PAGE 1 / 18

1

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIWI 3X	For Other Than An Aut	horized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Alliance for Pharmac	cy Compounding PAC ((COMP PAC)	
ADDRESS (number and street) Check if different than previously reported. (ACC)	Suite 401 Alexandria		VA 22314 -
2. FEC IDENTIFICATION	NUMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00424143		S THIS NEW REPORT (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report Quarterly Report January 31 Year-End Report July 31 Mid-Yea Report (Non-eler Year Only) (MY) Termination Rep (TER)	Report Due On: Mar Apr t (Q1) (c) 12-Day PRE-Election Report for the: t (Q3) t (YE) r ction (d) 30-Day POST-Election Report for the:	General (30G)	(Non-Election Year Only)
5. Covering Period	11 01 2021	through 11	30 / 2021
I certify that I have examined Type or Print Name of Treas	Alexander, Pytlarz, , ,	f my knowledge and belief it is t	rue, correct and complete.
Signature of Treasurer	lexander, Pytlarz, , ,	[Electronically Filed]	Date 12 15 2021
NOTE: Submission of false, er	roneous, or incomplete informatio	on may subject the person signing	this Report to the penalties of 52 U.S.C. § 301
Office Use Only			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Alliance for Pharmacy Compounding PAC (COMP PAC) 11 01 2021 11 30 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 23461.44 January 1, 2021 (b) Cash on Hand at 37903.97 Beginning of Reporting Period..... 30154.00 98204.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 121665.44 68057.97 6(a) and 6(c) for Column B)..... 13258.24 66865.71 Total Disbursements (from Line 31)......

Cash on Hand at Close of 8. Reporting Period (subtract Line 7 from Line 6(d)).....

54799.73

54799.73

Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

0.00

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

0.00

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Alliance for Pharmacy Compounding PAC (COMP PAC)

2021 11 30 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 29944.00 96389.00 (i) Itemized (use Schedule A)..... 210.00 1815.00 (ii) Unitemized (iii) TOTAL (add 98204.00 30154.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 98204.00 30154.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 98204.00 30154.00 20. Total Federal Receipts 30154.00 98204.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B			
	Operating Expenditures:	Iotai IIIIs Fellou	Calendar Year-to-Date			
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
	(i) Federal Share	0.00	0.00			
			0.00			
	(ii) Non-Federal Share	0.00	0.00			
	(b) Other Federal Operating	0.00	0.00			
	Expenditures(c) Total Operating Expenditures	0.00	0.00			
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00			
	Transfers to Affiliated/Other Party	7 7 7				
	Committees	0.00	0.00			
	Contributions to Federal Candidates/Committees	7 7 7				
	and Other Political Committees	8000.00	55882.76			
	Independent Expenditures	0.00	0.00			
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00			
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00			
	(400 00104410 1)	4 4	0.00			
	Loan Repayments Made	0.00	0.00			
		4 4				
	Loans Made	0.00	0.00			
	Refunds of Contributions To: (a) Individuals/Persons Other					
	Than Political Committees	0.00	0.00			
	41. B.III. 1. B. 1. G. 111					
	(b) Political Party Committees	0.00	0.00			
	(c) Other Political Committees (such as PACs)	0.00	0.00			
		0.00	0.00			
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00			
	(add 2.1100 20(a), (b), and (0))	0.00	0.00			
	Other Disbursements (Including					
	Non-Federal Donations)	5258.24	10982.95			
	Fordered Flooring April 16 (FO. H. O. O. 0.00404/0	201	4 4			
	Federal Election Activity (52 U.S.C. § 30101(2	(0))				
	(a) Allocated Federal Election Activity (from Schedule H6)					
	(i) Federal Share	0.00	0.00			
	(,	0.00	0.00			
	(ii) "Levin" Share	0.00	0.00			
	(b) Federal Election Activity Paid	4 4	4 4 4			
	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))	13258.24	66865.71			
	Total Federal Disbursements		,			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)					
	from Line 31)	13258.24	00007.74			
		10200.24	66865.71			

DETAILED SUMMARY PAGE

of Disbursements

III. Not Contributional	COLUMNIA	COLUMN D
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)	30154.00	98204.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30154.00	98204.00
66. 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

