

**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)  
National Community Pharmacists Association - PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Marion Berry for Congress</p> <p>Mailing Address PO Box 8084</p> <p>City Jonesboro State AR Zip Code 72403</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Marion Berry</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District: 01</p>	<p><b>Transaction ID:</b> 35781 <b>Date of Disbursement</b> 07 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matsui for Congress</p> <p>Mailing Address PO Box 1738</p> <p>City Sacramento State CA Zip Code 95812</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Doris O. Matsui</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 05</p>	<p><b>Transaction ID:</b> 35759 <b>Date of Disbursement</b> 07 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mike McMahon for Congress</p> <p>Mailing Address 66 Arnold Street</p> <p>City Staten Island State NY Zip Code 10301</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Michael E. McMahon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 13</p>	<p><b>Transaction ID:</b> 35789 <b>Date of Disbursement</b> 07 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6500.00
<b>TOTAL</b> This Period (last page this line number only) .....	