

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1101 King Street Suite 600 Alexandria VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00144766 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 14 2010 through 11 22 2010

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 Mr. Craig A. Purser

Signature of Treasurer Electronically Filed by Mr. Craig A. Purser Date 12 02 2010

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

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		190030.06
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	371556.87									
(c) Total Receipts (from Line 19)	42660.54	1972276.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	414217.41	2162306.48								
7. Total Disbursements (from Line 31)	219600.05	1967689.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	194617.36	194617.36								
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

Write or Type Committee Name

NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	41900.00	1920613.66
(ii) Unitemized	600.00	32311.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	42500.00	1952925.16
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	42500.00	1957925.16
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)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	12500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	160.54	1851.26
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 Transfer (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))	42660.54	1972276.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42660.54	1972276.42

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	100.05	689.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	100.05	689.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	219500.00	1967000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	219600.05	1967689.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	219600.05	1967689.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	42500.00	1957925.16
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42500.00	1957925.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	100.05	689.12
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100.05	689.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 37
(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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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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Robert A Barnett

Mailing Address 7505 Statesville Rd.

City State Zip Code
Charlotte NC 28269-3704

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

Name of Employer Occupation
Bealer Wholesale Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: C1130080

Amount of Each Receipt this Period
375.00

B.

Full Name (Last, First, Middle Initial)
Kevin Bowler

Mailing Address 2275 Mason Avenue

City State Zip Code
Daytona Beach FL 32117

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

Name of Employer Occupation
Daytona Beverages, LLC President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: C1135203

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Scott Christian

Mailing Address 2800 Grant Ave.

City State Zip Code
Philadelphia PA 19114-2396

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

Name of Employer Occupation
Muller, Inc. Key Accounts Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: C1130083

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **3875.00**

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 / 37
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) David R. Christman	Date of Receipt MM / DD / YYYY 11 / 05 / 2010
	Mailing Address 1101 King St., Suite 600	Transaction ID: C1140256
	City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer National Beer Wholesalers Association Occupation Director, State Industry Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) David D'Annunzio	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. Box 866	Transaction ID: C1130087
	City State Zip Code Clarksburg WV 26302	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Beverage Distributors Inc. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Vincent F. D'Annunzio	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address P.O. Box 866	Transaction ID: C1130088
	City State Zip Code Clarksburg WV 26302	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Beverage Distributors Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
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 / 37
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Luke Dahlheimer		Date of Receipt
	Mailing Address P.O. Box 336		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Monticello	MN	55362
	FEC ID number of contributing federal political committee. C		Transaction ID: C1135208
Name of Employer Dahlheimer Beverage LLC		Occupation Chief Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1200.00
		<input type="text"/> 1400.00	

B.	Full Name (Last, First, Middle Initial) Nathan J. Dahlheimer		Date of Receipt
	Mailing Address P.O. Box 336		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Monticello	MN	55362
	FEC ID number of contributing federal political committee. C		Transaction ID: C1135210
Name of Employer Dahlheimer Beverage LLC		Occupation Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1200.00
		<input type="text"/> 1200.00	

C.	Full Name (Last, First, Middle Initial) Nick Dahlheimer		Date of Receipt
	Mailing Address P.O. Box 336		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	Monticello	MN	55362
	FEC ID number of contributing federal political committee. C		Transaction ID: C1135209
Name of Employer Dahlheimer Beverage LLC		Occupation Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1200.00
		<input type="text"/> 1400.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3600.00
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 9 / 37
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Travis W. Dahlheimer		Date of Receipt
	Mailing Address P.O. Box 336		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Monticello MN 55362		<input type="text"/> 1 0 / <input type="text"/> 2 6 / <input type="text"/> 2 0 1 0
	FEC ID number of contributing federal political committee. C		Transaction ID: C1135211
	Name of Employer Occupation Dahlheimer Beverage LLC Owner		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1200.00	

B.	Full Name (Last, First, Middle Initial) Ann Kathryn Dettwiller		Date of Receipt
	Mailing Address 301 Great Circle Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Nashville TN 37228-1789		<input type="text"/> 1 0 / <input type="text"/> 2 6 / <input type="text"/> 2 0 1 0
	FEC ID number of contributing federal political committee. C		Transaction ID: C1135213
	Name of Employer Occupation Det Distributing Co. Director of Government Affairs		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2000.00	