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

18

6 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Henriksen, Anne, , , Date of Receipt Mailing Address 50 Ridgeview Dr 2021 City Zip Code State Transaction ID: 16337420 WA Pasco 99301-8808 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Malley's Compounding Pharmacy **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Navarra, Joseph, , , Date of Receipt Mailing Address 415 Crossways Park Dr 2021 11 City State Zip Code Transaction ID: 16337421 NY Woodbury 11797-2055 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Town Total Compounding Center Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1100.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Thompson, Tara, , , Date of Receipt Mailing Address 1758 Rosehedge Way NW 30 2021 City Zip Code State Transaction ID: 16337422 GΑ Kennesaw 30152-7756 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Innovation Compounding** Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

18

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pytlarz, Alexander, , , Date of Receipt Mailing Address 330 3rd Street S 1501 2021 City Zip Code State Transaction ID: 16337423 St Petersburg FL 33701-4251 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Infuserve America **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 1550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Miller, David J., , , Date of Receipt Mailing Address 4021 Cascade Road, SE 2021 City State Zip Code Transaction ID: 16337424 **Grand Rapids** MI 49546-2177 Amount of Each Receipt this Period FEC ID number of contributing 105.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Keystone Pharmacy** RPh Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1155.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Jerusik, Jason, , , Date of Receipt Mailing Address 223 Balligomingo Road 30 2021 City State Zip Code Transaction ID: 16337425 PΑ Conshohocken 19428-2605 Amount of Each Receipt this Period FEC ID number of contributing C 230.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pharmacist Advanced Rx Receipt For: Aggregate Year-to-Date ▼ Primary General 2530.00 Other (specify) 385.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b

18 PAGE 8 OF 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kraemer, Cheri, , , Date of Receipt Mailing Address 45458 269th Street 2021 City Zip Code State Transaction ID: 16337426 Parker SD 57053-5244 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pharmacy Specialties & Clinic **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hrncir, Jim, , , Date of Receipt Mailing Address 4835 N. O'Connor Road #130 2021 11 City State Zip Code Transaction ID: 16337427 TX Irving 75062-2741 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Las Colinas Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Garvin, Cheri, , , Date of Receipt Mailing Address 109 Old English Court SW 30 2021 City Zip Code State Transaction ID: 16337428 VALeesburg 20175-2900 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leesburg Pharmacy RPh Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

18

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Isbell, Ginny, , , Date of Receipt Mailing Address 131 Silo Hill Road 2021 City Zip Code State Transaction ID: 16337429 AL Madison 35758-6116 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Madison Drug **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bliss, Marcy, , , Date of Receipt Mailing Address 405 Heron Dr 2021 200 11 City State Zip Code Transaction ID: 16337430 NJ Swedesboro 08085-1749 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wedgewood Pharmacy CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Blaire, Michael, , , Date of Receipt Mailing Address 10921 North 140 Way 30 2021 City State Zip Code Transaction ID: 16337431 ΑZ Scottsdale 85259-4615 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wedgewood Pharmacy RPh Receipt For: Aggregate Year-to-Date ▼ Primary General 2700.00 Other (specify) 350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... ___

FOR LINE NUMBER: PAGE 10 OF 18 Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Miller, David J.,,, Date of Receipt Mailing Address 4021 Cascade Road, SE 11 2021 City Zip Code State Transaction ID: 16337432 MI **Grand Rapids** 49546-2177 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Keystone Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 2155.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Blaire, Michael, , , Date of Receipt Mailing Address 10921 North 140 Way 2021 11 City State Zip Code Transaction ID: 16337433 Scottsdale ΑZ 85259-4615 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wedgewood Pharmacy RPh Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 3700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Pytlarz, Alexander, , , Date of Receipt Mailing Address 330 3rd Street S 30 2021 1501 City State Zip Code Transaction ID: 16337434 FL St Petersburg 33701-4251 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Infuserve America Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 2550.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

