FEC FORM 3X

Office

Use

Only

FE6AN026

10030

REPORT OF RECEIPTS AND DISBURSEMENTS

2010 JUL 12 PM 1: 01

FEC FORM 3X

Rev. 12/2004

FORM	И ЗХ	For Other Than	An Authorized	Committee		Office Use C)nk
1. NAME (OF TTEE (in full)	TYPE OR PRINT		mple: If typing, typ the lines.	e 12FE		
ACP	rx Pac	1.1.1.1.1.1	11111				
				<u></u>			
ADDRESS ((number and street)	122 C	STREET	NM .	1 1 1 1 1		
T Ch	eck if different	SUITE	50.9		1 1 1 1 1		
tha	n previously ported. (ACC)	WASHIN	6.7.0N	1 1 1 1 1 1	J PC	2000	<u> </u>
2. FEC ID	ENTIFICATION I	NUMBER 🔻	CITY ▲		STATE A	ZIF	CODE A
Co	0.41.88	55	3. IS THIS REPORT	NEW (N)	OR 🔲	AMENDED (A)	
4. TYPE (Choose	OF REPORT One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20	Seed para	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Qu	arterly Reports:		Mar 20 (M3)	Jun 20	` Land	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report	(01)	Apr 20 (M4)	Jul 20	(M7)	Oct 20 (M10)	Jan 31 (YE)
2	July 15 Quarterly Report	(c) 12-Day	bard	Primary (12P)	Ge	neral (12G)	Runoff (12R)
	October 15	Report	for the:	Convention (12C)	Spo	ecial (12S)	
	Quarterly Report January 31 Year-End Report		Election on			3	the late of
	July 31 Mid-Year Report (Non-elec Year Only) (MY)	tion (d) 30-Day	Election	General (30G)	Ru	noff (30R)	Special (30S)
	Termination Repo (TER)		for the:				the tate of
5. Covering Period 6.4 61 2010 through 66 30 2010							
-		this Report and to the		_	it is true, corre	ct and complete.	
Type or Print Name of Treasurer TANES E. LINK							
Signature of Treasurer Date 07'08' Z010							

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

1003036340

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name 64 61 2016 06 30 2000 Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 7. Total Disbursements (from Line 31)....... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 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

10030363410

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Re	eport Covering the Period: From:	64	61	2010	То:	06	30	2010
	I. Receipts		T	COLUMN A otal This Period			COLUMN dar Year-	
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		التناق والمساول والمناز		1 50			
	(i) Itemized (use Schedule A)			905000			. 9.0	25000
	(ii) Unitemized(iii) TOTAL (add Lines 11(a)(i) and (ii)			9.05.009			<u> </u>	50.0
	(b) Political Party Committees							
12.	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	.		9,050.00			9	050°°
13.	Party Committees	Long 19	} 					
	Loan Repayments Received	C						
	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	F						
16.	(Carry Totals to Line 37, page 5)	P						
17.	Political Committees Other Federal Receipts (Dividends, Interest, etc.)	F	<u> </u>					
18.	Transfers from Non-Federal and Levin F (a) Non-Federal Account (from Schedule H3)	unds -						
	(b) Levin Funds (from Schedule H5)	[
	(c) Total Transfers (add 18(a) and 18(b))					-112		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	-		9,05000			. 9.)50°°
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	· [9.05000			. 9.	0.5.0°0

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B** II. Disbursements **Total This Period** 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 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶ 22. Transfers to Affiliated/Other Party Committees......Contributions to Federal Candidates/Committees and Other Political Committees...... 24. Independent Expenditures 26. Loan Repayments Made..... Loans Made......Refunds of Contributions To: 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, 00000 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 III. Net Contributions/Operating Ex-COLUMN A **COLUMN B Total This Period** Calendar Year-to-Date penditures 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)