C.	Full Name (Last, First, Middle Initial) Lisa Dickerson		Date of Receipt
	Mailing Address 150 Lawton Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City State Zip Code Monroe OH 45050		<input type="text"/> 1 0 / <input type="text"/> 2 9 / <input type="text"/> 2 0 1 0
	FEC ID number of contributing federal political committee. C		Transaction ID: C1136683
	Name of Employer Occupation Dickerson Distributing Co. Representative		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 2500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5700.00
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 / 37
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paula Dickerson		Date of Receipt	
	Mailing Address 150 Lawton Ave		M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: C1136684
	Monroe	OH	45050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		2500.00	
Name of Employer Dickerson Distributing Co.		Occupation Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2500.00		

B.	Full Name (Last, First, Middle Initial) William Falkenhagen		Date of Receipt	
	Mailing Address 410 I-10 South		M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: C1140255
	Beaumont	TX	77707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		4850.00	
Name of Employer Del Papa Distributing Company, Inc.		Occupation Exec. Vice President/CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		5000.00		

C.	Full Name (Last, First, Middle Initial) Gordon Green		Date of Receipt	
	Mailing Address 421 N. Portland		M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: C1130082
	Oklahoma City	OK	73108	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Capital Distributing LLC		Occupation General Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

SUBTOTAL of Receipts This Page (optional)	▶	7850.00
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 / 37
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Stephen A. Gustafson		Date of Receipt MM / DD / YYYY 11 / 16 / 2010		
	Mailing Address 3811 Tarry St.		Transaction ID: C1143005		
	City Wichita Falls	State TX	Zip Code 76308-1697	Amount of Each Receipt this Period 4000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Falls Distributing Co.	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

B.	Full Name (Last, First, Middle Initial) Thomas Ray Hitchcock		Date of Receipt MM / DD / YYYY 10 / 26 / 2010		
	Mailing Address 2901 W. Arkansas		Transaction ID: C1135212		
	City Durant	State OK	Zip Code 74701-4899	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Hitchcock Distributing, Inc.	Occupation Owner/President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) Mike Hopkins, Sr.		Date of Receipt MM / DD / YYYY 10 / 26 / 2010		
	Mailing Address P.O. Box 1919		Transaction ID: C1135214		
	City Brenham	State TX	Zip Code 77834-1919	Amount of Each Receipt this Period 1250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Mike Hopkins Distributing Co.	Occupation President			
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)	6250.00
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 12 / 37
(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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Kevin Leslie

Mailing Address 1551 Industry Rd.

City State Zip Code
Hatfield PA 19440

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

Name of Employer Occupation
Muller II, Inc. Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: C1130084

Amount of Each Receipt this Period **2500.00**

B.

Full Name (Last, First, Middle Initial)
W.L. Lyles, III

Mailing Address P.O. Box 938

City State Zip Code
Anderson SC 29622

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

Name of Employer Occupation
Carolina Beer Co., Inc. Vice President/General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: C1130086

Amount of Each Receipt this Period **1000.00**

C.

Full Name (Last, First, Middle Initial)
William L. Lyles, Jr.

Mailing Address P.O. Box 938

City State Zip Code
Anderson SC 29622

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

Name of Employer Occupation
Carolina Beer Co., Inc. Owner/Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **10 / 19 / 2010**

Transaction ID: C1130085

Amount of Each Receipt this Period **1000.00**

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: PAGE 13 / 37

(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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Vail K. Miller, Jr.		Date of Receipt MM / DD / YYYY 11 / 05 / 2010		
	Mailing Address 1247 Leo St.		Transaction ID: C1140254		
	City Dayton	State OH	Zip Code 45404-1600	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 750.00		
Name of Employer Heidelberg Distributing Co.		Occupation CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Val LaMantia Peisen		Date of Receipt MM / DD / YYYY 10 / 29 / 2010		
	Mailing Address 3900 N. McColl Rd		Transaction ID: C1136685		
	City McAllen	State TX	Zip Code 78501	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 5000.00		
Name of Employer L & F Distributors, LLC		Occupation Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Brett Robinson		Date of Receipt MM / DD / YYYY 11 / 13 / 2010		
	Mailing Address 6301 Waterford Blvd., Ste. 105		Transaction ID: C1142478		
	City Oklahoma City	State OK	Zip Code 73118	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00		
Name of Employer Oklahoma Malt Beverage Assn.		Occupation President/CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)