18 FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nickell, Robert, , , Date of Receipt Mailing Address 379 Van Ness Ave #1403 2021 City State Zip Code Transaction ID: 16337435 CA Torrance 90501-7211 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Asclemed **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Davis, Tenille, , , Date of Receipt Mailing Address 7331 E Osborne Rd 2021 City State Zip Code Transaction ID: 16337436 Scottsdale ΑZ 85251-6450 Amount of Each Receipt this Period FEC ID number of contributing 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Civic Center Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 709.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Garvin, Cheri, , , Date of Receipt Mailing Address 109 Old English Court SW 30 2021 City Zip Code State Transaction ID: 16337437 VALeesburg 20175-2900 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leesburg Pharmacy RPh Receipt For: Aggregate Year-to-Date ▼ Primary General 2100.00 Other (specify) 2209.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - -

FOR LINE NUMBER: PAGE 12 OF 18 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thompson, Tara, , , Date of Receipt Mailing Address 1758 Rosehedge Way NW 2021 City Zip Code State Transaction ID: 16337438 GA Kennesaw 30152-7756 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Innovation Compounding **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 2900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Yoch, Douglas, , , Date of Receipt Mailing Address 3120 Latrobe Drive, Suite 200 2021 11 City State Zip Code Transaction ID: 16337439 NC Charlotte 28211-2185 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Stanley Apothecary PharmD Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Burch, Jennifer, , , Date of Receipt Mailing Address 5815 Jomali Drive 30 2021 City State Zip Code Transaction ID: 16337440 NC Durham 27705-7815 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Central Compounding Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

18 FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Beckel, Jacob, , , Date of Receipt Mailing Address 16804 Avila Blvd 2021 City Zip Code State Transaction ID: 16337441 FL Tampa 33613-5220 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) 3 Bees Corp **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** McCloskey, Bradley, , , Date of Receipt Mailing Address 899 Chapin Avenue 2021 11 City State Zip Code Transaction ID: 16337442 MI Birmingham 48009-2047 Amount of Each Receipt this Period FEC ID number of contributing 4500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University Compounding Pharmacy PharmD Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Eubanks, Gerald, , , Date of Receipt Mailing Address 1401 S Gaylord St 30 2021 City Zip Code State Transaction ID: 16337622 CO Denver 80210-2340 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Accredidation Partners Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 6500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF 18 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Andersen, Lisa, , , Date of Receipt Mailing Address 12160 S Cherry Lane 2021 City Zip Code State Transaction ID: 16337625 KS Olathe 66061-8790 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) O'Brien Pharmacy Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Roberts, Jerrod, , , Date of Receipt Mailing Address 2636 Sierra Springs Dr 2021 11 City State Zip Code Transaction ID: 16337631 OK Edmond 73012-9072 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Flourish Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Patel, Gopesh, , , Date of Receipt Mailing Address 12 East St 30 2021 City Zip Code State Transaction ID: 16337632 NY New Hyde Park 11040-1323 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VLS Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 7000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: PAGE 15 OF 18 Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Worthing, Nathan, , , Date of Receipt Mailing Address 4373 Donnely Rd 2021 City Zip Code State Transaction ID: 16337633 MI Jackson 49201-8872 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clark Pharmacv **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Milic, Svetislav, , , Date of Receipt Mailing Address 515 Inman Ave 2021 11 City State Zip Code Transaction ID: 16337634 NJ Colonia 07067-1114 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Colonia Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Korbutov, Jack, , , Date of Receipt Mailing Address 5 Lexington Court 30 2021 City State Zip Code Transaction ID: 16337635 PΑ Churchville 18966-5603 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Art of Medicine Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Other (specify)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)

FOR LINE NUMBER:						PAGE	•	16	OF	18	
l	(check only one)										
		X	11a		11b		11c		12		
l			13		14		15		16	;	17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Oberlander, Kevin, , , Date of Receipt Mailing Address 705 E Main St 2021 11 City Zip Code State Transaction ID: 16337637 ND **Bismarck** 58501-4525 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dakota Pharmacv Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Levidow, Lloyd, , , Date of Receipt Mailing Address 18880 N 94th PI 11 10 2021 City State Zip Code Transaction ID: 16337644 Scottsdale ΑZ 85255-5508 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Civic Center Pharmacy Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)		Ī		,			,	3	00.00)	
TOTAL This Period (last page this line number	only)	_	_	7	_	_	<u> </u>	29	944.00)	