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
	Datallad Summany Base	
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements in or for commercial purposes, other than using the name and	nay not be sold or used by any pe address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. Gale, Lance		Date of Receipt
Malling Address hurch St. City State	Zlp Code	06'[4'201.6
Springfield C	<u> 2 2 81073</u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
	rmacist	<u></u>
Receipt For: Primary General Other (specify)	e Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		
Mailing Address		Date of Receipt
520 W. Main St.	C Zip Code 28621	0.6 (1.4 201.8
<u>Elkin</u>	<u> </u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25000
Bridge St. Pharmacy Pho	rmacist	
Receipt For: Aggregat Primary General	e Year-to-Date ▼	_
Other (specify) ▼	1 25000	
Full Name (Last; First, Middle initial) C. Boads, PatnCK	· · · · · · · · · · · · · · · · · · ·	Date of Receipt
Mailing Address 1291 HWY 2		06 14 2510
Plain Dealing State	→ Zip Code 71064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0.0.00
	macist	
Receipt Fer: Primary	te Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		40000
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		NUMBER: PAGE OF
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		Detailed Summary Page	11a	11b 11c 12 15 16 17
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma	ay not be sold or used by any pe address of any political committee	rson for the	purpose of soliciting contributions
NAME OF COMMITTEE (In Full)				
ACP RX PAC				
Full Name (Last, First, Middle Initial) A. V.C., James L.			Date o	f Receipt
Mailing Address 149 Crowr	State	Rd.	6.6	1.4 20.1.8
Excelsion Spring	S SIRIE W	1025064024	Amoun	nt of Each Receipt this Period
FEC ID number of contributing federal political committee.	C.	and the second second second second		500.0
Name of Employer Browns Prescription D	Occupation	Pharmaci'st		
Receipt For: Primary General	Aggregate	Year-to-Date ▼		
Other (specify)		5000		
Full Name (Last, First, Middle Initial) B. MCCaSLIO, DON			Date o	of Receipt
Malling Address 401 Hwy. 270			6.	14 2010
Hartshorne	State	K Zip Code 14547	Amour	nt of Each Receipt this Period
FEC ID number of contributing federal political committee.	C			6,000
Name of Employer Cal Drug	Phar	maci'st		
Receipt For: Primary General	Aggregate	Year-to-Date ▼	_	
Other (specify)		A. ALD PAGE		
Full Name (Last, First, Middle Initial) C. SIAKDDER, MATNEL	7	:	Date o	of Receipt
Malling Address Humarc Ave	•		Ö	14 2010
Penndel	State	A Zip Code 19047	Amour	nt of Each Receipt this Period
FEC ID number of contributing federal political committee.	C			5000
Mats Pharmacy		macist		
Receipt For: Primary	Aggregate	Year-to-Date ▼ 5.0.0.0.0		
SUBTOTAL of Receipts This Page (optional)				6500B
TOTAL This Period (last page this line number	only)			

SCHEDULE A (FEC Form 3X)		OR LINE NUMBER: PAGE 3 OF 19		
ITEMIZED RECEIPTS	for each category of the	(check only one)		
	Detailed Summary Page	13 116 116 116 117 1		
Any information copied from such Reports and State	ments may not be sold or used by any pers	on for the purpose of soliciting contributions		
or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	me and address of any political committee to	o solicit contributions from such committee.		
ACP RX PAC				
Full Name (Last, First, Middle Initial) A. Dunn Marty		Date of Receipt		
Malling Address W 32nd PI	State Zip Code	66 21 2010		
Des Moines	1A 50321	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1,0,0,00		
Methodist Plaza Pharma	cy Pharmacist			
Receipt For: Primary Seneral	Aggregate Year-to-Date ▼			
Other (specify)	10000			
B. Taylor, Thomas F	•	Date of Receipt		
Mailing Address 121 TYEX KEY Dr. City	State Zip Code	56 21 2015		
Wadesboro	NC 28170	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	200.00		
· · · · · · · · · · · · · · · · · · ·	Occupation			
Descint Form	pharmacist	-		
Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	200,00			
Full Name (Last, First, Middle Initial) C. SALTAFORMA6610, E	ernard	Date of Receipt		
Malling Address 7791 Kripple K 1	State Zip Code	०६ (मि 2010		
Denham Springs	LA 70706	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	(Social		
Bernards Family Pharm	occupation Pharmacis			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify)	100,00			
SUBTOTAL of Receipts This Page (optional)		4,0000		
TOTAL This Period (last page this line number on	y)			