6000.00

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 / 37
	<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Patricia Schetz	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 6700 Wales Rd.	Transaction ID: C1130092
	City State Zip Code Northwood OH 43619	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NWO Beverage Inc. Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mark B. Tcherkezian	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 7505 Statesville Rd.	Transaction ID: C1130081
	City State Zip Code Charlotte NC 28269-3704	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Bealer Wholesale Inc. Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

C.	Full Name (Last, First, Middle Initial) Mike White	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 1290 SE Hamblen Rd.	Transaction ID: C1135205
	City State Zip Code Lee's Summit MO 64081-2940	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation County Beverage Co., Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1875.00
TOTAL This Period (last page this line number only)	41900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 37	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Sun Trust Bank		Date of Receipt																					
	Mailing Address 7818 Parham Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		3	1		2	0	1	0														
	City	State	Zip Code	Transaction ID: C1153596																				
	Richmond	VA	23294	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		C	160.54																					
Name of Employer		Occupation																						
Receipt For:		Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1851.26																						

SUBTOTAL of Receipts This Page (optional)	▶	160.54
TOTAL This Period (last page this line number only)	▶	160.54

**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)

PAGE 16 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Sun Trust Bank			Transaction ID: D109608 Date of Disbursement																					
	Mailing Address 7818 Parham Road			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y																
1	0		3	1		2	0	1	0																
	City Richmond	State VA	Zip Code 23294	Amount of Each Disbursement this Period																					
	Purpose of Disbursement Bank Fees: 10/1/10-10/31/10			<table border="1"> <tr> <td colspan="10">100.05</td> </tr> </table>			100.05																		
100.05																									
	Candidate Name																								
	Office Sought:	Disbursement For:																							
	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
	State:	District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	100.05
TOTAL This Period (last page this line number only)	▶	100.05

**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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dan Coats for Indiana	Transaction ID: D109109 Date of Disbursement 11 / 22 / 2010
	Mailing Address PO Box 301141	Amount of Each Disbursement this Period 5000.00
	City Indianapolis State IN Zip Code 46230	
	Purpose of Disbursement 2010 Primary Debt Retirement	Category/ Type
	Candidate Name Hon. Dan Coats	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dan Coats for Indiana	Transaction ID: D106511 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO Box 301141	Amount of Each Disbursement this Period 5000.00
	City Indianapolis State IN Zip Code 46230	
	Purpose of Disbursement Contribution to Federal Candidate	Category/ Type
	Candidate Name Hon. Dan Coats	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAWG PAC	Transaction ID: D107905 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO Box 83142	Amount of Each Disbursement this Period 5000.00
	City Gaithersburg State MD Zip Code 20883-3142	
	Purpose of Disbursement 2010 Contribution to Leadership PAC	Category/ Type
	Candidate Name Hon. John Barrow	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15000.00
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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Fitzpatrick For Congress</p> <p>Mailing Address 115 N Broad Street</p> <p>City Doylestown State PA Zip Code 18901</p> <p>Purpose of Disbursement 2010 General Debt Retirement</p> <p>Candidate Name Rep. Michael G. Fitzpatrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 08</p>	<p>Transaction ID: D109111</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Dennis Ross</p> <p>Mailing Address PO BOX 7310</p> <p>City Lakeland State FL Zip Code 33807</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Hon. Dennis Ross</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 12</p>	<p>Transaction ID: D107860</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Jamie Herrera for Congress</p> <p>Mailing Address PO Box 1614</p> <p>City Ridgefield State WA Zip Code 98642</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Hon. Jamie Herrera</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WA District: 03</p>	<p>Transaction ID: D106503</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional)	15000.00
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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NRCC Recount Fund</p> <p>Mailing Address 320 First Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution to Fed. Campaign recount fund</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D109023 Date of Disbursement: 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 15000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Portman for Senate Committee</p> <p>Mailing Address 9856 Archer Lane</p> <p>City Dublin State OH Zip Code 43017</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Hon. Rob Portman</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District:</p>	<p>Transaction ID: D107866 Date of Disbursement: 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Quayle for Congress</p> <p>Mailing Address 4247 N. 44th Street</p> <p>City Phoenix State AZ Zip Code 85018</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Mr. Ben Quayle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AZ District: 03</p>	<p>Transaction ID: D106516 Date of Disbursement: 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

25000.00

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)

