PAGE 1 / 9

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	r Other Than An Auth	onzeu committee		Office Use Only
NAME OF COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Alliance for Pharmacy C	ompounding PAC (C	COMP PAC)		
ADDRESS (number and street)	100 Daingerfield Road			
<b>▼</b>	Suite 401			
Check if different than previously reported. (ACC)	Alexandria		VA L	22314
2. FEC IDENTIFICATION NUM	IBER ▼ CITY	<b>′</b> ▲	STATE ▲	ZIP CODE ▲
C C00424143	3. IS	THIS NEW (N) OR		ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M5		0 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar 2	20 (M3) Jun 20 (M6	) Sep 2	Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7)	Oct 20	0 (M10) Jan 31 (YE)
Quarterly Report (Q1)  July 15	PRF-Election	Primary (12P)	General (1	2G) Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (1	2S)
Quarterly Report (Q3)  January 31		M M / D D /	YIYIY	in the
Year-End Report (YE)	Election	on		State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (30G)	Runoff (30	Special (30S)
Termination Report (TER)	Election	on//	Y = Y = Y = Y	in the State of
5. Covering Period 03	01 2020	through 03	31	2020
I certify that I have examined this	Report and to the best of n Letendre, William, , , R, Sr.	my knowledge and belief it is	true, correct and	complete.
Type or Print Name of Treasurer				
Signature of Treasurer	e, William, , , R, Sr.	[Electronically Filed]	Date 04	20 2020
NOTE: Submission of false, erroneou	us, or incomplete information	may subject the person signing	this Report to the	e penalties of 52 U.S.C. § 3010
Office Use				FEC FORM 3X Rev. 05/2016

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)
Page 2

Write or Type Committee Name

#### Alliance for Pharmacy Compounding PAC (COMP PAC)

Report Covering the Period: From: 03 01 2020 To: 03 31 2020

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2020		5532.96
	(b) Cash on Hand at Beginning of Reporting Period	26891.05	
	(c) Total Receipts (from Line 19)	1035.00	26115.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27926.05	31647.96
7.	Total Disbursements (from Line 31)	6929.85	10651.76
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20996.20	20996.20
9.	Debts and Obligations Owed <b>TO</b> 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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### Alliance for Pharmacy Compounding PAC (COMP PAC)

Report Covering the Period: From: 03	01 2020 -	To: 03 31 2020
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	730.00	23460.00
(ii) Haiteaninad	305.00	1655.00
(ii) Unitemized(iii) TOTAL (add	303.00	1033.00
Lines 11(a)(i) and (ii)	1035.00	25115.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	1035.00	25115.00
Totals to Line 33, page 5)	4	4 4
Party Committees	0.00	0.00
Tarty Committeecommunication	4 4	4 4
B. All Loans Received	0.00	0.00
_		
1. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7 7 7	45 45 45
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
to Federal Candidates and Other		
Political Committees	0.00	1000.00
7. Other Federal Receipts		0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(IIOIII GOIIGGUIG 110)	0.00	3.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Levill I ulius (IIOIII Schedule 113)		4 4
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	1035.00	26115.00
D. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	1035.00	26115.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ul> <li>Operating Expenditures:         <ul> <li>(a) Allocated Federal/Non-Federal</li> <li>Activity (from Schedule H4)</li> </ul> </li> </ul>		Salsina. 1941 to Sale
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	0.00	
and Other Political Committees Independent Expenditures	6000.00	9500.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
	4 4	
Loans MadeRefunds of Contributions To:  (a) Individuals/Persons Other	0.00	0.00
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		4 4
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	929.85	1151.76
Federal Election Activity (52 U.S.C. § 30101(20 (a) Allocated 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))		1 1 1 1 1 1 1 1 1
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6929.85	10651.76
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	6929.85	10651.76
· L	4 4	10031.70

#### **DETAILED SUMMARY PAGE**

of Disbursements

•	FEC Form 3X (Rev. 05/2016)	of Disbursements	Page <b>5</b>
	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	al Contributions (other than loans) m Line 11(d), page 3)	1035.00	25115.00
	al Contribution Refunds m Line 28(d))	0.00	0.00
	t Contributions (other than loans) btract Line 34 from Line 33)	1035.00	25115.00
	al Federal Operating Expenditures d Line 21(a)(i) and Line 21(b))	0.00	0.00
	sets to Operating Expenditures m Line 15, page 3)	0.00	0.00
	t Operating Expenditures btract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

