

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.

National Association of Chain Drug Stores Political Action Committee

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:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

07 / 01 / 2011 through 12 / 31 / 2011

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 R. James Huber

Signature of Treasurer *R. James Huber* [Electronically Filed] Date / /

01 / 18 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Association of Chain Drug Stores Political Action Committee

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="2011"/>		22723.13
(b) Cash on Hand at Beginning of Reporting Period.....	59115.84	
(c) Total Receipts (from Line 19)	87090.78	215491.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	146206.62	238214.35
7. Total Disbursements (from Line 31).....	47589.87	139597.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	98616.75	98616.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

Write or Type Committee Name

National Association of Chain Drug Stores Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	72322.20	185272.84
(ii) Unitemized	1654.94	4934.93
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	73977.14	190207.77
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	12500.00	23500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	86477.14	213707.77
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).....	600.26	1750.27
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	13.38	33.18
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))..... ▶	87090.78	215491.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	87090.78	215491.22

DETAILED SUMMARY PAGE
of Disbursements

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	1021.52	2529.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1021.52	2529.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42250.00	132750.00
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	4318.35	4318.35
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)) ..	47589.87	139597.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47589.87	139597.60

DETAILED SUMMARY PAGE
of Disbursements

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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)	86477.14	213707.77
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	86477.14	213707.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1021.52	2529.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	600.26	1750.27
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	421.26	778.98

**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 6 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Lynne Fruth		Date of Receipt MM / DD / YYYY 08 / 03 / 2011 Transaction ID : 33628878
Mailing Address 416 Arrowhead Drive		Amount of Each Receipt this Period 1000.00
City Hurricane	State WV	
Zip Code 25526-9112		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Fruth Pharmacy	Occupation Chairman of the Board	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Mr. Michael C. Kaufmann		Date of Receipt MM / DD / YYYY 09 / 09 / 2011 Transaction ID : 33750633
Mailing Address 7000 Cardinal PI		Amount of Each Receipt this Period 2500.00
City Dublin	State OH	
Zip Code 43017-1091		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Medicine Shoppe International, Inc.	Occupation Chief Executive Officer - Pharmaceutic	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mr. Christopher T. Dimos RPh		Date of Receipt MM / DD / YYYY 10 / 08 / 2011 Transaction ID : 33863960
Mailing Address 1206 Maple Avenue		Amount of Each Receipt this Period 1000.00
City Downers Grove	State IL	
Zip Code 60515-4816		Aggregate Year-to-Date ▼ 2000.00
FEC ID number of contributing federal political committee. C		
Name of Employer SUPERVALU INC.	Occupation President, Pharmacy Operations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 7 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Mr. Douglas Dean Rewerts
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 E Fish Lake Rd Ste 118
 City State Zip Code
 Maple Grove MN 55369-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Thrifty White Stores Director, Independent Retail Program
 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
 10 / 12 / 2011
Transaction ID : 33895459
 Amount of Each Receipt this Period
 500.00

B. Mr. Dave A. Rueter
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 E Fish Lake Rd Ste 118
 City State Zip Code
 Maple Grove MN 55369-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Thrifty White Stores VP of Personnel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2011
Transaction ID : 33930834
 Amount of Each Receipt this Period
 365.00

C. Mr. Robert J. Narveson
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 E Fish Lake Rd Ste 118
 City State Zip Code
 Maple Grove MN 55369-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Thrifty White Stores President and Chief Executive Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2011
Transaction ID : 33954913
 Amount of Each Receipt this Period
 2250.00

SUBTOTAL of Receipts This Page (optional).....▶	3115.00
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 8 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Mr. Jeff Lindoo
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 Ridgewood Dr NW
 City Alexandria State MN Zip Code 56308-4947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Thrifty White Stores Occupation Executive Vice President, Long Term He
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2011
Transaction ID : 33956411
 Amount of Each Receipt this Period 500.00

B. Mr. Tim Kremer
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 E Fish Lake Rd Ste 118
 City Maple Grove State MN Zip Code 55369-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Thrifty White Stores Occupation District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 11 / 08 / 2011
Transaction ID : 33978664
 Amount of Each Receipt this Period 365.00