PAGE 20 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CRENSHAW FOR CONGRESS CAMPAIGN</p> <p>Mailing Address 4963 Beach Boulevard</p> <p>City Jacksonville State FL Zip Code 32207</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Ander Crenshaw</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107871 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF WEINER</p> <p>Mailing Address 1 Ascan Avenue #31</p> <p>City Forest Hills State NY Zip Code 11375</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Anthony D. Weiner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107889 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) BARBARA LEE FOR CONGRESS</p> <p>Mailing Address 1736 FRANKLIN STREET #400</p> <p>City OAKLAND State CA Zip Code 94612</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Barbara Lee</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D108781 Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional)	7000.00
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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) MCCOLLUM FOR CONGRESS <hr/> Mailing Address P.O. Box 14131 <hr/> City St. Paul State MN Zip Code 55114 <hr/> Purpose of Disbursement Contribution to Federal Candidate Candidate Name Rep. Betty McCollum <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D107922 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) BILL CASSIDY FOR CONGRESS <hr/> Mailing Address 3482 DRUSILLA LANE SUITE 1 <hr/> City BATON ROUGE State LA Zip Code 70809 <hr/> Purpose of Disbursement Contribution to Federal Candidate Candidate Name Rep. Bill Cassidy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D107873 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BRAD MILLER FOR UNITED STATES CONGRESS <hr/> Mailing Address PO Box 10322 <hr/> City Raleigh State NC Zip Code 27605 <hr/> Purpose of Disbursement Contribution to Federal Candidate Candidate Name Rep. Brad Miller <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D107890 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CONGRESSMAN BILL YOUNG CAMPAIGN COMMITTEE	Transaction ID: D107886 Date of Disbursement
	Mailing Address P. O. Box 47025	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City St. Petersburg State FL Zip Code 33743	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. C.W. Bill Young	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CANDICE MILLER FOR CONGRESS	Transaction ID: D107875 Date of Disbursement
	Mailing Address PO Box 182152	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Shelby Township State MI Zip Code 48318	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="5000.00"/>
	Candidate Name Rep. Candice Miller	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CATHY MCMORRIS FOR CONGRESS	Transaction ID: D107882 Date of Disbursement
	Mailing Address Box 137	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Spokane State WA Zip Code 99210	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Cathy McMorris Rodgers	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CHARLES A. GONZALEZ CONGRESSIONAL CAMPAIGN</p> <p>Mailing Address PO Box 12612</p> <p>City San Antonio State TX Zip Code 78212</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Charles A. Gonzalez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 20</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D108142 Date of Disbursement: 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS</p> <p>Mailing Address PO Box 1924</p> <p>City Muskogee State OK Zip Code 74402</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Dan Boren</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107898 Date of Disbursement: 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) DONALD A. MANZULLO FOR CONGRESS</p> <p>Mailing Address PO Box 7783</p> <p>City Rockford State IL Zip Code 61126</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Donald A. Manzullo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D108073 Date of Disbursement: 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LAMBORN FOR CONGRESS</p> <p>Mailing Address P.O. Box 64107</p> <p>City Colorado Springs State CO Zip Code 80962</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Doug Lamborn</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107870 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) GERRY CONNOLLY FOR CONGRESS</p> <p>Mailing Address PO BOX 563</p> <p>City MERRIFIELD State VA Zip Code 22116</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Gerry E. Connolly</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107915 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) HEATH SHULER FOR CONGRESS</p> <p>Mailing Address PO Box 8446</p> <p>City Asheville State NC Zip Code 28814</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Heath Shuler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107895 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional)	7500.00
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)

PAGE 25 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) LANGEVIN FOR CONGRESS	Transaction ID: D107909 Date of Disbursement
	Mailing Address 181-A KNIGHT ST	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City WARWICK State RI Zip Code 02886	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. James R. Langevin	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE	Transaction ID: D107900 Date of Disbursement
	Mailing Address P.O. Box 1776	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Freedom State PA Zip Code 15042	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Jason Altmire	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SCHMIDT FOR CONGRESS COMMITTEE	Transaction ID: D107884 Date of Disbursement
	Mailing Address 771 Wards Corner Rd	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Loveland State OH Zip Code 45140	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Jean Schmidt	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