6 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Garvin, Cheri, , , Date of Receipt Mailing Address 109 Old English Court SW 2020 19 City Zip Code State Transaction ID: 14376121 VA Leesburg 20175-2900 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leesburg Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kraemer, Cheri, , , Date of Receipt Mailing Address 45458 269th Street 2020 City State Zip Code Transaction ID: 14377437 SD Parker 57053-5244 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pharmacy Specialties & Clinic Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Smith, Donald, , , Date of Receipt Mailing Address 802 E. Medical Court 19 2020 City State Zip Code Transaction ID: 14377678 ID Post Falls 83854-7298 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Medicine Man West Pharmacy RPh Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: **PAGE** 7 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c Detailed Summary Page

OF 12 13 14 15 16 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) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bliss, Marcy, , , Date of Receipt Mailing Address 405 Heron Dr 200 31 2020 City Zip Code State Transaction ID: 14378154 NJ Swedesboro 08085-1749 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wedgewood Pharmacy **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jerusik, Jason, , , Date of Receipt Mailing Address 223 Balligomingo Road 2020 City State Zip Code Transaction ID: 14378712 PA Conshohocken 19428-2605 Amount of Each Receipt this Period FEC ID number of contributing 230.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Advanced Rx Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 560.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 430.00 SUBTOTAL of Receipts This Page (optional)..... 730.00 TOTAL This Period (last page this line number only).....

Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compound Full Name (Last, First, Middle Initial) Morgan Griffith For Congress Mailing Address PO Box 361  City Christiansburg	me and address of any	or used by any pers	
NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compound Full Name (Last, First, Middle Initial) Morgan Griffith For Congress Mailing Address PO Box 361  City Christiansburg	me and address of any	political committee to	o solicit contributions from such committee.
Alliance for Pharmacy Compound  Full Name (Last, First, Middle Initial)  Morgan Griffith For Congress  Mailing Address PO Box 361  City Christiansburg	ing PAC (COMP	PAC)	Date of Disbursement
Morgan Griffith For Congress  Mailing Address PO Box 361  City Christiansburg			Date of Disbursement
Mailing Address PO Box 361  City Christiansburg			ı Date di Disbuisemelil
City Christiansburg			M M / D D / Y Y Y Y
Christiansburg	1		03 20 2020
	State Zip Code 24068		FEC Identification Number
Purpose of Disbursement	1	011	C C00477240  Transaction ID: 14373344
Candidate Name Griffith, Morgan, , Rep.,		Category/ Type	Amount of Each Disbursement this Period
	ement For: 2020 Primary		2500.00
State: VA District: 09	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)  Buddy Carter For Congress			Date of Disbursement
Mailing Address PO Box 10570			03 20 2020
City Savannah	State Zip Code GA 31412		FEC Identification Number
Purpose of Disbursement		011	C C00543967  Transaction ID: 14374968
Candidate Name Carter, Buddy, , Rep.,		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For: 2020		2500.00
Senate President State: GA District: 01	Primary Gene Other (specify)	rai	Memo Item
Full Name (Last, First, Middle Initial)  Michael Burgess For Congress			Date of Disbursement
Mailing Address PO Box 2334			03 20 7 2020
City Denton	State Zip Code TX 76202		FEC Identification Number
Purpose of Disbursement	,	011	C C00372532 Transaction ID : 14375382
Candidate Name Burgess, Michael, , Rep., M.D.		Category/ Type	Amount of Each Disbursement this Period
Office Sought:    X   House   Disburse	ement For: 2020 Primary Gene Other (specify)	ral	1000.00
State: TX District: 26			Memo Item
SUBTOTAL of Disbursements This Page (optional).			6000.00
		-	7