C. Mr. Tom Wells
 Full Name (Last, First, Middle Initial)
 Mailing Address 6901 E Fish Lake Rd Ste 118
 City Maple Grove State MN Zip Code 55369-5454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Thrifty White Stores Occupation District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 11 / 08 / 2011
Transaction ID : 33978665
 Amount of Each Receipt this Period 365.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1230.00
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 9 OF 47
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Owen Halloran		Date of Receipt
Mailing Address 29 E Main St		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
City State Zip Code Gouverneur NY 13642-1401		Transaction ID : 33993949
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Kinney Drugs, Inc. Vice President, Professional Services		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. Michael Dosch		Date of Receipt
Mailing Address 2832 Hickory Street N		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
City State Zip Code Fargo ND 58102-1715		Transaction ID : 33997793
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Thrifty White Stores Pharmacist		<input type="text" value="365.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="365.00"/>

Full Name (Last, First, Middle Initial) C. Mr. Mark Brackett		Date of Receipt
Mailing Address 520 E. Main Street		<input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
City State Zip Code Gouverneur NY 13642-1561		Transaction ID : 34088371
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Kinney Drugs, Inc. Vice President, Human Resources		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1615.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Mr. Jose Barra
 Full Name (Last, First, Middle Initial)
 Mailing Address 9688 Geisler Road
 City Eden Prairie State MN Zip Code 55347-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Target Corporation Occupation DMM, Healthcare
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 34101664
 Amount of Each Receipt this Period
 1000.00

B. Mr. Larry Greco
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 Sandringham South
 City Moraga State CA Zip Code 94556-1931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kinney Drugs, Inc. Occupation Director, Kinney Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 34112483
 Amount of Each Receipt this Period
 1000.00

c. MR. Thomas J. Sabatino
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Wilmot Road
 City Deerfield State IL Zip Code 60015-5145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Walgreen Co. Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 34116880
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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 11 OF 47
	<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)
National Association of Chain Drug Stores Political Action Committee

A. Mr. Jeffrey Kang
Full Name (Last, First, Middle Initial)

Mailing Address 245 North Main Street

City Wallingford State CT Zip Code 06492-3713

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

Name of Employer Walgreen Co. Occupation SVP, Health and Wellness

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 34116884

Amount of Each Receipt this Period
 5000.00

B. Mr. Jerry D. Cline
Full Name (Last, First, Middle Initial)

Mailing Address 3909 W Vandalia St

City Broken Arrow State OK Zip Code 74012-6137

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

Name of Employer AmerisourceBergen Corporation Occupation Group Vice President, Retail

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 34117263

Amount of Each Receipt this Period
 5000.00

C. Mr. Charles Greener
Full Name (Last, First, Middle Initial)

Mailing Address 112 Oak Terrace

City Lake Bluff State IL Zip Code 60044-2718

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

Name of Employer Walgreen Co. Occupation Vice President, Corporate Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 34117264

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
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 47
	<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)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Wade D. Miquelon		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 34117265
Mailing Address 875 Gordon Terrace		Amount of Each Receipt this Period 5000.00
City Winnetka	State IL	Zip Code 60093-1726
FEC ID number of contributing federal political committee. C	Name of Employer Walgreen Co.	Occupation SVP & CFO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. Tim Theriault		Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 34117266
Mailing Address 3624 Salt Creek Circle		Amount of Each Receipt this Period 2500.00
City Oak Brook	State IL	Zip Code 60523-7709
FEC ID number of contributing federal political committee. C	Name of Employer Walgreen Co.	Occupation CIO and SVP
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. Mr. Larry Palmer		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2011 Transaction ID : 34121356
Mailing Address 9095 Kaeding Ave. NE		Amount of Each Receipt this Period 365.00
City Otsego	State MN	Zip Code 55362-4529
FEC ID number of contributing federal political committee. C	Name of Employer Thrifty White Stores	Occupation Director of Long Term Care
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional).....▶	7865.00
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 13 OF 47
	<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)
National Association of Chain Drug Stores Political Action Committee

A. Mr. Mark Wagner
Full Name (Last, First, Middle Initial)

Mailing Address 200 Wilmot Rd

City Deerfield State IL Zip Code 60015-4620

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

Name of Employer Walgreen Co. Occupation Executive Vice President, Operations a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 22 / 2011
Transaction ID : 34178535

Amount of Each Receipt this Period
5000.00

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

Mailing Address 30 Hunter Ln

City Camp Hill State PA Zip Code 17011-2400

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

Name of Employer Rite Aid Corporation Occupation President and COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2011
Transaction ID : 34180237

