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FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

June 9, 2010

Debbie Shell, Treasurer
American Society for Clinical Laboratory
Science Political Action Committee
6701 Democracy Blvd, Suite 300
Bethesda, MD 20817

Response Due Date:
July 14, 2010

Identification Number: C00034645

Reference: April Quarterly Report (1/1/10-3/31/10)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following item:

-Please provide the total(s) for Line 6(d), Columns A and B of the Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1140.

10030361427

Sincerely,



James McAllister
Campaign Finance Analyst
Reports Analysis Division

319

10030361428

2010 JUL -8 PM 12:18

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

AMERICAN SOCIETY FOR CLINICAL LABORATORY
SCIENCE

ADDRESS (number and street)

16701 OROONOK BLD

SUITE 300

Check if different than previously reported. (ACC)

BETHESDA

MD

120817-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00034645

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-Election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

____/____/____

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

____/____/____

in the State of

5. Covering Period

01 01 2010

through

03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Debra M. Shell

Signature of Treasurer

Debra M. Shell

Date

07 05 2010

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

10030361429

**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:

01 / 01 / 2010

To:

03 / 31 / 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2010		6280429
(b) Cash on Hand at Beginning of Reporting Period.....	6280429	
(c) Total Receipts (from Line 19).....	41233	41233
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6321662	6321662
7. Total Disbursements (from Line 31).....	384100	384100
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5937562	5937562
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

10030361430

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE

Report Covering the Period: From:

01 ' *01* ' *2010*

To:

03 ' *31* ' *2010*

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.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)..... ▶

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.).....

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))..... ▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

32800

32800

32800

32800

8433

41233

41233

32800

32800

32800

32800

8433

41233

41233

10030361431

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	1757.00	1757.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1757.00	1757.00
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	2000.00
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 <u>BANK CHARGES</u>	90.00	90.00
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))	3841.00	3841.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	3841.00	3841.00

10030361432

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	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)		

10030361433

**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 / OF <input checked="" type="checkbox"/> 2
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)
GELMAN ROSENBERG & FREEDMAN

Date of Disbursement
01 / 26 / 2010

Mailing Address
4550 MONTGOMERY AVE, SUITE 610 NORTH

City
BETHESDA State
MD Zip Code
20814

Purpose of Disbursement
AUDIT / TAX RETURN

Candidate Name

Amount of Each Disbursement this Period
1,000.00

Category/Type

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

State: District:

B.

Full Name (Last, First, Middle Initial)
INTERNAL REVENUE SERVICE

Date of Disbursement
01 / 29 / 2010

Mailing Address

City
OGDEN State
UT Zip Code
84201

Purpose of Disbursement
TAXES

Candidate Name

Amount of Each Disbursement this Period
14.00

Category/Type

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

State: District:

C.

Full Name (Last, First, Middle Initial)
COMPTROLLER OF MARYLAND

Date of Disbursement
02 / 25 / 2010

Mailing Address
REVENUE ADMIN DIVISION

City
ANNAPOLIS State
MD Zip Code
21411

Purpose of Disbursement
TAXES

Candidate Name

Amount of Each Disbursement this Period
37.00

Category/Type

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

State: District:

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

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

10030361434

**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 2 OF 2
	<input checked="" 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"/> 28a	<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

A.

Full Name (Last, First, Middle Initial)
RENEE SETNA

Mailing Address
3537 BREKWOOD PL

City **SPRINGFIELD** State **MO** Zip Code **65807**

Purpose of Disbursement
PNS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
03 / 08 / 2010

Amount of Each Disbursement this Period
700.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

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

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

1751.00

10030361435

**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	OF
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26		
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<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

A. FRIENDS OF ROSA DELAUNO

Date of Disbursement: 01 29 2010

Mailing Address: 59 Elm St
City: New Haven, CT State: CT Zip Code: 06510

Purpose of Disbursement: CONTRIBUTION

Candidate Name: ROSA DELAUNO Category/Type: []

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

State: CT District: 3rd

Amount of Each Disbursement this Period: 1000.00

B. SCHWARTZ FOR CONGRESS

Date of Disbursement: 01 29 2010

Mailing Address: 38 Ivy St, SE
City: Washington, DC State: DC Zip Code: 20003

Purpose of Disbursement: CONTRIBUTION

Candidate Name: ALESSAN SCHWARTZ Category/Type: []

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

State: PA District: 13th

Amount of Each Disbursement this Period: 1000.00

C.

Date of Disbursement: [] [] []

Mailing Address: [] [] []

City: [] State: [] Zip Code: []

Purpose of Disbursement: []

Candidate Name: [] Category/Type: []

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

State: [] District: []

Amount of Each Disbursement this Period: []

SUBTOTAL of Disbursements This Page (optional).....▶ []

TOTAL This Period (last page this line number only).....▶ 2000.00

10030361436

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed. Exp</i>	Shipping Date <i>7/6/10</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

[Signature]
 PREPARER

7/8/10
 DATE PREPARED

10030361437