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Committee   Com	SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE NUMBER: PAGE 9	TOTT LINE NOWIDETT.		
Alliance for CoMMITTEE (in Full) Alliance for Pharmacy Compounding PAC (COMP PAC)  Full Name (Last, First, Middle Initial) Alliance and Street NW 12th Floor  City Washington District State:  District Full Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P,O, Box 71203  City State:  District  District  District  State:  District  District  District  District  District  District  District  Full Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P,O, Box 71203  City Philadelphia President District  Full Name (Last, First, Middle Initial)  State:  District  D	TEMIZED DISBURSEMENTS	for each category of the	21b 22 23 26 27			
NAME OF COMMITTEE (in Full)  Alliance for Pharmacy Compounding PAC (COMP PAC)  Full Name (Last, First, Middle Initial)  Ballard Spahr LLP  Mailing Address 1908 K Street, NW  12th Floor  City  Washington  Purpose of Dibbursement Legal Fees  Candidate Name  Office Sought: Full Name (Last, First, Middle Initial)  Comercia Bank  Mailing Address P.O. Box 71203  City  Philadelphia President State: District: Full Name (Last, First, Middle Initial)  Mailing Address  Candidate Name  Office Sought: Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  FEC Identification Number  Category/ Type  Date of Disbursement  Sought: Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  FEC Identification Number  Category/ Type  Date of Disbursement  Category/ Type  FEC Identification Number  Category/ Type  Date of Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Amount of Each Disbursement this Period  Transaction ID: 14373343  Transaction ID: 143734						
Alliance for Pharmacy Compounding PAC (COMP PAC)  Full Name (Last, First, Middle Initial)  Ballard Spahr LLP  Mailing Address 199 K Street, NW 12th Floor  City Mashington  District  Category: State: District  District  Full Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P.O. Bax 71203  City Philadelphia President District  Full Name (Last, First, Middle Initial)  Cardidata Name  Cardidata Na						
Ballard Spahr LLP  Mailing Address 1909 K Street, NW 12th Floor  City	Alliance for Pharmacy Compounding	ng PAC (COMP PA	AC)			
Mailing Address 1909 K Street, NW 12th Floor City State 2006 Purpose of Disbursement Legal Fees Candidate Name  Office Sought: Bunk Fees Candidate Name  Disbursement Bunk Fees  Category City Philadelphia Purpose of Disbursement Bank Fees Candidate Name  Disbursement Bunk Fees  Category Category Type  Disbursement Bunk Fees  Category Type  Disbursement Bunk Fees  Category Type  Disbursement Bunk Fees  Category Type  Technical State: Disbursement Bunk Fees  Category Type  Disbursement Bunk Fees  Category Type  Category Type  Technical State: Disbursement Bunk Fees  Category Type  Category Type  Category Type  Type  Technical State: Disbursement Disbursement Disbursement Disbursement Disbursement Category Type  Technical State: Disbursement Disbursement Category Type  Technical State: Disbursement Disbursement Category Type  Technical State: Disbursement Disbursement Disbursement Category Type  Technical State: Disbursement Disbursement Category Type  Technical State: Disbursement Disbursement Category Type  Technical State: Disbursement Disbursement Disbursement Disbursement Category Type  Technical State: Disbursement	_		Data of Dishursement			
Mailing Address 1908 K Street, NW 12th Floor  City	- Ballard Spanr LLP			Y		
Washington DC 20006 Purpose of Disbursement Legal Fees Candidate Name  Office Sought:	12th Floor					
Purpose of Disbursement Legal Fees  Gandidate Name  Office Sought: House Senate President State: District: Pull Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P.O. Box 71203  City Philadelphia Purpose of Disbursement Bank Fees  Candidate Name  Office Sought: House Primary General Other (specify)  Mailing Address  City State Zip Code Philadelphia Primary General Other (specify)  State: District: Full Name (Last, First, Middle Initial)  Date of Disbursement this Period Memol Item  FEC Identification Number  Comerica Bank Fees  Comerica Bank  Fec Identification Number  Comerica Bank Fees  Memol Item  FEC Identification Number  Comerica Bank Fees  Memol Item  FEC Identification Number  Comerica Bank Fees  Memol Item  Substruction Disbursement In Period Primary General Other (specify)  FEC Identification Number  Comerica Bank Fees  Memol Item  Substruction Disbursement In Period Primary General Other (specify)  Memol Item  Substruction Disbursement In Period Primary General Other (specify)  Substruction Disbursement In Period Prima	,		FEC Identification Number			
Candidate Name  Candidate Name  Condice Sought:	g .	20000		1		
