

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

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

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 Year-End 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 (12S)	

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 / / through / /

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, Assistant Treasurer

Signature of Treasurer Beth Rivera Cruz, Assistant Treasurer [Electronically Filed] Date / /

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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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2014"/>	<input type="text" value="66643.87"/>	<input type="text" value="66643.87"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="66643.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="35250.00"/>	<input type="text" value="35250.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="101893.87"/>	<input type="text" value="101893.87"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="28000.00"/>	<input type="text" value="28000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="73893.87"/>	<input type="text" value="73893.87"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

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).....	34250.00	34250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	34250.00	34250.00
(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)	34250.00	34250.00
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.....	1000.00	1000.00
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 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))..... ▶	35250.00	35250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35250.00	35250.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	28000.00	28000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) 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	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)) ..	28000.00	28000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28000.00	28000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	34250.00	34250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34250.00	34250.00
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: PAGE 6 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

Full Name (Last, First, Middle Initial) A. Mr. Dan Blaylock			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <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>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.6813			M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	4
M	M	/	D	D	/	Y	Y	Y	Y																
0	1		2	2		2	0	1	4																
Mailing Address 1901 Stanford Ct			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td>2</td><td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>			2	5	0	0	.	0	0													
2	5	0	0	.	0	0																			
City Landover	State MD	Zip Code 20785-3219																							
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 ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td>2</td><td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>				2	5	0	0	.	0	0													
2	5	0	0	.	0	0																			

Full Name (Last, First, Middle Initial) B. Mr. Dan Blaylock			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <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>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>4</td> </tr> </table> Transaction ID : SA11AI.6859			M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	1	4
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0	2		2	6		2	0	1	4																
Mailing Address 1901 Stanford Ct			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td>4</td><td>7</td><td>5</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>			4	7	5	0	.	0	0													
4	7	5	0	.	0	0																			
City Landover	State MD	Zip Code 20785-3219																							
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 ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td>5</td><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>				5	0	0	0	.	0	0													
5	0	0	0	.	0	0																			

Full Name (Last, First, Middle Initial) C. Eric Boelter			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <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>4</td> </tr> </table> Transaction ID : SA11AI.6848			M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	4
M	M	/	D	D	/	Y	Y	Y	Y																
0	1		3	1		2	0	1	4																
Mailing Address N22 W23685 Ridgeview Pkwy West			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td>5</td><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>			5	0	0	0	.	0	0													
5	0	0	0	.	0	0																			
City Waukesha	State WI	Zip Code 53188																							
FEC ID number of contributing federal political committee. C																									
Name of Employer Boelter Companies Inc.		Occupation President-Foodservice Group																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td>5</td><td>0</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>				5	0	0	0	.	0	0													
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SUBTOTAL of Receipts This Page (optional).....▶	<table border="1" style="width:100%; text-align: center;"> <tr> <td>5</td><td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	5	0	0	.	0	0
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TOTAL This Period (last page this line number only).....▶	<table border="1" style="width:100%; text-align: center;"> <tr> <td>5</td><td>5</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	5	5	0	0	.	0	0
5	5	0	0	.	0	0		

**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 23
(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

Full Name (Last, First, Middle Initial) A. Martin Burbridge			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td>/</td> <td>15</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	01	/	15	/	2014
M M M	/	D D D	/	Y Y Y Y Y									
01	/	15	/	2014									
Mailing Address 7750 Dunleith Drive			Transaction ID : SA11AI.6809										
City East Dubuque	State IL	Zip Code 61025	Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00													
FEC ID number of contributing federal political committee. C													
Name of Employer Crescent Electric Supply	Occupation President/CEO												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00											
500.00													

Full Name (Last, First, Middle Initial) B. John Burkemper			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td>/</td> <td>31</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	01	/	31	/	2014
M M M	/	D D D	/	Y Y Y Y Y									
01	/	31	/	2014									
Mailing Address 1585 Fencorp Drive			Transaction ID : SA11AI.6846										
City Fenton	State MO	Zip Code 63026	Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00													
FEC ID number of contributing federal political committee. C													
Name of Employer Grimco Inc.	Occupation President												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00											
500.00													

Full Name (Last, First, Middle Initial) C. Charles F. Cohen			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td>/</td> <td>31</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	01	/	31	/	2014
M M M	/	D D D	/	Y Y Y Y Y									
01	/	31	/	2014									
Mailing Address 295 CenterPoint Blvd			Transaction ID : SA11AI.6851										
City Pittston	State PA	Zip Code 18640	Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00													
FEC ID number of contributing federal political committee. C													
Name of Employer Benco Dental	Occupation Managing Director												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00											
500.00													

