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 1 OF 1

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Consultant Pharmacists Political Action Committee

A. Full Name (Last, First, Middle Initial): Hughes, Anthony M.
Mailing Address: 7332 Friarton Cir.
City: Toledo State: OH Zip Code: 43617
FEC ID number of contributing federal political committee: C
Name of Employer: HCR Manor Care Occupation: Pharmacist
Receipt For: [ ] Primary [X] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: 02 / 21 / 2012
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial): Barber, Albert
Mailing Address: 2874 Progress Park Dr.
City: Stow State: OH Zip Code: 44224
FEC ID number of contributing federal political committee: C
Name of Employer: Golden Living Centers Occupation: Pharmacist
Receipt For: [X] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 / 21 / 2012
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Schroer, Gerald
Mailing Address: 339 E. Maple St.
City: North Canton State: OH Zip Code: 44720
FEC ID number of contributing federal political committee: C
Name of Employer: Absolute Pharmacy, Inc. Occupation: Pharmacist
Receipt For: [X] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 02 / 29 / 2012
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ 1000.00

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