

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Community Pharmacists Association - PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harrell, Jeffrey, Shane, ,

Mailing Address PO Box 1635

City
Long BeachState
WAZip Code
98631-1635FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ilwaco DrugsOccupation (for Individual)
Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3333.28

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2019

Transaction ID : 2019120913455-99

Amount of Each Receipt this Period

416.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hauser, Ronna, B., ,

Mailing Address 1000 Pecos Ct

City
AllenState
TXZip Code
75013-1189FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National Community Pharmacists AssociaOccupation (for Individual)
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2019

Transaction ID : 2019120913455-100

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heardt, Jason, , ,

Mailing Address 909 E Centennial Dr

City
PittsburgState
KSZip Code
66762-6601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lindburg Pharmacy SouthOccupation (for Individual)
Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2019

Transaction ID : 2019120913455-101

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

596.66

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