Category/ Type  Office Sought: House Senate Prisident State: District: Full Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P.O. Box 71203  City Philadelphia PA 19176  Purpose of Disbursement State: District: Senate Primary General Pr	Legal Fees		001	1		
Office Sought: House Senate Prisident State: District: Memo Item Legal Fees Memo Item Legal Fees Memo Item Legal Fees Memo Item Legal Fees Memo Item State: District: Full Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P.O. Box 71203  City State Disbursement For: Senate President State: District: District: Primary General Other (specify)  Mailing Address  City State Zip Code Primary General Other (specify)  Disbursement For: Transaction ID::14373343  Amount of Each Disbursement this Period Memo Item Date of Disbursement This Period Disbursement  Category' Type  Date of Disbursement This Period Disbursement For: Senate President State: District: District: Pull Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code FEC Identification Number Category' Type  Date of Disbursement  Candidate Name Category' Type  Office Sought: House Disbursement For: Senate President Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item  Substoral of Disbursement This Period Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Office Sought: House Disbursement For: Senate President Other (specify) Type  Offic	Candidate Name		Category/ Amount of Each Disbursement this	Period		
Senate President Other (specify)    State: District:  Full Name (Last, First, Middle Initial) Comerica Bank  Mailing Address P.O. Box 71203  City Philadelphia PA 19176  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City Primary General Other (specify)  FEC Identification Number  Category/ Type  Transaction ID : 14373343  Amount of Each Disbursement this Period  Transaction ID : 1437343  Amount of Each Disbursement this Period  Category/ Type  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  City State Zip Code  President  Candidate Name  Category/ Type  Office Sought: House Disbursement For: General Other (specify)   We mount of Each Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Memo Item  Substitute  Substitute  Substitute  Substitute  Disbursement For: General Other (specify)   We mount of Each Disbursement this Period  Amount of Each Disbursement this Period  Memo Item	Office Sought: House Dishurser	ment For:		.00		
State: District:  Full Name (Last, First, Middle Initial)  Comerica Bank  Mailing Address P.O. Box 71203  City Philadelphia PA 19176  Purpose of Disbursement Bank Fees Candidate Name  Office Sought: House President Primary General President State: District:  Full Name (Last, First, Middle Initial)  Category/Type  Office Sought: House Disbursement For: Senate President Other (specify)  FEC Identification Number  Category/Type  Transaction ID: 14373343 Amount of Each Disbursement this Period  FEC Identification Number  Category/Type  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Transactio			Land Face	W- 1		
Full Name (Last, First, Middle Initial) Comerica Bank  Mailing Address P.O. Box 71203  City Philadelphia Purpose of Disbursement Bank Fees Candidate Name  Office Sought: District:  Mailing Address  City State: District:  Mailing Address  City State: District:  Mailing Address  City State: Disbursement For: Senate Primary Office Sought: Category/ Type  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Disbursement this Period  Transaction ID: 14373343 Amount of Each Di		Other (specify) ▼				
Date of Disbursement  Mailing Address P.O. Box 71203  City						
Mailing Address P.O. Box 71203  City Philadelphia Purpose of Disbursement Bank Fees Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) City Purpose of Disbursement State: District:  City Purpose of Disbursement State: District:  City Purpose of Disbursement Candidate Name  City Purpose of Disbursement City Purpose of Disbursement Candidate Name  Category/ Type  Memo Item  Subtrotal of Disbursement this Period  Memo Item  Subtrotal of Disbursements This Page (optional)	•	•				
Philadelphia Purpose of Disbursement Bank Fees Candidate Name  Category/ Type  Office Sought: House Primary General State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code Purpose of Disbursement  Candidate Name  Category/ Type  Transaction ID: 14373343 Amount of Each Disbursement this Period Bank Fees  Bank Fees  Memo Item  FEC Identification Number  Category/ Type  Testident  Category/ Type  Office Sought: House Disbursement For:  Candidate Name  Category/ Type  Office Sought: House Disbursement For:  Senate Primary General Other (specify) ▼  Memo Item  Substitute  Memo Item  Substitute  Substitute  Substitute  Substitute  Substitute  Substitute  Substitute  Substitute  Memo Item  Substitute  Memo Item  Substitute  Substitute  Substitute  Memo Item  Substitute  Substitute  Substitute  Substitute  Substitute  Memo Item  Substitute  Substitute  Memo Item	Mailing Address P.O. Box 71203					
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