



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE**

Report Covering the Period: From: **07** ' **07** ' **2006** To: **09** ' **30** ' **2006**

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <b>2006</b>  |                         | <b>6661898</b>                    |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <b>5688137</b>          |                                   |
| (c) Total Receipts (from Line 19).....   | <b>1386847</b>          | <b>2075755</b>                    |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....      | <b>7074984</b>          | <b>8737653</b>                    |
| 7. Total Disbursements (from Line 31).....   | <b>286808</b>           | <b>1949477</b>                    |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                 | <b>6788176</b>          | <b>6788176</b>                    |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  |                         |                                   |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... |                         |                                   |

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

26039220287

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE**

Report Covering the Period: From:

07 01 2006

To:

09 30 2006

**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).....

(ii) Unitemized.....

1342200

1936555

(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶

1342200

1936555

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1342200

1936555

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

44647

139200

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1386847

2075755

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1386847

2075755

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**DETAILED SUMMARY PAGE**  
of Disbursements

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

|   |        |         |
|---|--------|---------|
| 21. Operating Expenditures:   |        |         |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                   |        |         |
| (i) Federal Share .....   |        |         |
| (ii) Non-Federal Share .....  |        |         |
| (b) Other Federal Operating Expenditures .....  | 86808  | 1374477 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                         | 86808  | 1374477 |
| 22. Transfers to Affiliated/Other Party Committees .....  |        |         |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....         | 200000 | 575000  |
| 24. Independent Expenditures (use Schedule E) .....   |        |         |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....                   |        |         |
| 26. Loan Repayments Made .....  |        |         |
| 27. Loans Made .....  |        |         |
| 28. Refunds of Contributions To:  |        |         |
| (a) Individuals/Persons Other Than Political Committees .....                                   |        |         |
| (b) Political Party Committees .....  |        |         |
| (c) Other Political Committees (such as PACs) .....   |        |         |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            |        |         |
| 29. Other Disbursements .....   |        |         |
| 30. Federal Election Activity (2 U.S.C. §431(20))   |        |         |
| (a) Allocated Federal Election Activity (from Schedule H6)                                      |        |         |
| (i) Federal Share .....   |        |         |
| (ii) "Levin" Share .....  |        |         |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            |        |         |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....             |        |         |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..       | 286808 | 1949477 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ..... |        |         |

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-  
penditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3).....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

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

|   |   |                                    |                                    |                                    |                                   |                                    |             |
|---|---|------------------------------------|------------------------------------|------------------------------------|-----------------------------------|------------------------------------|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    |                                    |                                    |                                   |                                    | PAGE / OF / |
|   | <input checked="" type="checkbox"/> 21b<br>27 | <input type="checkbox"/> 22<br>28a | <input type="checkbox"/> 23<br>28b | <input type="checkbox"/> 24<br>28c | <input type="checkbox"/> 25<br>29 | <input type="checkbox"/> 28<br>30b |             |

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)  
**AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE**

**A.**

Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY FOR CLINICAL LAB SCIENCE**

Date of Disbursement  
07 / 29 / 2006

Mailing Address  
**6701 OMAHA BLVD**

City: **BETHESDA** State: **MD** Zip Code: **20817**

Purpose of Disbursement: **FUNCTION / MEETING EXPENSES**

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

Amount of Each Disbursement this Period  
**847.38**

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
**SUNTRUST BANK**

Date of Disbursement  
08 / 31 / 2006

Mailing Address

City State Zip Code

Purpose of Disbursement: **BANK CHARGES**

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

Amount of Each Disbursement this Period  
**20.70**

Category/Type

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

Amount of Each Disbursement this Period

Category/Type

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

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

**868.08**

26039220201

**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 1 OF 1

|                              |                              |                              |                              |                             |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 26a | <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)

**AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE**

Full Name (Last, First, Middle Initial)

**A. BEN NELSON FOR US SENATE COMMITTEE**

Date of Disbursement

09 / 11 / 2006

Mailing Address

420 C ST, NE

City: WASHINGTON State: DC Zip Code: 20002

Purpose of Disbursement: CONTRIBUTION

Amount of Each Disbursement this Period

1000.00

Candidate Name: BEN NELSON

Category/Type

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

Full Name (Last, First, Middle Initial)

**B. NRCC BATTLEGROUND 2006**

Date of Disbursement

09 / 25 / 2006

Mailing Address

104 HUMR AVE.

City: ALEXANDRIA State: VA Zip Code: 22301

Purpose of Disbursement: CONTRIBUTION

Amount of Each Disbursement this Period

1000.00

Candidate Name: NRCC

Category/Type

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2000.00

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

26039220293

|  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Hand Delivered  | Date of Receipt                  |
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| <input type="checkbox"/> USPS Priority Mail  | Postmarked                       |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>           |                                  |
| <input type="checkbox"/> USPS Express Mail   | Postmarked                       |
| <input type="checkbox"/> Postmark Illegible  |                                  |
| <input type="checkbox"/> No Postmark   |                                  |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed. Exp.</i> | Shipping Date<br><i>10-13-06</i> |
| Next Business Day Delivery <input type="checkbox"/>  |                                  |
| <input type="checkbox"/> Received from House Records & Registration Office                 | Date of Receipt                  |
| <input type="checkbox"/> Received from Senate Public Records Office                        | Date of Receipt                  |
| <input type="checkbox"/> Received from Electronic Filing Office                            | Date of Receipt                  |
| <input type="checkbox"/> Other (Specify):  | Date of Receipt or Postmarked    |

*Jms*  
 PREPARER  
 (3/2005)

*10-16-06*  
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