Amount of Each Receipt this Period
5000.00

C. Mr. Ken Martindale
Full Name (Last, First, Middle Initial)

Mailing Address 30 Hunter Ln

City Camp Hill State PA Zip Code 17011-2400

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

Name of Employer Rite Aid Corporation Occupation Senior EVP, Merchandising, Marketing,

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2011
Transaction ID : 34180240

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Kathleen Jaeger		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2011 Transaction ID : 34180241
Mailing Address 1679 Hunting Crest Way		Amount of Each Receipt this Period 1000.00
City Vienna	State VA	Zip Code 22182-1563
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer National Association of Chain Drug Sto	Occupation Sr. VP Pharm. Care & Patient Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Carol Kelly		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2011 Transaction ID : 34180243
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 3000.00
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer National Association of Chain Drug Sto	Occupation Senior Vice President, Government Affa	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Mr. Frank Vitrano		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2011 Transaction ID : 34180245
Mailing Address PO Box 3165		Amount of Each Receipt this Period 5000.00
City Harrisburg	State PA	Zip Code 17105-3165
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Rite Aid Corporation	Occupation Senior Executive Vice President, CFO a	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	9000.00
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 15 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Don L. Bell II		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1054895626237
Mailing Address 413 N Lee St		Amount of Each Receipt this Period 1346.10
City Alexandria	State VA	Zip Code 22314-2301
FEC ID number of contributing federal political committee. C		P/R Deduction (\$96.15 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Senior Vice President, Legal Affairs a	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2211.45	

Full Name (Last, First, Middle Initial) B. Mr. David M. Fitzsimmons		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1054896226237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 269.22
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.23 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Finance and Accounting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) C. Mrs. Sandra Kay Guckian		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1054896926237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 1346.10
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$96.15 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President & Deputy Director, Stat	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2259.55	

SUBTOTAL of Receipts This Page (optional).....▶	2961.42
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 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Rhoda Kelly		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1054897026237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 538.44
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Membership Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.96	

Full Name (Last, First, Middle Initial) B. Mr. James A. Whitman		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1054897926237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 1076.88
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$76.92 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Senior Vice President, Member Programs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1999.92	

Full Name (Last, First, Middle Initial) C. Mr. Terrence Arth		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1055162926237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 196.56
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$14.04 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Meetings & Internation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.84	

SUBTOTAL of Receipts This Page (optional).....▶	1811.88
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 17 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Paul T. Kelly		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1055164126237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 1009.54
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$72.11 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Federal Legislative Af	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1773.92	

Full Name (Last, First, Middle Initial) B. Ms. Diane Darvey		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1055165026237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 538.44
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Director, Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.96	

Full Name (Last, First, Middle Initial) C. Mr. Larry Lotridge		Date of Receipt 12 / 31 / 2011 Transaction ID : PR1055173626237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 269.22
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$19.23 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Conference Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

SUBTOTAL of Receipts This Page (optional).....▶	1817.20
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 18 OF 47
	<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)
National Association of Chain Drug Stores Political Action Committee

A. Mr. Kevin N. Nicholson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1417-D49
 City Alexandria State VA Zip Code 22313-1480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Association of Chain Drug Sto
 Occupation Vice President, Government Affairs & P
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **596.13**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR1055174726237
 Amount of Each Receipt this Period
269.22
 P/R Deduction (\$19.23 Bi-Weekly)

B. Ms. Julie Khani
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1417-D49
 City Alexandria State VA Zip Code 22313-1480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Association of Chain Drug Sto
 Occupation Vice President, Public Policy
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **1024.92**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR1055177426237
 Amount of Each Receipt this Period
551.88
 P/R Deduction (\$39.42 Bi-Weekly)

C. Ms. Laura Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 4855 Evergreen Lane N.
 City Plymouth State MN Zip Code 55442-2275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Association of Chain Drug Sto
 Occupation Senior Economist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR2183668826237
 Amount of Each Receipt this Period
134.68
 P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	955.78
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 19 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Christopher Krese		Date of Receipt 12 / 31 / 2011 Transaction ID : PR2231851426237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 1077.02
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$76.93 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation SVP, Marketing, Communications, & Medi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.18	

Full Name (Last, First, Middle Initial) B. Ms. Christine M. Kopple		Date of Receipt 12 / 31 / 2011 Transaction ID : PR2257462226237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 538.44
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Vice President, Media Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 951.91	

