

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

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

FOR LINE NUMBER: PAGE 25 OF 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ferguson, Jim, , Mr.,

Mailing Address 1700 S Empire Ave

City
Springfield

State
MO

Zip Code
65802-4579

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Heart of America Beverage Company

Occupation (for Individual)
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : AEA180320CBB749C5958

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ferris, Jim, , Mr.,

Mailing Address PO Box 1350

City
Mont Belvieu

State
TX

Zip Code
77580-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wismer Distributing Company

Occupation (for Individual)
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

Transaction ID : A59BA0D89A4E24678BC9

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fields, Donald, E., Mr.,

Mailing Address 540 Oakhurst Ave

City
Hazard

State
KY

Zip Code
41701-1764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Perry Distributors Inc.

Occupation (for Individual)
Owner/COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2018

Transaction ID : A87AFD42889794E609EF

Amount of Each Receipt this Period

700.00

☐ Memo Item

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

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

2700.00