PAGE 26 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) FRIENDS OF JEB HENSARLING</p> <p>Mailing Address PO Box 820504</p> <p>City Dallas State TX Zip Code 75382</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Jeb Hensarling</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D108071 Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) LEWIS FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box 247</p> <p>City Redlands State CA Zip Code 92373</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Jerry Lewis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 41</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107868 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) JIM GERLACH FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO Box 87</p> <p>City Uwchland State PA Zip Code 19480</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Jim W. Gerlach</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107867 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MATHESON FOR CONGRESS</p> <p>Mailing Address PO Box 521048</p> <p>City Salt Lake City State UT Zip Code 84152</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Jim D. Matheson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107913 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) JO BONNER FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O.Box 851232</p> <p>City Mobile State AL Zip Code 36685</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Jo Robins Bonner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107883 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF JOE BACA</p> <p>Mailing Address 555 Capitol Mall Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Joe Baca</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 43</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107919 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) KLINE FOR CONGRESS	Transaction ID: D107881 Date of Disbursement 10 / 14 / 2010
	Mailing Address 101 W Burnsville Pkwy Suite 104	Amount of Each Disbursement this Period 2500.00
	City Burnsville State MN Zip Code 55337	
	Purpose of Disbursement Contribution to Federal Candidate	Category/ Type
	Candidate Name Rep. John Kline	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN SPRATT FOR CONGRESS COMMITTEE	Transaction ID: D108072 Date of Disbursement 10 / 18 / 2010
	Mailing Address POST OFFICE BOX 10986	Amount of Each Disbursement this Period 5000.00
	City ROCK HILL State SC Zip Code 29731	
	Purpose of Disbursement Contribution to Federal Candidate	Category/ Type
	Candidate Name Rep. John M. Spratt, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE PITTS	Transaction ID: D107878 Date of Disbursement 10 / 14 / 2010
	Mailing Address PO BOX 775	Amount of Each Disbursement this Period 2500.00
	City Unionville State PA Zip Code 19375	
	Purpose of Disbursement Contribution to Federal Candidate	Category/ Type
	Candidate Name Rep. Joseph R. Pitts	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS	Transaction ID: D107880 Date of Disbursement
	Mailing Address P.O. Box 8277	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City The Woodlands State TX Zip Code 77387	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Kevin P. Brady	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LINCOLN DAVIS FOR CONGRESS	Transaction ID: D107910 Date of Disbursement
	Mailing Address PO Box 350	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Jamestown State TN Zip Code 38556	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Lincoln Davis	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MEL WATT FOR CONGRESS COMMITTEE	Transaction ID: D107897 Date of Disbursement
	Mailing Address PO BOX 36831	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City CHARLOTTE State NC Zip Code 28236	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Melvin L. Watt	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) COFFMAN FOR CONGRESS</p> <p>Mailing Address 9249 South Broadway</p> <p>City Highlands Ranch State CO Zip Code 80129</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Mike Coffman</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107869 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) DOYLE FOR CONGRESS COMMITTEE</p> <p>Mailing Address 205 HAWTHORNE COURT</p> <p>City PITTSBURGH State PA Zip Code 15221</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Mike Doyle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107907 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) KEEP NICK RAHALL IN CONGRESS COMMITTEE</p> <p>Mailing Address P O Box 64</p> <p>City Beckley State WV Zip Code 25802</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Nick J. Rahall, II</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107917 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NORM DICKS FOR CONGRESS</p> <p>Mailing Address PO Box 1663</p> <p>City Tacoma State WA Zip Code 98401</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Norman D. Dicks</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107916 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS</p> <p>Mailing Address 2931 E Dublin Granville Rd Ste 190</p> <p>City Columbus State OH Zip Code 43231-2098</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Patrick J. Tiberi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107885 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) PAUL BROUN COMMITTEE</p> <p>Mailing Address PO Box 1512</p> <p>City Athens State GA Zip Code 30603</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Paul C. Broun</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107872 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional)	10000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PETE KING FOR CONGRESS COMMITTEE</p> <p>Mailing Address POST OFFICE BOX 1428</p> <p>City SEAFORD State NY Zip Code 11783</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Peter T. King</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107876 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) WELCH FOR CONGRESS</p> <p>Mailing Address PO Box 1086</p> <p>City Montpelier State VT Zip Code 05601</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Peter Welch</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107914 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) HALL FOR CONGRESS COMMITTEE (RALPH HALL - ROCKWALL TEXA-S)</p> <p>Mailing Address POST OFFICE BOX 711</p> <p>City ROCKWALL State TX Zip Code 75087</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Ralph M. Hall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107879 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)