Full Name (Last, First, Middle Initial) C. Ms. Nora Reich		Date of Receipt 12 / 31 / 2011 Transaction ID : PR2257462526237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 134.68
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C		P/R Deduction (\$9.62 Bi-Weekly)
Name of Employer National Association of Chain Drug Sto	Occupation Executive Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.12	

SUBTOTAL of Receipts This Page (optional).....▶	1750.14
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 20 OF 47
	<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)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Marc Schloss		Date of Receipt 12 / 31 / 2011 Transaction ID : PR2390680726237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 269.22
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C	Name of Employer National Association of Chain Drug Sto	Occupation Director, Federal Government Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Dr. Alex Adams		Date of Receipt 12 / 31 / 2011 Transaction ID : PR2391841926237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 196.56
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C	Name of Employer National Association of Chain Drug Sto	Occupation Director, Pharmacy Programs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.09	P/R Deduction (\$14.04 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Ms. Dawn F. Worthington		Date of Receipt 12 / 31 / 2011 Transaction ID : PR2444803126237
Mailing Address PO Box 1417-D49		Amount of Each Receipt this Period 196.56
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C	Name of Employer National Association of Chain Drug Sto	Occupation VP, Human Resources
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.84	P/R Deduction (\$14.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	662.34
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 21 OF 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jennifer Anne Foley

Mailing Address 218 7th Street NE
Apt B

City Washington State DC Zip Code 20002-6075

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

Name of Employer National Association of Chain Drug Sto Occupation Director, Political Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **999.96**

Date of Receipt **12 / 31 / 2011**

Transaction ID : PR2489082326237

Amount of Each Receipt this Period **538.44**

P/R Deduction (\$38.46 Bi-Weekly)

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	538.44
TOTAL This Period (last page this line number only).....▶	72322.20

**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 22 OF 47
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)
A. Kerr Drug, Inc. PAC

Mailing Address 3220 Spring Forest Rd.

City Raleigh State NC Zip Code 27616-2822

FEC ID number of contributing federal political committee. **C C00368381**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 09 / 2011
Transaction ID : 33750634

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. ValuPAC

Mailing Address 11840 VALLEY VIEW ROAD

City Eden Prairie State MN Zip Code 55344

FEC ID number of contributing federal political committee. **C C00243220**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2011
Transaction ID : 34025050

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
C. Rite Aid Corp. PAC

Mailing Address P.O. Box 3165

City Harrisburg State PA Zip Code 17105

FEC ID number of contributing federal political committee. **C C00104083**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 34088340

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 23 OF 47
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

A. Cardinal Health Inc. PAC
Full Name (Last, First, Middle Initial)
Mailing Address 7000 CARDINAL PLACE
City Dublin State OH Zip Code 43017
FEC ID number of contributing federal political committee. **C** C00332833
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : 34262835
Amount of Each Receipt this Period
2500.00

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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	12500.00

**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 24 OF 47
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial) A. National Association of Chain Drug Stores		Date of Receipt MM / DD / YYYY 07 / 12 / 2011 Transaction ID : 33548751
Mailing Address 413 N. Lee Street		Amount of Each Receipt this Period 117.28
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1267.29	
		Jun.11 Bank Fees Reimbursement

Full Name (Last, First, Middle Initial) B. National Association of Chain Drug Stores		Date of Receipt MM / DD / YYYY 08 / 04 / 2011 Transaction ID : 33628917
Mailing Address 413 N. Lee Street		Amount of Each Receipt this Period 63.12
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1330.41	
		Jul.11 Bank Fees Reimbursement

Full Name (Last, First, Middle Initial) C. National Association of Chain Drug Stores		Date of Receipt MM / DD / YYYY 09 / 08 / 2011 Transaction ID : 33750573
Mailing Address 413 N. Lee Street		Amount of Each Receipt this Period 63.06
City Alexandria	State VA	Zip Code 22313-1480
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1393.47	
		Aug.11 - Bank Fees Reimbursement

SUBTOTAL of Receipts This Page (optional).....▶	243.46
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 25 OF 47
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)
A. National Association of Chain Drug Stores

Mailing Address 413 N. Lee Street

City Alexandria State VA Zip Code 22313-1480

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1456.42

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2011
Transaction ID : 33898458

