Image# 14952781635 PAGE 1 / 11

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 ▼	=/10	mple: If typir r the lines.	ng, type	12FE4M5		
AMPHASTAR PHARM	ACEUTICALS	INC POLITI	CAL ACT	TON COM	MITTEE	(AMPHAST	AR PAC)
ADDRESS (number and street)	11570 6TH STREI	ET					
Check if different							
than previously reported. (ACC)	RANCHO CUCAN	MONGA			CA _	91730	
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		S	STATE 🛦	ZIP C	ODE 🛦
C C00543835		3. IS THIS REPORT	~	NEW N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(c) 12-Day PRE-Ele Report (d) 30-Day	ection for the: Election on		12C)	Sep	in the	Special (30S)
5. Covering Period 10	16	2014	through	11	24	2014	
I certify that I have examined this Type or Print Name of Treasurer	•	e best of my kno	wieuge and t	Jeliei It IS tru	e, correct and	i complete.	
	Shandell	information may a	[Electronically		ate 12	/ 04 /	2014
Office Office	ous, or incomplete i	miormation may st	ibject tile pers	son signing th	is neport to tr	-	
Use Only						FEC FO	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMPHASTAR PHARMACEUTICALS INC POLITICAL ACTION COMMITTEE (AMPHASTAR PAC)

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1, 2014	Tillo I oriou	49033.00
(b) Cash on Hand at Beginning of Reporting Period	38101.00	
(c) Total Receipts (from Line 19)	1383.00	24461.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	39484.00	73494.00
Total Disbursements (from Line 31)	1500.00	35510.00
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37984.00	37984.00
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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. 06/2004)

Write or Type Committee Name

AMPHASTAR PHARMACEUTICALS INC POLITICAL ACTION COMMITTEE (AMPHASTAR PAC)

Report Covering the Period: From:	16 2014 To	: 11 / 24 / 2014
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	1353.00	21681.00
(i) Itemized (use Schedule A)	1000.00	2 2 2 2
(ii) Unitemized	30.00	2780.00
(iii) TOTAL (add	7, 52,50	
Lines 11(a)(i) and (ii)▶	1383.00	24461.00
(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	1383.00	24461.00
Totals to Line 33, page 5)	1000.00	
Party Committees	0.00	0.00
rany commission		
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(iidiii dailada 110)		0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i dilda (iloili ocheddie 115)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	7	
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	1383.00	24461.00
, , , , , , , , , , , , , , , , , , , ,		
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	1383.00	24461.00

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
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caronian Tour to Buto
	(i) Federal Share	0.00	0.00
		0.00	0.00
	(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures		
	(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 and Other Political Committees	1500.00	35000.00
	Independent Expenditures		
	(use Schedule E)	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	510.00
	(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	510.00
	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) i ederal offare		
	(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
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1500.00	35510.00
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	1500.00	35510.00

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1383.00	24461.00
4. Total Contribution Refunds (from Line 28(d))	0.00	510.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1383.00	23951.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOF	PAGE	6	OF	11				
(che	ck only							
X	11a	11c	12	2				
	13		14		15	16	6	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.

or for commercial purposes, other than using	g the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMPHASTAR PHARMACEUT	ICALS INC POLITICAL ACTION COM	MITTEE (AMPHASTAR PAC)
Full Name (Last, First, Middle Initial) A. Gloria Alvarado Mailing Address 11570 6th Street		Date of Receipt
City	State Zip Code	11 21 2014 Transaction ID : SA11AI.4485
Rancho Cucamonga	CA 91730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$10.00
Amphastar Pharmaceuticals, Inc Receipt For:	Sr. Manager	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) 3. Hoi Chi Cheung	'	Date of Receipt
Mailing Address 11570 6th Street		11 21 2014
City Rancho Cucamonga	State Zip Code CA 91730	Transaction ID : SA11AI.4491
FEC ID number of contributing	0.1.00	Amount of Each Receipt this Period
federal political committee.	[C]	150.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$50.00
Amphastar Pharmaceuticals, Inc	Assistant Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) C. Ellen Feng	'	Date of Receipt
Mailing Address 11570 6th Street		11 21 2014
City Rancho Cucamonga	State Zip Code CA 91730	Transaction ID : SA11AI.4490 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$30.00
Amphastar Pharmaceuticals, Inc	Sr. Director - IT	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	720.00	
SUBTOTAL of Receipts This Page (optional	l) >	270.00
TOTAL This Period (last page this line num	nber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

