

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation AMERICAN CHEMISTRY COUNCIL, INC			3. FEC Identification Number C C90011578
(b) Address (number and street) ☐ check if different than previously reported 700 2ND STREET NE			
(c) City, State and ZIP Code WASHINGTON DC 20002			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☒ 24-Hour Report

☐ October 15 Quarterly Report

☐ 48-Hour Report

☐ January 31 Year-End Report

b) Is this Report an amendment? ☐ No ☒ Yes, it amends the report filed on

07 / **28** / **2014**

5. COVERING PERIOD:

FROM

MM / **DD** / **YYYY**

THROUGH

MM / **DD** / **YYYY**

6. TOTAL CONTRIBUTIONS.....

00

7. TOTAL INDEPENDENT EXPENDITURES

165200.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Allison Starmann

Allison Starmann

09/30/2014

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

AMERICAN CHEMISTRY COUNCIL, INC

Full Name (Last, First, Middle Initial) of Payee

National Media Public Affairs, LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY
07 / 28 / 2014

Mailing Address 815 Slaters Lane

Amount

165200.00

Transaction ID : F57.000001

Purpose of Expenditure
Television AdCategory/
Type 004Office Sought: ☒ House State: KS
☐ Senate District: 04
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Mike PompeoCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 165200.00Disbursement For: ☒ Primary ☐ General
2014 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 165200.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 165200.00
(carry total from last page forward to Line 7)