Amount of Each Receipt this Period
62.95

Sep.11 Bank Fees Reimbursement

Full Name (Last, First, Middle Initial)
B. National Association of Chain Drug Stores

Mailing Address 413 N. Lee Street

City Alexandria State VA Zip Code 22313-1480

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1572.62

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 08 / 2011
Transaction ID : 33977756

Amount of Each Receipt this Period
116.20

Oct.11 Bank Fees Reimbursement

Full Name (Last, First, Middle Initial)
C. National Association of Chain Drug Stores

Mailing Address 413 N. Lee Street

City Alexandria State VA Zip Code 22313-1480

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.27

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 13 / 2011
Transaction ID : 34238885

Amount of Each Receipt this Period
177.65

Nov. 11 Bank Fees Reimbursement

SUBTOTAL of Receipts This Page (optional).....	356.80
TOTAL This Period (last page this line number only).....	600.26

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
07/31/11 Merchant Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2011

Transaction ID : 33621619

Amount of Each Disbursement this Period

45.12

07/31/11 Merchant Fees

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
07/31/11 Analysis/Ck.Imaging Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2011

Transaction ID : 33621621

Amount of Each Disbursement this Period

18.00

07/31/11 Analysis/Ck.Imaging Fees

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
08/31/11 Bank Merchant Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Transaction ID : 33721269

Amount of Each Disbursement this Period

45.06

08/31/11 Bank Merchant Fees

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

108.18

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
08/31/11 Ck. Analysis & Imaging Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Transaction ID : 33721550

Amount of Each Disbursement this Period

18.00

08/31/11 Ck. Analysis & Imaging Fee

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
09/30/11 Merchant Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2011

Transaction ID : 33862480

Amount of Each Disbursement this Period

44.95

09/30/11 Merchant Fees

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
09/30/11 Analysis/Ck. Imaging Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2011

Transaction ID : 33862481

Amount of Each Disbursement this Period

18.00

09/30/11 Analysis/Ck. Imaging Fees

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

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

80.95

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
10/31/11 Merchant Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 33972420

Amount of Each Disbursement this Period

10/31/11 Merchant Fees

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
10/31/11 Check Analysis & Imaging Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 33972422

Amount of Each Disbursement this Period

10/31/11 Check Analysis & Imaging Fees

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
10/31/11 ACH Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 33973303

Amount of Each Disbursement this Period

10/31/11 ACH Fee

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

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
11/30/11 Merchat/CC Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : 34088332

Amount of Each Disbursement this Period

158.65

11/30/11 Merchat/CC Fees

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
11/30/11 Ck. Analysis/Imaging Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : 34088335

Amount of Each Disbursement this Period

18.00

11/30/11 Ck. Analysis/Imaging Fees

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
12/31/11 Merchant/ CC Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : 34149724

Amount of Each Disbursement this Period

435.00

12/31/11 Merchant/ CC Fees

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

611.65

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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
12/31/11 Merchant/CC Fees

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2011					

Transaction ID : 34264478

Amount of Each Disbursement this Period

104.54

12/31/11 Merchant/CC Fees

B.

Full Name (Last, First, Middle Initial)

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	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

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	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

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

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

104.54

1021.52

**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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jim Himes For Congress

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. James A. Himes

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	1

Transaction ID : 33641768

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. 21st Century Majority Fund

Mailing Address 900 19th St., NW, 8th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement

011

Category/
Type

Candidate Name

21st Century Majority Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	1

Transaction ID : 33641769

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Portman For Senate Committee

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Rob Portman

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	1

Transaction ID : 33641770

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

2	2	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

2	2	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Pryor For Us Senate

Mailing Address PO Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Mark L. Pryor

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: AR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2011

Transaction ID : 33641771

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Richardson For Congress

Mailing Address 110 Pine Ave., #1010

City Long Beach State CA Zip Code 90802

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Laura Richardson

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 37

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2011

Transaction ID : 33641772

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mike R Fund

Mailing Address P O Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mike R Fund

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2011

Transaction ID : 33641773

Amount of Each Disbursement this Period

1000.00

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

4500.00

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Courtney For Congress

Mailing Address 38 Risley Road

City State Zip Code
Vernon CT 06066

Purpose of Disbursement
Funds Reported On 2011 July 31 Mid-Year Report

011

Candidate Name

Rep. Joseph D. Courtney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	1

Transaction ID : 33650993

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

[MEMO ITEM]