						PAGE	7	OF	11
	(che	ck only							
	×	11a	11c	12					
		13		14		15	16	;	17

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full) AMPHASTAR PHARMACEUTION	CALS INC POLITICAL ACTION COM	MITTEE (AMPHASTAR PAC)
Full Name (Last, First, Middle Initial) A. Ping He		Date of Receipt
Mailing Address 25 John Road		11 21 Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4494
Canton	MA 02021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$20.00
Armstrong Pharmaceuticals, Inc	Sr. Manager	
Receipt For:		†
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	480.00	
Full Name (Last, First, Middle Initial) Aleksei Koutassevitch		Date of Receipt
Mailing Address 11570 6th Street		11 21 _2014 _
City	State Zip Code	Transaction ID : SA11AI.4489
Rancho Cucamonga	CA 91730	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	75.00
•	Occupation	Bi-weekly payroll deduction - \$25.00
Name of Employer Amphastar Pharmaceuticals, Inc	Occupation	7,137 2222222 4233
Receipt For:	Assistant Manager	-
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
Full Name (Last, First, Middle Initial)		
Jun Li		Date of Receipt
Mailing Address 25 John Road		11 21 2014
Capton	State Zip Code	Transaction ID : SA11AI.4495
Canton	MA 02021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$20.00
Armstrong Pharmaceuticals, Inc	Sr. Supervisor	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	630.00	
SUBTOTAL of Receipts This Page (optional).		195.00
. 5 (1 - 3/	<u>-</u> _	
TOTAL This Period (last page this line numb	er only)	

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

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

_	R LINE		PAGE	8	OF	11	
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	13	14		15	16		17

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) AMPHASTAR PHARMACEUTIC	ALS INC POLITICAL ACTION COM				
Full Name (Last, First, Middle Initial) Lili Li Mailing Address 25 John Road		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
City	State Zip Code	Transaction ID : SA11AI.4493			
Canton	MA 02021	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	30.00			
Name of Employer	Occupation	Bi-weekly payroll deduction - \$10.00			
Armstrong Pharmaceuticals, Inc	Manager				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General Other (specify) ▼	Aggregate real-to-Date V				
Full Name (Last, First, Middle Initial) Ronald Lou		Date of Receipt			
Mailing Address 1886 Santa Anita Avenue		M = M / D = D / Y = Y = Y			
City	State Zip Code	11 21 2014			
South El Monte	CA 91733	Transaction ID : SA11AI.4487			
	51133	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	120.00			
Name of Employer	Occupation	Bi-weekly payroll deduction - \$40.00			
International Medication Sys	Sr. Manager				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00				
Full Name (Last, First, Middle Initial)	ı	Date of Receipt			
Mailing Address 1886 Santa Anita Avenue		11 14 2014			
City	State Zip Code	Transaction ID : SA11AI.4482			
South El Monte	CA 91733	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	174.00 Bi-weekly payroll deduction - \$58.00			
Name of Employer	Name of Employer Occupation				
International Medication Sys	Director, Mfg. Division				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General	riggregate real to bate v				
Other (specify) ▼	1334.00				
SUBTOTAL of Receipts This Page (optional)		324.00			
TOTAL This Period (last page this line numbe	r only)				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

_		NUMBER	PAGE	9	OF	11	
(ch	eck only	one)					
>	11a		11c	12			
	13	14		15	16		17

