

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

Prescription for America's Future

ADDRESS (number and street) 801 Pennsylvania Ave. NW Suite 610 Washington DC 20004

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00560532

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 07 / 22 / 2014 in the State of GA

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on / / in the State of

5. Covering Period 05 / 01 / 2014 through 07 / 02 / 2014

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 Michael G. Adams

Signature of Treasurer Michael G. Adams [Electronically Filed] Date 07 / 09 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Prescription for America's Future

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="4475.00"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="80876.63"/> | <input type="text" value="85876.63"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="85351.63"/> | <input type="text" value="85876.63"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="24268.53"/> | <input type="text" value="24793.53"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="61083.10"/> | <input type="text" value="61083.10"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

Write or Type Committee Name

Prescription for America's Future

Report Covering the Period: From: / / To: / /

| 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)..... | 80301.63 | 85301.63 |
| (ii) Unitemized | 575.00 | 575.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 80876.63 | 85876.63 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 80876.63 | 85876.63 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 80876.63 | 85876.63 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 80876.63 | 85876.63 |

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 | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 3199.90 | 3724.90 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 3199.90 | 3724.90 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 21068.63 | 21068.63 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other 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 (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C. §431(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)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 24268.53 | 24793.53 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 24268.53 | 24793.53 |

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) | 80876.63 | 85876.63 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 80876.63 | 85876.63 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 3199.90 | 3724.90 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 3199.90 | 3724.90 |

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Prescription for America's Future

Full Name (Last, First, Middle Initial)
A. American Pharmacy Cooperative, Inc.

Mailing Address 5601 Shirley Park Dr

City Bessemer State AL Zip Code 35022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2014
Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
10000.00

Full Name (Last, First, Middle Initial)
B. American Pharmacy Cooperative, Inc.

Mailing Address 5601 Shirley Park Dr

City Bessemer State AL Zip Code 35022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
15000.00

Full Name (Last, First, Middle Initial)
C. BeSeen Outdoor, Inc.

Mailing Address 2001 Cook St.

City Brunswick State GA Zip Code 31520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1898.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2014
Transaction ID : SA11AI.4142

Amount of Each Receipt this Period
1898.63

In-kind - Billboard

SUBTOTAL of Receipts This Page (optional)..... ▶ 26898.63

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Prescription for America's Future

Full Name (Last, First, Middle Initial)
A. Concord, Inc.

Mailing Address 8046 Roswell Rd
Suite 202

City Atlanta State GA Zip Code 30350

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 25 / 2014
Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Curant Health

Mailing Address 200 Technology Ct. SE
Suite B

City Smyrna State GA Zip Code 30082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014
Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
C. Georgia Pharmacy Association Academy of Independent Pharmacy

Mailing Address 50 Lenox Pointe NE

City Atlanta State GA Zip Code 30324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2014
Transaction ID : SA11AI.4154

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 28000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Prescription for America's Future

Full Name (Last, First, Middle Initial)
A. Joseph Matteo, Inc.

Mailing Address 215 Allegheny Ave.

City State Zip Code
Oakmont PA 15139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.4176

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Lacey Drug Co., Inc

Mailing Address 4797 S. Main St.

City State Zip Code
Acworth GA 30101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.4179

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Lechs Pharmacy

Mailing Address 104 Main St.

City State Zip Code
Laceyville PA 18623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2014
Transaction ID : SA11AI.4149

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
Prescription for America's Future

Full Name (Last, First, Middle Initial)
A. Surescripts, LLC

Mailing Address 2800 Crystal Dr
10th Floor

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2014
Transaction ID : SA11AI.4151

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. TMC RX Management LLC

Mailing Address 1001 W. Baker Hwy

City Douglas State GA Zip Code 31533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2014
Transaction ID : SA11AI.4172

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Vista Outdoor Advertising

Mailing Address 117 Osborne Street

City Saint Mary's State GA Zip Code 31558

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9653.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2014
Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
9653.00

In-kind - Billboard

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 16653.00 |
| TOTAL This Period (last page this line number only).....▶ | 80301.63 |

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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)
Prescription for America's Future

Full Name (Last, First, Middle Initial)

A. Dinsmore & Shohl LLP

Mailing Address 101 South Fifth Street
Suite 2500

City Louisville State KY Zip Code 40202

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 18 | / | 2014 |

Transaction ID : SB21B.4181

Amount of Each Disbursement this Period

| |
|---------|
| 3139.90 |
|---------|

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

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

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

| |
|---------|
| 3139.90 |
|---------|

| |
|---------|
| 3139.90 |
|---------|

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Prescription for America's Future
FEC IDENTIFICATION NUMBER C C00560532
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Adtrans, Inc
Mailing Address 6713 Oakmont Way
City Bradenton State FL Zip Code 34202
Purpose of Expenditure Mobile Billboard Category/Type 004
Date of Public Distribution/Dissemination 05/15/2014
Amount 4200.00
Transaction ID: SE.4107
Date of Disbursement or Obligation 05/12/2014
Name of Federal Candidate EARL LEROY CARTER Support
Office Sought: House District: 01 State: GA
Disbursement For: Primary 2014