Funds Reported On 2011 July 31 Mid-Year Report

Full Name (Last, First, Middle Initial)

B. Courtney For Congress

Mailing Address 38 Risley Road

City State Zip Code
Vernon CT 06066

Purpose of Disbursement
Re-designated funds for trans. dated 06/27/2011

011

Candidate Name

Rep. Joseph D. Courtney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼
2012 Convention

State: CT District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		6	1		2	0	1	1

Transaction ID : 33650994

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

[MEMO ITEM]

Re-designated funds for trans. dated 06/27/2011

Full Name (Last, First, Middle Initial)

C. Amodei For Nevada

Mailing Address 503 N Division St

City State Zip Code
Carson City NV 89703

Purpose of Disbursement

011

Candidate Name

Mr. Mark Amodei

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: NV District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	1

Transaction ID : 33695020

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

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

2	0	0	0	0	0	0	0	0	0

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

2	0	0	0	0	0	0	0	0	0

**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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles Boustany Jr. Md For Congress, Inc.

Mailing Address PO Box 80126

City State Zip Code
Lafayette LA 70598

Purpose of Disbursement

011

Candidate Name

Rep. Charles W. Boustany Jr.

Category/
Type

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 33809480

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Braley For Congress

Mailing Address PO Box 390

City State Zip Code
Waterloo IA 50704

Purpose of Disbursement

011

Candidate Name

Rep. Bruce Braley

Category/
Type

Office Sought: House
 Senate
 President
State: IA District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 33810369

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. John D. Dingell For Congress

Mailing Address 700 13th Street, Nw
Suite 600

City State Zip Code
Washington DC 20005

Purpose of Disbursement

011

Candidate Name

Rep. John D. Dingell

Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 15

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 33810370

Amount of Each Disbursement this Period

1000.00

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

2500.00

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Doggett For Us Congress

Mailing Address PO Box 5843

City Austin State TX Zip Code 78763

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Lloyd Doggett

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 25

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 33810372

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Feinstein For Senate

Mailing Address 1801 Avenue Of The Stars Suite 829

City Los Angeles State CA Zip Code 90067

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Dianne Feinstein

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 33810375

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Rush Holt For Congress

Mailing Address PO Box 782

City Pennington State NJ Zip Code 08534

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Rush D. Holt

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2011

Transaction ID : 33810377

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

--

**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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Moran for Kansas

Mailing Address PO Box 1151

City Hays State KS Zip Code 67601

Purpose of Disbursement

011
Category/
Type

Candidate Name

Mr. Jerry Moran

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2011

Transaction ID : 33810399

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Texans For Lamar Smith

Mailing Address PO Box 6155

City San Antonio State TX Zip Code 78209

Purpose of Disbursement

011
Category/
Type

Candidate Name

Rep. Lamar S. Smith

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 21

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2011

Transaction ID : 33810401

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens For Altmire

Mailing Address P.O. Box 1776

City Freedom State PA Zip Code 15042

Purpose of Disbursement

011
Category/
Type

Candidate Name

Rep. Jason Altmire

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 04

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2011

Transaction ID : 33813349

Amount of Each Disbursement this Period

1000.00

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

3000.00

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pallone For Congress

Mailing Address PO Box 3176

City State Zip Code
Long Branch NJ 07740

Purpose of Disbursement

011

Candidate Name

Rep. Frank Pallone Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	1

Transaction ID : 33813522

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. The Congressman Joe Barton Committee

Mailing Address P.O. Box 1444

City State Zip Code
Ennis TX 75120

Purpose of Disbursement

011

Candidate Name

Rep. Joe L. Barton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	1

Transaction ID : 33993211

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Bennet For Colorado

Mailing Address PO Box 3078

City State Zip Code
Denver CO 80201

Purpose of Disbursement

011

Candidate Name

Mr. Michael Bennet

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼
2010 General Debt Re

State: CO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	1

Transaction ID : 33993212

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

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

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

5	5	0	0	.	0	0
---	---	---	---	---	---	---

5	5	0	0	.	0	0
---	---	---	---	---	---	---

**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 Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Sherrod Brown

Mailing Address PO Box 76187

City Washington State DC Zip Code 20013

Purpose of Disbursement

011

Candidate Name

Sen. Sherrod Brown

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2011

Transaction ID : 33993219

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. John D. Dingell For Congress

Mailing Address 700 13th Street, Nw
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Candidate Name