SCHEDULE A (FEC Form 3X)	. [FOR LINE NUMBER: PAGE 4 OF				
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)				
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Any information copied from such Reports and S or for commercial purposes, other than using the	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)						
ACP RX PAC						
A. Mast, William H.		Date of Receipt				
Mailing Address Ross Mill R	State Zip Code	06'14'20.10				
Henderson	State NC Zip Code 27537	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer Mast Drug Co.	Pharmacis+					
Receipt For:	Aggregate Year-to-Date ▼					
Primary	5.0.0.0.0] .				
Full Name (Last, First, Middle Initial) B. Lanzon, Joseph	A .	Date of Receipt				
Mailing Address 9186 Tavi Stock	DYC.	06 21 2015				
City	State Zip Code					
Plymouth	MI 48170	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1.0000				
Prof. Village Pharmacy	Occupation Pharmacist					
Receipt For:	Aggregate Year-to-Date ▼					
Primary X General Other (specify) ▼	10000]				
c. Philey, Margare	B.	Date of Receipt				
Mailing Address PD BOX 117		06 21 2010				
Mer Rouge	State LA Zip Code 712-61	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50,00				
Brodic Pharmacy	Pharmacist					
Receipt For: Primary General	Aggregate Year-to-Date ▼	a.				
Other (specify) ▼		7				
SUBTOTAL of Receipts This Page (optional)		65000				
TOTAL This Period (last page this line number	only)					

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 5 OF 19			
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and State or for commercial purposes, other than using the	Itements may not be sold or used by any per name and address of any political committee t	son for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)					
ACP RX PAC		· · · · · · · · · · · · · · · · · · ·			
A. HEWKIN, John W		Date of Receipt			
Malling Address Yoguois D	State Zip Code	06 14 2010			
Sullivan	M 0 25 3080	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.0.0.0			
Name of Employer Scif-Towne Pharmacy	Occupation Pharmacist	<u> </u>			
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	2,50,0,0				
	ſr.	Date of Receipt			
Address Country Clu	6 Dr . State Zip Code	06 21 2010			
Lynn Haven	FL 32444	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25000			
Name of Employer Adams Pharmacy	Pharmacist Pharmacist				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼				
Lance I					
Full Name (Last, First, Middle Initial) C. Byan, H. Dean	1	Date of Receipt			
Mailing Address Main St.	State Zip Code	06/21/2010			
Tarboro	318 NC 27 300 27886	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25000			
Name of Employer Byan Dmgs	Pharmacist				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional)		750.00			
TOTAL This Period (last page this line number	only)				

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE OF 1
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a	ts may not be sold or used by any pers	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. Futyell William R.		Date of Receipt
P.O. Box 768	e Zip Code	06 4 2010
Tackson State	NC 27845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1.00.0.0
Name of Employer Occup SCI f	pation armacist	
Descript Com	egate Year-to-Date ▼	
Other (specify)	(SOOD)	
Full Name (Last, First, Middle Initial) B. ONCO WOLTON P.		Date of Receipt
Mailing Address DOWN CYCEK EAST City Stat	te Zip Code	66 21 2010
Belhaven	NC 27810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
uncals Drug Store Pr	narmacist	
	egate Year-to-Date ▼	}
Other (specify) ▼	50000	
Full Name (Last, First, Middle Initial) C. GYCAG, BOLO G.	;	Date of Receipt
Mailing Address Andes Cir.	7.0	06 21 2010
Granvile	10 TN Zip Code 37743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0.000
Atchley Drug Center P	hamacist]
Receipt For: Aggr	egate Year-to-Date ▼	
Other (specify) ▼	10000	
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TOTAL This Period (last page this line number only)	·····	

