washington State DC Zip Code 20005 Purpose of Disbursement Contribution Candidate Name Solidarity Pac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 27691 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
B. Full Name (Last, First, Middle Initial) Wolverine Pac <hr/> Mailing Address 607 14th Street, NW Suite 800 <hr/> City Washington State DC Zip Code 20005 Purpose of Disbursement Contribution Candidate Name Wolverine Pac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 27658 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

60500.00