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 OI							
TEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only		00					
		Summary Page	21b 28a		23 26 27 30b					
Any information copied from such Reports and Statem	onto mov n	est he cold or use								
or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
$\Big angle$ Alliance for Pharmacy Compoundir	ng PAC (COMP PAC	;)							
Full Name (Last, First, Middle Initial)										
A. Tuberville For Senate, Inc.				Date of Disl	bursement					
		M M / D D / Y Y Y Y								
Mailing Address PO Box 590012				11	01 2021					
,	State	Zip Code		FEC Identifi	cation Number					
Birmingham Burnaga of Diaburgament	AL	35259		1.1						
Purpose of Disbursement			011	C C00	701672					
Candidate Name					ction ID: 16163143 Each Disbursement this Period					
Tuberville, Thomas, , Sen.,			Category/ Type	Amount of L	Lacii Disbuisement tilis Fellou					
	nent For: 2	026		L	5000.00					
	Primary	General			,					
State: AL District:	Other (spec	ify) 🔻		Memo I	tem					
Full Name (Last, First, Middle Initial)										
3. DIANA FOR CONGRESS				Date of Disl	bursement					
				M = M /	D D / Y Y Y Y					
Mailing Address PO Box 7208	Vailing Address PO Box 7208									
,	State	Zip Code		FEC Identifi	cation Number					
Kingsport Purpose of Disbursement	TN	37664		0 000						
r dipose of Biobarcement			011		741090					
Candidate Name			Category/		ction ID: 16163158 Each Disbursement this Period					
Harshbarger, Diana, , ,			Type							
	nent For: 2				2500.00					
	Primary Other (spec	General		_						
State: TN District: 01	Other (spec	пу)		Memo I	tem					
Full Name (Last, First, Middle Initial)										
C. HANCE SCARBOROUGH LLP				Date of Disl	bursement					
Mailing Address 412 First Street, SE				M M /	09 2021					
Suite One					2021					
City	State	Zip Code		FEC Identifi	cation Number					
Washington Purpose of Disbursement	DC	20003		0 000						
In-Kind for Event Facility			011		741090					
Candidate Name			Category/		ction ID: 16206507 Each Disbursement this Period					
Harshbarger, Diana, , ,			Type							
	nent For: 2				500.00					
	Primary Other (spec	General			In-Kind for Event Facility					
State: TN District: 01	Cirier (spec	''y) ▼		Memo I	tem					
3.										
$\textbf{SUBTOTAL} \ \ \text{of Disbursements This Page (optional)}$					8000.00					
TOTAL This Poyled (lest were this line assets as and A					8000.00					
TOTAL This Period (last page this line number only).				The second second						