Rep. John D. Dingell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2011

Transaction ID : 33993221

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Dick Durbin Committee

Mailing Address PO Box 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement

011

Candidate Name

Sen. Richard J. Durbin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2011

Transaction ID : 33993222

Amount of Each Disbursement this Period

2500.00

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

5500.00

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Renee Ellmers For Congress Committee

Mailing Address P.O. Box 904

City State Zip Code
Dunn NC 28335

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Renee Ellmers RN

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2011			

Transaction ID : 33993223

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Michaud For Congress

Mailing Address 213 Lisbon St

City State Zip Code
Lewiston ME 04240

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Michael H. Michaud

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2011			

Transaction ID : 33993226

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Olson For Congress Committee

Mailing Address PO Box 16381

City State Zip Code
Sugar Land TX 77496

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Pete Olson

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 22

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2011			

Transaction ID : 33993227

Amount of Each Disbursement this Period

1000.00

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

3000.00

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)

Grid for line numbers 21b through 30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

011

Candidate Name

Rep. Mike Thompson

Category/Type

Office Sought: [X] House [] Senate [] President

Disbursement For: 2012 [X] Primary [] General [] Other (specify) v

State: CA District: 01

Date of Disbursement

Date picker showing 11 / 10 / 2011

Transaction ID : 33993230

Amount of Each Disbursement this Period

Amount field showing 1000.00

Full Name (Last, First, Middle Initial)

B. Gillibrand For Senate

Mailing Address 236 Massachusetts Ave Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

Sen. Kirsten E. Gillibrand

Category/Type

Office Sought: [] House [X] Senate [] President

Disbursement For: 2012 [X] Primary [] General [] Other (specify) v

State: NY District:

Date of Disbursement

Date picker showing 12 / 16 / 2011

Transaction ID : 34121372

Amount of Each Disbursement this Period

Amount field showing 1000.00

Full Name (Last, First, Middle Initial)

C. Marino For Congress

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement

011

Candidate Name

Rep. Tom Marino

Category/Type

Office Sought: [X] House [] Senate [] President

Disbursement For: 2012 [X] Primary [] General [] Other (specify) v

State: PA District: 10

Date of Disbursement

Date picker showing 12 / 16 / 2011

Transaction ID : 34121375

Amount of Each Disbursement this Period

Amount field showing 1000.00

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

3000.00

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Price For Congress

Mailing Address P.O. Box 1986

City Raleigh State NC Zip Code 27602

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. David E. Price

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NC District: 04

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : 34121378

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Searchlight Leadership Fund

Mailing Address 426 C St., NE Rear Building

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Category/
Type

Candidate Name

Searchlight Leadership Fund

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : 34121381

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Allyson Schwartz For Congress

Mailing Address P.O. Box 2232

City Jenkintown State PA Zip Code 19046

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Allyson Y. Schwartz

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : 34121382

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stabenow For Us Senate

Mailing Address P.O. Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Debbie Stabenow

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : 34121404

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Pete Stark Re-Election Committee

Mailing Address P.O. Box 8331

City Fremont State CA Zip Code 94537

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Fortney Peter Stark

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : 34121406

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Sherrod Brown

Mailing Address PO Box 76187

City Washington State DC Zip Code 20013

Purpose of Disbursement
Funds Reported On <Enter Report Name Here>

011

Category/
Type

Candidate Name

Sen. Sherrod Brown

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2011

Transaction ID : 34268908

Amount of Each Disbursement this Period

2500.00

[MEMO ITEM]

Funds Reported On <Enter Report Name Here>

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

3500.00

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)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Sherrod Brown

Mailing Address PO Box 76187

City Washington State DC Zip Code 20013

Purpose of Disbursement
Redesignated funds for transaction dated 11/02/2011 Re-designated funds for trans. dated 11/10/2011

Candidate Name
Sen. Sherrod Brown

Office Sought: House Senate President
State: OH District:

Disbursement For: 2012
 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2011

Transaction ID : 34268909

Amount of Each Disbursement this Period

<input type="text" value="500.00"/>

[MEMO ITEM]

Redesignated funds for transaction dated 11/02/2011
Re-designated funds for trans. dated 11/10/2011

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

<input type="text"/>

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) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