	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMPHASTAR PHARMACEUTIC	CALS INC POLITICAL ACTION COMI	MITTEE (AMPHASTAR PAC)
Full Name (Last, First, Middle Initial) Levelyn Reyes Mailing Address 11570 6th Street	Date of Receipt	
		11 21 2014
City Rancha Cusamonga	State Zip Code CA 91730	Transaction ID : SA11AI.4488
Rancho Cucamonga	91/30	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	174.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$58.00
Amphastar Pharmaceuticals, Inc	AC Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1392.00	
Full Name (Last, First, Middle Initial) 3. Richard Sleege	1	Date of Receipt
Mailing Address 1886 Santa Anita Avenue		11 14 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.4484
South El Monte	CA 91733	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	Bi-weekly Payroll Deduction - \$20.00
International Medication Sys	Sr. Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	
Full Name (Last, First, Middle Initial) C. Michael Stanley	•	Date of Receipt
Mailing Address 11570 6th Street		11 21 2014
City	State Zip Code	Transaction ID : SA11AI.4486
Rancho Cucamonga	CA 91730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer	Occupation	Bi-weekly payroll deduction - \$40.00
Amphastar Pharmaceuticals, Inc	Sr. Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	960.00	
SUBTOTAL of Receipts This Page (optional)		354.00
TOTAL This Period (last page this line number	r 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 C)F	11		
(check only one)								
X	11a	11b		11c		12		
	13	14		15		16		17

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or for commercial purposes, other than	using the name and address of any political committee t	to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) AMPHASTAR PHARMACE	EUTICALS INC POLITICAL ACTION COM	MITTEE (AMPHASTAR PAC)		
Full Name (Last, First, Middle Initial) Selina Su Mailing Address, 11570 6th Street	Date of Receipt			
Mailing Address 11570 6th Street		11 21 2014		
City Rancho Cucamonga	State Zip Code CA 91730	Transaction ID : SA11AI.4492 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	90.00		
Name of Employer Amphastar Pharmaceuticals, Inc	Occupation Director	Bi-weekly payroll deduction - \$30.00		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	-		
Full Name (Last, First, Middle Initial) 3. Xin Zhou Mailing Address 25 John Road	•	Date of Receipt		
City	State Zip Code	11 14 2014 Transaction ID : SA11AI.4483		
Canton FEC ID number of contributing federal political committee.	MA 02021	Amount of Each Receipt this Period		
Name of Employer International Medication Sys	Occupation Sr. Manager	Bi-weekly payroll deduction - \$40.00		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00			
Full Name (Last, First, Middle Initial)	<u> </u>	Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Name of Employer	Occupation	-		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	-		
SUBTOTAL of Receipts This Page (op	tional)	210.00		
TOTAL This Period (last page this line	number only)	1353.00		

SCHEDULE B (FEC Form 3X)		T FOR 1 1115	NUMBER: PAGE 11 OF 11		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)				
ILIMILED DISDURSENIENIS	for each category of the	21b	22 🔀 23 🗆 24 🗆 25 🖂 26		
	Detailed Summary Page	27	28a 28b 28c 29 30k		
Any information copied from such Reports and Staten	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions		
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
AMPHASTAR PHARMACEUTICALS	INC POLITICAL ACT	ION COMM	(ITTEE (AMPHASTAR PAC)		
/ /	1101 021110/12/101	.011 0011111			
Full Name (Last, First, Middle Initial)					
A. UPTON FOR ALL OF US			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address P.O. BOX 490			10 21 2014		
City	State Zip Code				
ST. JOSEPH	MI 49085		Transaction ID : SB23.4497		
Purpose of Disbursement	49000				
Political Contribution		010	Amount of Each Disbursement this Period		
Candidate Name		Category/			
FREDERICK STEPHEN UPTON		Type	1500.00		
Office Sought:	nent For: 2014				
Senate	Primary				
President	Other (specify) ▼				
State: MI District: 06					
Full Name (Last, First, Middle Initial)					
3.			Date of Disbursement		
			M = M / D = D / Y = Y = Y		
Mailing Address					
Otto	7. 0. 1				
City	State Zip Code				
Purpose of Disbursement	Ι.				
,			Amount of Each Disbursement this Period		
Candidate Name		Category!			
		Category/ Type			
Office Sought: House Disbursen	nent For:	71 -	, , , , , , , , , , , , , , , , , , , ,		
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)					
C.			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address					
City	State 7in Carla				
City	State Zip Code				
Purpose of Disbursement					
•			Amount of Each Disbursement this Period		
Candidate Name		Category/	or East Blood Sollion the Tolloo		
		Type			
Office Sought: House Disbursen	nent For:				
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
		<u> </u>			
SUBTOTAL of Disbursements This Page (optional)			1500.00		
TOTAL This Period (last page this line number only)			1500.00		