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00
1500.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

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

FOR LINE NUMBER: PAGE 8 OF 23
(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. Wilfredo Figueras
 Full Name (Last, First, Middle Initial)
 Mailing Address 6800 Broken Sound Parkway
 Ste. 150
 City Boca Raton State FL Zip Code 33487
 Date of Receipt 01 / 15 / 2014
Transaction ID : SA11AI.6811
 Amount of Each Receipt this Period 250.00
 Aggregate Year-to-Date 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Laird Plastics, Inc. Occupation Executive Vice President and CFO
 Receipt For: Primary General Other (specify) ▼

B. Mr. Matthew W. Geekie
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 N Meramec Ave
 City St Louis State MO Zip Code 63105-1231
 Date of Receipt 01 / 15 / 2014
Transaction ID : SA11AI.6806
 Amount of Each Receipt this Period 750.00
 Aggregate Year-to-Date 750.00
 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) ▼

C. Edward N. Gholson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8025 Clayton Lane Ct.
 City Clayton State MO Zip Code 63105
 Date of Receipt 01 / 31 / 2014
Transaction ID : SA11AI.6845
 Amount of Each Receipt this Period 500.00
 Aggregate Year-to-Date 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Deloitte Occupation Principal
 Receipt For: Primary General Other (specify) ▼

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: PAGE 9 OF 23
(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. David Hefler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1941 Ringwood Avenue
 City San Jose State CA Zip Code 95131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Valin Corporation Occupation Executive Vice President & CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6853
 Amount of Each Receipt this Period
 750.00

B. C. S. Hornsby
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 E. Vickery Blvd.
 City Fort Worth State TX Zip Code 76104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Morrison Supply Company Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11AI.6854
 Amount of Each Receipt this Period
 1500.00

C. Mr. Allan Keck
 Full Name (Last, First, Middle Initial)
 Mailing Address 8555 Miralani Drive
 City San Diego State CA Zip Code 92126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer R W Smith & Co Inc Occupation President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2014
Transaction ID : SA11AI.6820
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
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 OF 23
	<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. Mr. Andre Lacy
Full Name (Last, First, Middle Initial)

Mailing Address 54 Monument Cir 6th Fl Suite 800

City Indianapolis State IN Zip Code 46204-2942

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

Name of Employer L D I Ltd Occupation Chairman of the Board

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 31 / 2014
Transaction ID : SA11AI.6831

Amount of Each Receipt this Period 5000.00

B. Daniel J. Lett
Full Name (Last, First, Middle Initial)

Mailing Address One City Place Drive Suite 200

City St. Louis State MO Zip Code 63141

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

Name of Employer Bunzl USA, Inc. Occupation Executive VP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2014
Transaction ID : SA11AI.6816

Amount of Each Receipt this Period 250.00

C. Mrs. Kathleen M. Mazzarella
Full Name (Last, First, Middle Initial)

Mailing Address 34 N Meramec Ave

City St Louis State MO Zip Code 63105-1231

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

Name of Employer Graybar Electric Co Inc Occupation Senior Vice President-HR & Strategic P

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 10 / 2014
Transaction ID : SA11AI.6803

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00

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 11 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS

A. James McCool
 Full Name (Last, First, Middle Initial)
 Mailing Address One City Place Drive
 Suite 200
 City State Zip Code
 St. Louis MO 63141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bunzl Distribution Executive VP & CFO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6840
 Amount of Each Receipt this Period
 500.00

B. Jeffery D. McLendon
 Full Name (Last, First, Middle Initial)
 Mailing Address 2160 Satellite Blvd.
 Suite 450
 City State Zip Code
 Duluth GA 20097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 U.S. Lumber President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 10 / 2014
Transaction ID : SA11AI.6804
 Amount of Each Receipt this Period
 500.00

C. Edward Orlet
 Full Name (Last, First, Middle Initial)
 Mailing Address 1181 Corporate Lake Drive
 City State Zip Code
 St. Louis MO 63017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NAED Sr. Dir of Development & Govt Affairs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6850
 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 12 OF 23
	<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. Mr. George Pattee
Full Name (Last, First, Middle Initial)

Mailing Address 1563 Hubbard Avenue

City Batavia State IL Zip Code 60510

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

Name of Employer Parksite Group (The) Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11AI.6857

Amount of Each Receipt this Period 750.00

B. Manuel Perez de la Mesa
Full Name (Last, First, Middle Initial)

Mailing Address 109 Northpark Blvd

City Covington State LA Zip Code 70433

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

Name of Employer Pool corp Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2014
Transaction ID : SA11AI.6860

Amount of Each Receipt this Period 1000.00

C. Roger L. Plizga
Full Name (Last, First, Middle Initial)

Mailing Address 4700 Hudson Dr.