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 7 OF 19				
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)				
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and Stateme	nts may not be sold or used by any pe	rson for the purpose of soliciting contributions				
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political committee	to solicit contributions from such committee.				
ACP RX PAC						
Full Name (Last, First, Middle Initial) A. POMATICO THEODOY	<u> </u>	Date of Receipt				
Mailing Address 139 Old Bergen Rd.		0.0 P21 2013				
City	NJ Zip Code p7305					
Jersey City	NJ 07305	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		100.00				
	harmacist					
Receipt For: Aggi	regate Year-to-Date ▼	-				
Primary	1.00.00					
Full Name (Last, First, Middle Initial)						
B. Brantley, Kayren	· · · · · · · · · · · · · · · · · · ·	Date of Receipt				
Mailing Address Broughton St.		06 21 2010				
City Sta	ateN C Zip Code 21371	Amount of Each Receipt this Period				
FEC ID number of contributing		25000				
federal political committee. Name of Employer Occidents Occid	upation					
White Star Pharmacy	Pharmacis+					
Receipt For: Agg Primary General	regate Year-to-Date ▼					
Other (specify)	, ,250,00					
Full Name (Last, First, Middle Initial)	ī	Date of Bessiat				
Mailing Address		Date of Receipt				
4012 Walnut Grov	ate t Zip Code	06 21 2010				
Cookeville	TN 38506	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	50.0.0.1					
Payks Family Phamacy	upatlon Phamacist					
	regate Year-to-Date ▼					
Other (specify)	10000)				
SUBTOTAL of Receipts This Page (optional)		450,00				
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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 OF 19
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	11a 11b 110 12 13 14 15 16 17
Any information copied from such Reports and Statements m	av not be sold or used by any pers	
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)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. Tutte, Jon J.		Date of Receipt
Mailing Address Aztc Ct	The Oaste	56 21 2016
Fort Atkinson State	J1 Zip Code 53538	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1.00.00
Name of Employer Tuttes Pharmacy Pl	harmacist	
Beecht For	Year-to-Date Y	
Primary General		
Other (specify) ▼	1.0.0.00	
Full Name (Last, First, Middle Initial) B. HUNTEY, STOPEN D.		Date of Receipt
Meiling Address 309 Bridkwood Dr		66 21 2010
City	Zip Code	
<u>Greensburg</u> Pl	15601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50,00
Name of Employer HUNKY Pharmacy Pha	rmacist	
Receipt For: Aggregat	e Year-to-Date ▼	1
Primary General Other (specify)	5003	
Gardi (openiy)	<u> </u>	
c. Rothschild, Charks	B	Date of Receipt
2613 Mulberry Ln.		66 21 2010
Northbrook State	L Zip Code 60062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0000
Name of Employer Occupation		†
	<u>rmacist</u>	1
Receipt For: Aggregat Primary General	e Year-to-Date ▼	
Other (specify) ▼	10000	
CURTOTAL of Receipts This Rece (actions)		25000
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)		1

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF IT
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a	s may not be sold or used by any per and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
ACP RX PAC		
A. Reznick Frank P	•	Date of Receipt
Mailing Address H21 W. Lane St. City. State	Zip Code	56 21 2010
Centerville	1A 2500 52544	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	and the state of t	50.00
	ation narmacist	
Receipt For: Aggre Primary General	gate Year-to-Date ▼	
Other (specify) ▼	50.0.0	
Full Name (Last, First, Middle Initial) B. Kostecki Lisa		Date of Receipt
Malling Address 82		06 21 2010
Cross Plains State	W1 Zip Code 53528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		6.0.00.1
Cross Plains Pharmack	Pharmacis*	H
Denoted Form	gate Year-to-Date ▼	
Other (specify)	0.000 IN . A .	
c. Porker, Richard J.		Date of Receipt
Mailing Address 57th Ave.	N .	06 14 2010
Fort Byron Stat	"IL Zip Code 61275	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		00.00
Porter Village Rx P	charmaa'st	
Primary General Aggre	egate Year-to-Date ▼	
Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional))	25000
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE D OF 19			
ITEMIZED RECEIPTS		for each category of the	(check only one)			
		Detailed Summary Page				
Any information copied from such Reports and Stron for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
ACP RX PAC						
	١.		Date of Receipt			
Mailing Address N. Indiana Av	···	70 Code	56 21 2010			
Engkwood	State	_ Zip Code 34223	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C :		20000			
Apple Pharmacy	Pha	imacist	·			
Receipt For:		Year-to-Date ▼	7			
Primary		20.000				
Full Name (Last, First, Middle Initial) B. EINSIGKY, GAY	B.		Date of Receipt			
70 Pontiac Rd.			06 14 2010			
duincy	State M	A 7 02169	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C.		10000			
Name of Employer Tremont Drug	Pha	rmacist				
Receipt For:		Year-to-Date ▼				
Primary General Other (specify)		0.000.1				
Full Name (Last, First, Middle Initial)		ř	Date of Receipt			
Mailing Address Lo3 Lox Ington	4VC		6.6 ' [4 ' Zal 8			
Canby	State M	N Zip Code 56220	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C :		[
Canto Drug	Phay					
Receipt For: Primary General	Aggregate	Year-to-Date ▼	1			
Other (specify) •	L					
SUBTOTAL of Receipts This Page (optional)			40000			
CODICIAL OF Receipts This Page (optional)						

