

**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. COLLINS FOR CONGRESS**

Mailing Address PO BOX 386

City CLARENCE State NY Zip Code 14031

Purpose of Disbursement  
Political Contribution

Candidate Name  
**CHRISTOPHER CARL COLLINS**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NY District: 27

Date of Disbursement

/  /

Transaction ID : **SB23.6543**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT CHARLIE SUMMERS**

Mailing Address PO BOX 511

City SCARBOROUGH State ME Zip Code 04070

Purpose of Disbursement  
Political Contribution

Candidate Name  
**CHARLES EDWARD JR SUMMERS**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: ME District: 00

Date of Disbursement

/  /

Transaction ID : **SB23.6540**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JOE HECK**

Mailing Address PO BOX 750114

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement  
Political Contribution

Candidate Name  
**JOE HECK**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: NV District: 03

Date of Disbursement

/  /

Transaction ID : **SB23.6537**

Amount of Each Disbursement this Period

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

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