

# **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 28

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

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 Convenience Stores Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brian Kimmel**

Mailing Address 1600 Duke St

City

Alexandria

State

VA

Zip Code

22314-3466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NACS

Occupation

Sr. V.P. & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2015

**Transaction ID : 20150223103752-63**

Amount of Each Receipt this Period

96.16

Full Name (Last, First, Middle Initial)

**B. Jack Kofdarali**

Mailing Address PO Box 1958

City

Corona

State

CA

Zip Code

92878-1958

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J & T Management Company, Inc.

Occupation

Senior Management

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  
02 / 27 / 2015

**Transaction ID : 20150309102247-11**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Raymond F. Leather**

Mailing Address 100 Crossing Blvd

City

Framingham

State

MA

Zip Code

01702-5401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cumberland Gulf Group of Companies

Occupation

Corporate Operations/Risk Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2015

**Transaction ID : 20150223103752-18**

Amount of Each Receipt this Period

365.00

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

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

5461.16