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

SCHEDULE A (FEC Form 3X)	Line concrete achadula/e\	FOR LINE NUMBER: PAGE OF 9
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an	may not be sold or used by any per d address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. Powers James B.		Date of Receipt
Malling Address 1349 old Village Rd. City State	7la Coda	64 14 2010
	L Zip Code 32312	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.000
Name of Employer FL. Indep. Pharmacy Netwo		
Receipt For: Aggreg	ate Year-to-Date V	Ή
Primary General Other (specify)	0,0,0,0	
Full Name (Last, First, Middle Initial) B. Lanc, Donald K.		Date of Receipt
Malling Address 39 PEACOCK Rd.		66 4 2016
City	6A Zip Code 31092	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1.00.0
Name of Employer Mante Zuma Drug Ph	avmacist	
Receipt For: Aggreg	ate Year-to-Date ▼	1
Primary General Other (specify)	100,00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address Harris Avc.		6.6 (14) (201. o
Ractord	NC Zip Code 28376	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		20000
	narmacist	
Receipt For: Primary General Other (specify) ▼	pate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		40000
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)					NUMBE	R: PA	GE 120	F 19
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(che	ck only	<u> </u>		<u> </u>	
		Detailed Summary Page	<u>-</u>	11a 13	11b	110	12	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements m	ay not be sold or used by any pe	erson fo	or the	purpose	of soliciti	ng contribu	ions
NAME OF COMMITTEE (In Full)	Tiamo and a	address of any political committee	10 50	iicit coi		S HOITI SU	CIT COMMINIC	ee
ACP RX PAC								
Full Name (Last, First, Middle Initial) A. Ducknowski, Kenn	eth	Μ.		Date of	Receip			
Mailing Address LaDuc Rd.				06		31 E	201	3
Belkvilk	State	L Zip Code 62223		Amount	of Faci	Receipt	this Period	
FEC ID number of contributing federal political committee.	C .			Allouin	T. (2)		45 0	00
Name of Employer	Occupation	1	┥╹		the source of the system			· ·
B+D Pharmacy		macist	_					
Receipt For: Primary General	Aggregate	Year-to-Date ▼						
Other (specify)		25000			_		·	
Full Name (Last, First, Middle Initial) B. Nauka, Clement				Date of	Receip	t		
374 Picasent View	Ct.			66	1' [4	10.1	
City Paso	State	X Zip Code 79912						
FEC ID number of contributing		× 111116	-		t of Eac	-	this Period	أسحاعسا
federal political committee.							1.00	0.0
Name of Employer Eckland Pharmacy	Occupatio	harmacist	\exists					
Receipt For:		Year-to-Date ▼	-					
Primary General Other (specify) ▼		A A 1.00 A Q C	1					
		A A I.O.O.A.Q.C	3	- , i				
Full Name (Last, First, Middle Initial) C. CYOSON GAYN N	•	ſ		Date o	f Receip	t		
Mailing Address 8th Avc. N	٠.			66	7	4	201	0
Fort Dodge	State	K Zip Code 5 05 0 1	_	Amoun			this Period	
FEC ID number of contributing federal political committee.	c[0.01	00
Name of Employer	Occupation		\dashv					
Picco DWG Receipt For:		Pharma cist year-to-Date Y	\dashv					
Primary General	98 94//	10000	7					
Other (specify) ▼			1					<u> </u>
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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 3 OF 19
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by any person address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. Ellison, Clarence		Date of Receipt
Mailing Address 380 Broadmoor Way City State	Zip Code	06/14/2010
Clayton	1C 27520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.0d
Name of Employer Coor's Pharmacy Pha	on rmacist	
Receipt For: Aggrega	ite Year-to-Date ▼	1
Primary	50.00	
Full Name (Last, First, Middle Initial) B. FERQUSON, Anna F.		Date of Receipt
Mailing Midress 891 Three Forks Rd.		0.4 1.4 201.0
City	1C Zip Code 28681	
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.		10000
Name of Employer Office Practice of Pharmacy	Pharmacist	
Receipt For: Aggrega	ite Year-to-Date ▼	1
Primary General Other (specify) ▼	1.00000	
c. <u>Craft</u> , <u>Lonnie</u> Toe	;	Date of Receipt
Halling Address S. Jefferson Ave		06'14'2010
	on Zip Code 43064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25000
	lon ermacist	
Receipt For: Aggregation Aggregation Primary General	ate Year-to-Date ▼	
Other (specify) 🔻	250,00	
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE OF 9 (check only one)
•••			Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma	ay not be sold or used by any peuddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
2	ACP RX PAC			
A.	Full Name (Last, First, Middle Initial) Turrer, Robert A.			Date of Receipt
	Mailing Address 580			06 14 2010
	Andreus	State N	C Zip Code 28901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1.00.00
	Hyatsville Pharmacy	Phar	macist	·
	Receipt For: Primary Seneral	Aggregate	Year-to-Date ▼	
	Other (specify)		6000 L	
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Malling Address 110W Rd.	State	Zin Code	56 14 201.8
	Pittston	State	Zip Code 18640	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10000
	Sheehans Pharmacy	Occupation	_	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		20 CO CO L	
c.	Full Name (Last, First, Middle Initial) Canh I Paresh 7	•		Date of Receipt
	Mailing Address fayette cir			04/14/2010
	Totowa	State >	15 Code 07512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C :		50000
	Name of Employer	Phai	macist	
	Receipt For:		Year-to-Date ▼	
	Primary		5 <u>,00,0</u> 0	

SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X)		lles canarata cabadula(a)		NUMBER:	PAGE 5 OF 9
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		Detailed Summary Page	11a	11b	11c 12 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the remaining the NAME OF COMMITTEE (In Full)	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	purpose of s	oliciting contributions
ACP RX PAC					
A. Bachman, Constance	eK.		Date o	f Receipt	
Mailing Address OH ME W. Main City	State	Zip Code	الق ق	ं दिय	2010
Goldendak	W	A 98620	Amoun	t of Each Re	ceipt this Period
FEC ID number of contributing federal political committee.	C .		-	سايسون د	<u>5000</u>
Name of Employer K-CPhormacy Receipt For:	Phar	macist			•
Primary General Other (specify)	Aggregate	Year-to-Date ▼			
	d Ba	rton	Date o	f Receipt	
Malling Address 1404 Woodland Ter City	State K	Zip Code / / 3 / 3	<u> </u>	14	20.1.0
Pittsburg	K	S Zip Code 66762	Amoun	t of Each Re	celpt this Period
FEC ID number of contributing federal political committee.	C				LUPES
Name of Employer CrowCN Drug Receipt For:		macist			
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼			
	<i>lesley</i>	1	Date o	of Receipt	
Malling Address S. Dean A Mc	GEE	Ave Zip Code	6.6	14	201.0
Wynnewood	<u> </u>		Amour	nt of Each Re	eceipt this Period
FEC ID number of contributing federal political committee.	C.			4 6	0,0,0,0
Name of Employer	Phan	4 1			
Receipt For: Primary	Aggregate	Year-to-Date V			
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SCHEDULE A (FEC FORM 3X)	liga canarata echadule/e\	FOR LINE NUMBER: PAGE GOF 9
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Any Information copied from such Reports and Stateme	ents may not be sold or used by any per	son 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)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. Lebbad, Malin K.		Date of Receipt
Mailing Address 45 16th St.		06 14 2010
Cayucos	tate CA Zip Code 93430	Amount of Each Receipt this Period
man and the second second		
federal political committee.		1.0.0.0.0
Cayucos Phaymacy	Pharmacts+	
Receipt For:	gregate Year-to-Date ▼	1
Primary General Other (specify)	1,000,0	
in the second se		
Full Name (Last, First, Middle Initial) B. GCC, GOODY		Date of Receipt
Mailing Address 3230 Northvidge Dr	`	[26] [14] [20] 8
	itate Zip Code	Grandania Constitution Francisco Constitution
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25000
Name of Employer Turner Drug	Phamau'st	
	gregate Year-to-Date ▼	· ·
Primary General Other (specify)	15000	
Full Name (Last, First, Middle Initial) C. Thompson, Terry	i.	Date of Receipt
Mailing Address 821 Bernal Court		06 14 2010
Spring Valley	State L Zip Code 61362	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	1	1.0.000
Name of Employer Thompson's Drug	Phamacist	<u> </u>
Receipt For:	gregate Year-to-Date ▼	7
Primary General Other (specify)	0,0,0,0	
Caro. (openit) 4		
CURTOTAL of Dessints This Dess (antique)		ע כחסט
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SCHEDULE A	(FEC Fo	rm 3X)
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Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any peaddress of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
ACP RX PAC		
Full Name (Last, First, Middle Initial) A. LOWY MACK R		Date of Receipt
Mailing Address Louina B. R.	d	06 14 2010
Roanoke	L Zip Code 36 274	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		5000
Decelot For	rmacist	<u> </u>
Primary General Other (specify)	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) B. Flippo, Gary D.		Date of Receipt
Mailing Address 550		6.6 1.4 20.1.0
Walnut Ridge State	R Zip Code 72476	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		5000
Prescription House Pho	imaci'st	
Decelet For	Year-to-Date ▼	
Other (specify)	150.00	
Full Name (Last, First Middle Initial) C. Wong , AKCY	(Date of Receipt
Mailing Address Yellowstone Bh		06,13,5010
Exest Hill State	NY Zip Code 11375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25000