Full Name of Payee BeSeen Outdoor, Inc.
Mailing Address 2001 Cook St.
City Brunswick State GA Zip Code 31520
Purpose of Expenditure In-kind - Billboard Category/Type 004
Date of Public Distribution/Dissemination 07/01/2014
Amount 1898.63
Transaction ID: SE.4138
Date of Disbursement or Obligation 07/01/2014
Name of Federal Candidate EARL LEROY CARTER Support
Office Sought: House District: 01 State: GA
Disbursement For: Other (specify) Runoff 2014

(a) SUBTOTAL of Itemized Independent Expenditures 6098.63
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael G. Adams [Electronically Filed] Date 07/09/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Prescription for America's Future
FEC IDENTIFICATION NUMBER C C00560532
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Power Marketing & Printing
Mailing Address 1080 Nine North Dr. Suite D
City Alpharetta State GA Zip Code 30004
Purpose of Expenditure Advocacy Mailing Category/Type 004
Name of Federal Candidate EARL LEROY CARTER Support
Calendar Year-To-Date Per Election for Office Sought 693.67

Date of Public Distribution/Dissemination 04/30/2014
Amount 693.67
Transaction ID : SE.4112
Date of Disbursement or Obligation 05/09/2014
Office Sought: House District: 01 State: GA
Disbursement For: Primary General 2014

Full Name of Payee Power Marketing & Printing
Mailing Address 1080 Nine North Dr. Suite D
City Alpharetta State GA Zip Code 30004
Purpose of Expenditure Advocacy Mailing Category/Type 004
Name of Federal Candidate EARL LEROY CARTER Support
Calendar Year-To-Date Per Election for Office Sought 6423.68

Date of Public Distribution/Dissemination 05/14/2014
Amount 1432.51
Transaction ID : SE.4116
Date of Disbursement or Obligation 05/14/2014
Office Sought: House District: 01 State: GA
Disbursement For: Primary General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 2126.18
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael G. Adams
Signature

[Electronically Filed]

Date 07/09/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Prescription for America's Future
FEC IDENTIFICATION NUMBER C C00560532
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Power Marketing & Printing
Mailing Address 1080 Nine North Dr. Suite D
City Alpharetta State GA Zip Code 30004
Purpose of Expenditure Advocacy Mailing Category/Type 004
Name of Federal Candidate EARL LEROY CARTER Support
Calendar Year-To-Date Per Election for Office Sought 1502.19

Date of Public Distribution/Dissemination 06/23/2014
Amount 1502.19
Transaction ID : SE.4120
Date of Disbursement or Obligation 06/23/2014
Office Sought: House District: 01 State: GA
Disbursement For: Other (specify) Runoff

Full Name of Payee Power Marketing & Printing
Mailing Address 1080 Nine North Dr. Suite D
City Alpharetta State GA Zip Code 30004
Purpose of Expenditure Advocacy Mailing Category/Type 004
Name of Federal Candidate EARL LEROY CARTER Support
Calendar Year-To-Date Per Election for Office Sought 2935.82

Date of Public Distribution/Dissemination 07/01/2014
Amount 1433.63
Transaction ID : SE.4121
Date of Disbursement or Obligation 06/23/2014
Office Sought: House District: 01 State: GA
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 2935.82
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael G. Adams [Electronically Filed] Date 07/09/2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Prescription for America's Future
FEC IDENTIFICATION NUMBER C C00560532
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Lee Smitherman
Mailing Address 5466 Vinings Lake Way, SW
City Mableton State GA Zip Code 30126
Purpose of Expenditure Printing production Category/Type 004
Name of Federal Candidate EARL LEROY CARTER Support
Office Sought: House District: 01 State: GA
Calendar Year-To-Date Per Election for Office Sought 4991.17
Disbursement For: Primary 2014

Full Name of Payee Lee Smitherman
Mailing Address 5466 Vinings Lake Way, SW
City Mableton State GA Zip Code 30126
Purpose of Expenditure Printing Production Category/Type 004
Name of Federal Candidate EARL LEROY CARTER Support
Office Sought: House District: 01 State: GA
Calendar Year-To-Date Per Election for Office Sought 12667.57
Disbursement For: Other (specify) Runoff 2014

(a) SUBTOTAL of Itemized Independent Expenditures 176.25
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Michael G. Adams [Electronically Filed] Date 07/09/2014
Signature