<input type="text"/>

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

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

<input type="text" value="0.00"/>

<input type="text" value="42250.00"/>

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Lynn Wachtmann

Mailing Address 550 Euclid Ave

City Napoleon State OH Zip Code 43545

Purpose of Disbursement
Lynn Wachtmann, STATE HOUSE 75th OH

Candidate Name

OH Rep. Lynn Wachtmann

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 75

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2011

Transaction ID : 33993232

Amount of Each Disbursement this Period

300.00

Lynn Wachtmann, STATE HOUSE 75th OH

Full Name (Last, First, Middle Initial)

B. Leo Berman Campaign

Mailing Address 2109 Dover Lane

City Tyler State TX Zip Code 75703

Purpose of Disbursement
Leo Berman, STATE HOUSE 6th TX

Candidate Name

Representa Leo Berman

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 02 / 2011

Transaction ID : 34067518

Amount of Each Disbursement this Period

500.00

Leo Berman, STATE HOUSE 6th TX

Full Name (Last, First, Middle Initial)

C. Sarah Davis Campaign

Mailing Address 4203 Tennyson St

City Houston State TX Zip Code 77005

Purpose of Disbursement
Sarah Davis, STATE HOUSE 134th TX

Candidate Name

TX Rep. Sarah Davis

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 34

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 02 / 2011

Transaction ID : 34067519

Amount of Each Disbursement this Period

500.00

Sarah Davis, STATE HOUSE 134th TX

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

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

1300.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Dan Flynn Campaign Fund

Mailing Address PO Box 669

City Van State TX Zip Code 75790

Purpose of Disbursement
Dan Flynn, STATE HOUSE 2nd TX

Candidate Name
TX Rep. Dan Flynn

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: TX District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			02			2011					

Transaction ID : 34067520

Amount of Each Disbursement this Period

500.00

Dan Flynn, STATE HOUSE 2nd TX

Full Name (Last, First, Middle Initial)

B. Chuck Hopson Campaign

Mailing Address 506 E. Commerce

City Jacksonville State TX Zip Code 75766

Purpose of Disbursement
Chuck Hopson, STATE HOUSE 11th TX

Candidate Name
Representa Chuck Hopson

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: TX District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			02			2011					

Transaction ID : 34067522

Amount of Each Disbursement this Period

500.00

Chuck Hopson, STATE HOUSE 11th TX

Full Name (Last, First, Middle Initial)

C. John Raney Campaign

Mailing Address P.O. Box 11461

City College Station State TX Zip Code 77842-1461

Purpose of Disbursement
John Raney, STATE HOUSE 14th TX

Candidate Name
John Raney

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: TX District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			02			2011					

Transaction ID : 34067578

Amount of Each Disbursement this Period

500.00

John Raney, STATE HOUSE 14th TX

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

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

1500.00

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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Larry Taylor

Mailing Address PO Box 1208

City Friendswood State TX Zip Code 77549

Purpose of Disbursement
Larry Taylor, STATE HOUSE 24th TX

Candidate Name

TX Rep. Larry Taylor

Office Sought: House
 Senate
 President
State: TX District: 24

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2011

Transaction ID : 34067579

Amount of Each Disbursement this Period

500.00

Larry Taylor, STATE HOUSE 24th TX

Full Name (Last, First, Middle Initial)

B. Senator Van de Putte Campaign

Mailing Address 700 N. St. Mary's
Suite 1725-A

City San Antonio State TX Zip Code 78205

Purpose of Disbursement
Leticia Van de Putte, STATE SENATE 26th TX

Candidate Name

Senator Leticia Van de Putte

Office Sought: House
 Senate
 President
State: TX District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2011

Transaction ID : 34067580

Amount of Each Disbursement this Period

500.00

Leticia Van de Putte, STATE SENATE 26th TX

Full Name (Last, First, Middle Initial)

C. John Zerwas Campaign

Mailing Address PO Box 852

City Fulshear State TX Zip Code 77441

Purpose of Disbursement
John Zerwas, STATE HOUSE 28th TX

Candidate Name

TX Rep. John Zerwas

Office Sought: House
 Senate
 President
State: TX District: 28

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2011

Transaction ID : 34067581

Amount of Each Disbursement this Period

500.00

John Zerwas, STATE HOUSE 28th TX

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

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

1500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Chain Drug Stores Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
12/31/11 Ck. Analysis & Imaging Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 34150589

Amount of Each Disbursement this Period

12/31/11 Ck. Analysis & Imaging Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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