	irmacist	
Receipt For: Primary General Other (specify) ▼	e Year-to-Date ▼	
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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE SOF					
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any p name and address of any political committee	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)							
ACP RX PAC							
A. RODEYTS, Middle Initial)		Date of Receipt					
Mailing Address 2142 Muddy Spri	ngs Rd.	0.6 14 20.1.0					
Magnolia	MS 20 2965 2	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	0.0.0.0					
Name of Employer	Occupation						
Corner Drug Store	Pharmacist	_					
Primary General	Aggregate Year-to-Date ▼	- I					
Other (specify) 🔻	100.00						
Full Name (Last, First, Middle Initial) B. Porch G VCODY		Date of Receipt					
Mailing Address PO Box 12-7	Obd.	06 19 2010					
Cottonport	State LA Zip Code 71327	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	10000					
Name of Employer	Occupation	-					
SCI†	Pharmacist	_					
Primary . General	Aggregate Year-to-Date ▼	a					
Other (specify)	L	3					
Full Name (Last, First, Middle Initial) C. BENCHEL STONE	E	Date of Receipt					
Malling Address W. Court	Olub Tr. C	06 14 25.10					
Paris	State L Zip Code 61944	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	25,000					
Name of Employer	Occupation Pharmacist						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify)	25000	3					
SUBTOTAL of Receipts This Page (optional)		45.000					
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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 90F 9					
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Any Information copied from such Reports and State	ements may not be sold or used by any p	erson for the purpose of soliciting contributions					
or for commercial purposes, other than using the na	me and address of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)							
ACP RX PAC							
Full Name (Last, First, Middle Initial) A. Brumer CharkS		Date of Receipt					
Mailine Address							
10742 Zurich St.	State Zip Code	0.6 1.4 20.1.0					
Cooper City	FL 33026	Amount of Each Receipt this Period					
FEC ID number of contributing	C						
federal political committee.		1.50.00					
	Occupation	- ·					
Hollywood Discount Pharma	Aggregate Year-to-Date V	_					
Primary General		a (
Other (specify)	25000]					
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City	State Zip Code	- Longbood bandand bandandand					
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	Occupation						
Name of Employer	occupation						
	Aggregate Year-to-Date ▼	7					
Primary General Other (specify) ▼		Ţ					
		<u> </u>					
Full Name (Last, First, Middle Initial)	i	Date of Receipt					
C. Mailing Address	· · · · · · · · · · · · · · · · · · ·	Date of Receipt					
	Old Winds						
City	State Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing		Autonic or Each Ligable mis Lauce					
federal political committee.							
Name of Employer	Occupation	-					
Possint For:		_					
Receipt For: Primary General	Aggregate Year-to-Date ▼	-					
Other (specify) ▼		1					
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	EMIZED DISBURSEMENTS	Use separate schedule(s)	(check only		THOSE OF
•••		for each category of the Detailed Summary Page	21b	22 23	24 25 26
_			27	28a 28b	28c 29 30b
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\setminus	NAME OF COMMITTEE (In Full)	•		:	
1/	ACP RX PAC				
<u></u>	Full Name (Last, First, Middle Initial)		-		
A.	Walter Jones for C	bnaw(C		Date of Disbursemen	nt
	Mailing Address	VIII ICS		万万/59	2010
	PO Box 3962		1		20.1.0
	City	State NC Zip Code 2-	1836		
	Greenvile Purpose of Disbursement	NO L	1026		
	Talpood of Sibbalbollion			Amount of Each Dis	bursement this Period
	Candidate Name		Category/		E 00 8 8
	Walter Jones	sement For:	Туре		5.0000
	Office Sought: House Disbur	Primary General			
	President	Other (specify)			
_	State: District:				
