

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

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

FOR LINE NUMBER: PAGE 7 OF 14

(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. Caswell, Brian, D., ,

Mailing Address 1920 Military Ave

City

Baxter Springs

State

KS

Zip Code

66713-2039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wolkar Drug Inc.

Occupation (for Individual)

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 21 / 2019

Transaction ID : 201902159536-41

Amount of Each Receipt this Period

416.65

☐ Memo Item

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

B. Chancy, Hugh, M., ,

Mailing Address 205 E Main St

City

Hahira

State

GA

Zip Code

31632-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Chancy Drugs

Occupation (for Individual)

Owner/Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 21 / 2019

Transaction ID : 201902159536-43

Amount of Each Receipt this Period

416.65

☐ Memo Item

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

C. Cottrell, Charles, D., ,

Mailing Address 1121 Belleville Ave

Ste A

City

Brewton

State

AL

Zip Code

36426-1502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medical Center Pharmacy

Occupation (for Individual)

Owner/Manager

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 21 / 2019

Transaction ID : 201902159536-50

Amount of Each Receipt this Period

416.65

☐ Memo Item

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

1249.95

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