PAGE 33 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BARTLETT FOR CONGRESS COMMITTEE	Transaction ID: D107887 Date of Disbursement
	Mailing Address P.O. Box 245	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Middletown State MD Zip Code 21769	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Roscoe G. Bartlett	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS	Transaction ID: D107877 Date of Disbursement
	Mailing Address 1900 Frederick Blvd	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Saint Joseph State MO Zip Code 64507	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="2500.00"/>
	Candidate Name Rep. Sam Graves	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SHEILA JACKSON LEE FOR CONGRESS	Transaction ID: D107911 Date of Disbursement
	Mailing Address 4412 ALMEDA	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City HOUSTON State TX Zip Code 77004	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution to Federal Candidate	<input type="text" value="4000.00"/>
	Candidate Name Rep. Sheila Jackson Lee	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 18	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) STEVE COHEN FOR CONGRESS</p> <p>Mailing Address 349 KENILWORTH</p> <p>City MEMPHIS State TN Zip Code 38112</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Stephen I. Cohen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D108309 Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) STEVE CHABOT FOR CONGRESS</p> <p>Mailing Address 3339 Harrison Ave.</p> <p>City Cincinnati State OH Zip Code 45211</p> <p>Purpose of Disbursement 2010 General Debt Retirement</p> <p>Candidate Name Rep. Steve Chabot</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D109058 Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) TAMMY BALDWIN FOR CONGRESS</p> <p>Mailing Address P.O. Box 696</p> <p>City Madison State WI Zip Code 53701</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Rep. Tammy Baldwin</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D107921 Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: D107908 Date of Disbursement 10 / 14 / 2010
	Mailing Address 18 N. SECOND ST., BOX 37	Amount of Each Disbursement this Period 2500.00
	City SAINT CLAIR State PA Zip Code 17970	
	Purpose of Disbursement Contribution to Federal Candidate	Category/ Type
	Candidate Name Rep. Tim Holden	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WALBERG FOR CONGRESS	Transaction ID: D109110 Date of Disbursement 11 / 22 / 2010
	Mailing Address 6769 Teachout Rd.	Amount of Each Disbursement this Period 5000.00
	City Tipton State MI Zip Code 49287	
	Purpose of Disbursement 2010 General Debt Retirement	Category/ Type
	Candidate Name Rep. Tim Walberg	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Richmond for Congress	Transaction ID: D109112 Date of Disbursement 11 / 22 / 2010
	Mailing Address 1631 Elysian Fields Suite 150	Amount of Each Disbursement this Period 5000.00
	City New Orleans State LA Zip Code 70126	
	Purpose of Disbursement 2010 General Debt Retirement	Category/ Type
	Candidate Name Hon. Cedric Richmond	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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PAGE 36 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rob Woodall for Congress</p> <p>Mailing Address PO Box 1871</p> <p>City Lawrenceville State GA Zip Code 30046</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Mr. Rob Woodall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: GA District: 07</p>	<p>Transaction ID: D106520</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Robert Hurt for Congress</p> <p>Mailing Address PO Box 2</p> <p>City Chatham State VA Zip Code 24531</p> <p>Purpose of Disbursement 2010 General Debt Retirement</p> <p>Candidate Name Hon. Robert Hurt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: VA District: 05</p>	<p>Transaction ID: D109113</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) WYDEN FOR SENATE</p> <p>Mailing Address PO BOX 3498</p> <p>City PORTLAND State OR Zip Code 97208</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Sen. Ron Wyden</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OR District: 00</p>	<p>Transaction ID: D107899</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

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PAGE 37 / 37

<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 BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Stivers For Congress Mailing Address 81 S Fifth Street City Columbus State OH Zip Code 43215 Purpose of Disbursement 2010 General Debt Retirement Candidate Name Mr. Steve Stivers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: D109108 Date of Disbursement 11 / 22 / 2010
	Amount of Each Disbursement this Period 5000.00
B. Full Name (Last, First, Middle Initial) Win Back America PAC Mailing Address PO BOX 1131 City ANDERSON State IN Zip Code 46015 Purpose of Disbursement 2010 Contribution to Leadership PAC Candidate Name Hon Mike Pence Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: D107902 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

219500.00