_	Full Name (Last, First, Middle Initial)	_	-		
В.	Elaine Marshall (mmittee		Date of Disburseme	
	Meiling: Address			06 09	2010
	311 S. Harrington S				
	City	State . Zip Code	7/201	Management Re-	
		State . Zip Code	7601		
	Rakiah Purpose of Diebursement	State . Zip Code	7601	Amount of Each Dis	bursement this Period
	Purpose of Diebursement Candidate Name	State . Zip Code	Category/	Amount of Each Dis	bursement this Period
	Purpose of Disbursement Candidate Name Elaire Marshall	State NC Zip Code 2:		Amount of Each Dis	
	Purpose of Diebursement Candidate Name Elaire Marshall	State NC Zip Code 2:	Category/	Amount of Each Dis	bursement this Period
	Purpose of Disbursement Candidate Name Elaine Marshall Office Sought: House Senate President	State NC Zip Code 2:	Category/	Amount of Each Dis	bursement this Period
	Purpose of Diebursement Candidate Name Elaire Morshall Office Sought: House Senate President State: District:	State NC Zip Code 2: sement For: Primary X General	Category/	Amount of Each Dis	bursement this Period
_	Purpose of Diebursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	State NC Zip Code 2: sement For: Primary X General	Category/		bursement this Period
 c.	Purpose of Diebursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	State NC Zip Code 2: sement For: Primary X General	Category/	Amount of Each Dis	bursement this Period
 c.	Purpose of Diebursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	State NC Zip Code 2: sement For: Primary X General	Category/		bursement this Period
 c.	Purpose of Disbursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address	State NC Zip Code 2: sement For: Primary X General Other (specify)	Category/		bursement this Period
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c.	Purpose of Disbursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Malling Address City Purpose of Disbursement	State NC Zip Code 2: sement For: Primary X General Other (specify)	Category/	Date of Disburseme	bursement this Period
c.	Purpose of Disbursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Malling Address City	State NC Zip Code 2: sement For: Primary X General Other (specify)	Category/ Type	Date of Disburseme	bursement this Period
c.	Purpose of Disbursement Candidate Name Elaire Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Malling Address City Purpose of Disbursement Candidate Name	State NC Zip Code 2: Sement For: General Other (specify) State Zip Code	Category/ Type	Date of Disburseme	bursement this Period
с.	Purpose of Disbursement Candidate Name Elaire Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Malling Address City Purpose of Disbursement Candidate Name	State NC Zip Code 2: sement For: Primary X General Other (specify)	Category/ Type	Date of Disburseme	bursement this Period
 c.	Purpose of Disbursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Malling Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President President Office Purpose of Disbursement	State Zip Code 2: Sement For: General Other (specify)	Category/ Type	Date of Disburseme	bursement this Period
- c.	Purpose of Disbursement Candidate Name Elaine Morshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City Purpose of Disbursement Candidate Name Office Sought: House Senate	State Zip Code 2: Sement For:	Category/ Type	Date of Disburseme	bursement this Period
Γ	Purpose of Disbursement Candidate Name Elaine Marshall Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Malling Address City Purpose of Disbursement Candidate Name Office Sought: House Senate President President Office Purpose of Disbursement	State Zip Code State Zip Code	Category/ Type Category/ Type	Date of Disburseme	bursement this Period

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

(3/2005)

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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): トモムビィク Next Business Day Delivery Date of Receipt Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):