City Stow State OH Zip Code 44224

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

Name of Employer Laird Plastics Occupation Regional Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2014
Transaction ID : SA11AI.6826

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 OF 23
(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. Mr. Byron Potter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Centre Park Blvd
 City State Zip Code
 DeSoto TX 75123-1660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dallas Wholesale Builders Supply Inc President and CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6832
 Amount of Each Receipt this Period
 500.00

B. John Pregonzer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1941 Ringwood Avenue
 City State Zip Code
 San Jose CA 95131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Valin COO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6837
 Amount of Each Receipt this Period
 500.00

C. Mitchell Reaves
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 11258
 City State Zip Code
 Lynchburg VA 24506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N.B Handy Co. President/CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6833
 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 14 OF 23
	<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

Full Name (Last, First, Middle Initial) A. Jon N. Reed		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 34 north Meramec Avenue		Transaction ID : SA11AI.6818
City St. Louis	State MO	Zip Code 63105
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Graybar Electric Company	Occupation VP & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. James K Risk III		Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address P. O. Box 5089		Transaction ID : SA11AI.6856
City Lafayette	State IN	Zip Code 47903
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00	
Name of Employer kirby Risk Electrical Supply	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Stephen V. Ruane		Date of Receipt M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 4201 Northview Drive Ste. 303		Transaction ID : SA11AI.6823
City Bowie	State MD	Zip Code 20716
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Imark Group Inc.	Occupation Vice President - Marketing	
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).....▶	3500.00
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 15 OF 23
(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. Kevin Short
 Full Name (Last, First, Middle Initial)
 Mailing Address 5616 Remington Park Dr.
 City Flower Mound State TX Zip Code 75028
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014
Transaction ID : SA11AI.6835
 Amount of Each Receipt this Period
 250.00

B. Robin Slater
 Full Name (Last, First, Middle Initial)
 Mailing Address 1941 Ringwood Avenue
 City San Jose State CA Zip Code 95131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Valin Corporation Occupation Vice President of Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2014
Transaction ID : SA11AI.6827
 Amount of Each Receipt this Period
 500.00

C. Dale Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 3063 Fiat
 City Springfield State IL Zip Code 62703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer H.D. Smith Occupation Chairman/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2014
Transaction ID : SA11AI.6861
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
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 16 OF 23
	<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. Dan Starr
Full Name (Last, First, Middle Initial)
Mailing Address 6502 Nelson Rd.
City Ft. Wayne State IN Zip Code 46803
FEC ID number of contributing federal political committee. **C**
Name of Employer Do it Best Corp. Occupation Executive Vice President & COO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 22 / 2014**
Transaction ID : SA11AI.6821
Amount of Each Receipt this Period **500.00**

B. Robert Taylor
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 868
City Fort Wayne State IN Zip Code 46814
FEC ID number of contributing federal political committee. **C**
Name of Employer Do It Best Corp. Occupation President & CEO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **02 / 19 / 2014**
Transaction ID : SA11AI.6858
Amount of Each Receipt this Period **5000.00**

C. John Then
Full Name (Last, First, Middle Initial)
Mailing Address 4441 Industrial Dr.
City Alton State IL Zip Code 62002
FEC ID number of contributing federal political committee. **C**
Name of Employer Cope Plastics, Inc. Occupation CFO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **01 / 31 / 2014**
Transaction ID : SA11AI.6839
Amount of Each Receipt this Period **750.00**

SUBTOTAL of Receipts This Page (optional)..... **6250.00**
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 17 OF 23
(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

Full Name (Last, First, Middle Initial)
A. Dan R. Tinker

Mailing Address 5900 S. Lake Forest Dr.
 Ste. 400

City McKinney State TX Zip Code 75070

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

Name of Employer SRS Distribution Occupation COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11AI.6807

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
B. Mr. John Tracy

Mailing Address 17050 Baxter Road #250

City Chesterfield State MO Zip Code 63005

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

Name of Employer Dot Foods Inc Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11AI.6830

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	34250.00

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

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

FOR LINE NUMBER: PAGE 18 OF 23
(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. JIM GERLACH FOR CONGRESS COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 87
 City Uwchland State PA Zip Code 19480
 FEC ID number of contributing federal political committee. **C** C00372102
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA16.6862
 Amount of Each Receipt this Period
 1000.00
 Originally disbursed on 5/8/13

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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

Full Name (Last, First, Middle Initial)

