

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)

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☒ 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 (Last, First, Middle Initial)

A. Kenneth Villani

Mailing Address 8285 Jericho Tpke

City

Woodbury

State

NY

Zip Code

11797-1886

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cottage Pharmacy Inc

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 20 / 2014

Transaction ID : 201406059829-349

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Michael Vinson

Mailing Address 934 Adams Ave

City

Montgomery

State

AL

Zip Code

36104-4422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Adams Drugs

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 20 / 2014

Transaction ID : 201406059829-102

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Kent L. Watts

Mailing Address 1465A S Alabama Ave

City

Monroeville

State

AL

Zip Code

36460-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medicine Shoppe

Occupation

Owner/Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / 14 / 2014

Transaction ID : 201406059829-46

Amount of Each Receipt this Period

365.00

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

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

665.00