A. BIPAC - BUSINESS INSTITUTE FOR POLITICAL ANALYSIS

Mailing Address 888 16TH STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Political Contributor

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	10	/	2014

Transaction ID : SB23.6761

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CORY GARDNER FOR SENATE

Mailing Address 9227 E. LINCOLN AVE., #200-234

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement
Political Contribution

Candidate Name

CORY GARDNER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

Transaction ID : SB23.6781

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. ED GILLESPIE FOR SENATE

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement
Political Contribution

Candidate Name

EDWARD W GILLESPIE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

Transaction ID : SB23.6796

Amount of Each Disbursement this Period

5000.00

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

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

11000.00

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**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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVID JOLLY

Mailing Address P. O. BOX 1158

City INDIAN ROCKS BEACH State FL Zip Code 33785

Purpose of Disbursement
Political Contribution

Candidate Name
DAVID W. JOLLY

Office Sought: House
 Senate
 President
State: FL District: 13

Disbursement For: 2014
 Primary General
 Other (specify) **Special-General**

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2014

Transaction ID : **SB23.6757**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KLINE FOR CONGRESS

Mailing Address 350 W BURNSVILLE PKWY
STE 375

City BURNSVILLE State MN Zip Code 55337

Purpose of Disbursement
Political Contribution

Candidate Name
JOHN PAUL JR KLINE

Office Sought: House
 Senate
 President
State: MN District: 02

Disbursement For: 2014
 Primary General
 Other (specify) **General**

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2014

Transaction ID : **SB23.6775**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MCCONNELL SENATE COMMITTEE '14

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement
Political Contribution

Candidate Name
MITCH MCCONNELL

Office Sought: House
 Senate
 President
State: KY District: 00

Disbursement For: 2014
 Primary General
 Other (specify) **Primary**

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2014

Transaction ID : **SB23.6787**

Amount of Each Disbursement this Period

2500.00

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

4500.00

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)

<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

Full Name (Last, First, Middle Initial)

A. RAYE FOR CONGRESS

Mailing Address P.O. BOX 207

City EASTPORT State ME Zip Code 04631

Purpose of Disbursement
Political Contribution

Candidate Name

KEVIN L. RAYE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	07	/	2014

Transaction ID : SB23.6778

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RODNEY FOR CONGRESS

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement
Political Contribution

Candidate Name

RODNEY L DAVIS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2014

Transaction ID : SB23.6769

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SULLIVAN FOR US SENATE

Mailing Address 3705 ARCTIC BLVD #447

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
Political Contribution

Candidate Name

DAN SULLIVAN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AK District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2014

Transaction ID : SB23.6766

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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**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

Full Name (Last, First, Middle Initial)

A. TERRI LYNN LAND FOR SENATE

Mailing Address PO BOX 308

City GRANDVILLE State MI Zip Code 49418

Purpose of Disbursement
Political Contribution

Candidate Name
TERRI LYNN LAND

Office Sought: House Senate President
Disbursement For: 2014 Primary General
 Other (specify) ▼
State: MI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Transaction ID : SB23.6772

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. TEXANS FOR SENATOR JOHN CORNYN INC

Mailing Address PO BOX 13026

City AUSTIN State TX Zip Code 78711

Purpose of Disbursement
Political Contribution

Candidate Name
JOHN CORNYN

Office Sought: House Senate President
Disbursement For: 2014 Primary General
 Other (specify) ▼
State: TX District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

Transaction ID : SB23.6763

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. THOM TILLIS COMMITTEE

Mailing Address PO BOX 2489

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement
Political Contribution

Candidate Name
THOM R TILLIS

Office Sought: House Senate President
Disbursement For: 2014 Primary General
 Other (specify) ▼
State: NC District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SB23.6799

Amount of Each Disbursement this Period

2500.00

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

7500.00

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

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**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

Full Name (Last, First, Middle Initial)

A. TISEI CONGRESSIONAL COMMITTEE

Mailing Address 26 MAIN STREET

City LYNNFIELD State MA Zip Code 01940

Purpose of Disbursement
Political Contribution

Candidate Name
RICHARD R. TISEI

Office Sought: House
 Senate
 President
State: MA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2014

Transaction ID : **SB23.6793**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. WALBERG FOR CONGRESS

Mailing Address PO BOX 1362

City JACKSON State MI Zip Code 49204

Purpose of Disbursement
Political Contribution

Candidate Name
TIMOTHY L HON. WALBERG

Office Sought: House
 Senate
 President
State: MI District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2014

Transaction ID : **SB23.6784**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2000.00

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

28000.00