S 17

Use separate schedule(s) for each category of the Detailed Summary Page	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 18 OF 18							
Detailed Surmary Page	ITEMIZED DISBURSEMENTS		Use separate schedule(s) (check			neck only one)					
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and audress of any political committee to solicit contributions from such committee. MAII of Commercial purposes, other than using the name and audress of any political committee to solicit contributions from such committee. MAII Name (Last, First, Middle Initial) A Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City Washington Prices of Disbursement Legal Fees Condidate Name City Washington Process of Disbursement For: Full Name (Last, First, Middle Initial) B Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City Washington City Washington Prices of Disbursement Legal Fees Cariodidate Name City State: Disbursement For: State: Disbursement For: State: Disbursement For: City State: Senate Primary General Disbursement 11 1 7 2021 FEC Identification Number Crandidate Name Category/ Type FEC Identification Number Crandidate Name First, Middle Initial) Date of Disbursement this Period First State: Disbursement Disbursement First Middle Initial) Category/ Type FEC Identification Number Crandidate Name FEC Identific											
NAME OF COMMITTEE (in Pital) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name (Last, First, Middle Initial) A Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor Office Sought: House President Disbursement For: State: Disbursement Disbursement For: State: Disbursement For: State: Disbursement Disbursem	Any information copied from such Reports and State	ments may	not be sold or use								
Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name (Last, First, Middle Initial) A. Ballard Spahr LLP Mailing Address 1908 K Street, NW 12th Floor City Washington											
A. Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought: House Disbursement Disbursemen											
A Ballard Spahr LLP Mailing Address 1909 K Street, NW 12h Floor City Washington Prupose of Disbursement Legal Fees Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State: Disbursement D	<u> </u>	ing PAC	(COMP PAC	C)							
Mailing Address 1909 K Street, NW 12th Floor City Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought: House Senate President State: Disbursement Legal Fees Full Name (Last, First, Middle Initial) Ballard Spahr LLP Mailing Address 1998 K Street, NW 12th Floor City Washington Office Sought: House Disbursement For: Senate Primary General Correct General Category/ Washington District: First, Middle Initial) Full Name (Last, First, Middle Initial) Ballard Spahr LLP Mailing Address 1998 K Street, NW 12th Floor City Washington District: Gardidate Name City Washington Office Sought: House Disbursement For: Senate Primary General City City State Zip Code Disbursement District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Category/ Category/ City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Category/ City State Zip Code Disbursement For: Senate Primary General Disbursement Tor: Senate Primary General Disbursement For:	•				Data of Di	churcomont					
Mailing Address 1908 K Street, NW Usabrigton Purpose of Disbursement Legal Fees Candidate Name City Washington Date of Disbursement Legal Fees Candidate Name City Washington Disbursement For: State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Category/ Category/ Category/ Category/ Category/ Category/ Type Date of Disbursement his Period Transaction ID: 16337642 Amount of Each Disbursement Legal Fees Memo Item FEC Identification Number Category/ Transaction ID: 16337642 Amount of Each Disbursement Legal Fees Memo Item FEC Identification Number Category/ Transaction ID: 16337642 Amount of Each Disbursement FEC Identification Number Category/ Transaction ID: 16337642 Amount of Each Disbursement Legal Fees Memo Item FEC Identification Number Category/ Transaction ID: 16337642 Transaction ID: 16337642 Amount of Each Disbursement Category/ Transaction ID: 16337642 Amount of Each Disbursement Category/ Transaction ID: 16337642 Amount of Each Disbursement Category/ Memo Item Subtotal Number Category/ Category/ Category/ Category/ Amount of Each Disbursement this Period Transaction ID: 16337642 Amount of Each Disbursement Fector Category/ Category/ Category/ Category/ Amount of Each Disbursement Transaction ID: 16337642 Amount of Each Disbursement Transact	A. Ballard Spanr LLP										
Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought:	9										
Purpose of Disbursement Legal Fees Candidate Name Office Sought:	·		·		FEC Identi	fication Number					
Legal Fees Candidate Name Office Sought: House President Senate President Other (specify) ▼ State President Pr	<u> </u>	DC	20006								
Cardidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City Washington DC 20006 Purpose of Disbursement Legal Fees Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) C. Category/ Type Office Sought: House Disbursement For: Senate President State: District: Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate President State: District: Primary General Category/ Type Office Sought: House Disbursement For: Mailing Address City State: District: Primary General Category/ Type Office Sought: House Disbursement For: Mailing Address City State: District: Primary General Category/ Type Office Sought: House Disbursement For: Senate President Senate President General Category/ Type Office Sought: House Disbursement For: Senate President Senate President Senate President Disbursement For: Senate President Senate President Disbursement For: Senate President Senate President Disbursement For: Senate President Disbursement Memoritem Memoritem Memoritem State: District: Memoritem Memoritem Memoritem Senate President District: Senate President Disbursement For: Senate President District: Memoritem Memoritem Memoritem Senate President District: Senate President District: Memoritem Memoritem Memoritem Senate President District: Senate President District: Memoritem Memoritem Memoritem Senate President District: Memoritem Memoritem Senate President District: Memoritem Memoritem Senate President District: Memoritem Memoritem Senate President District Distri				001		11 ID 10007010					
Office Sought: House Senate President Primary General President State: District: Full Name (Last, First, Middle Initial) B. Ballard Spahr LLP Mailing Address 1000 K Street, NW 12th Floor City Washington DC 20006 Purpose of Disbursement Legal Fees Candidate Name District: Senate Primary General Primary General President Other (specify) State: District: State Zip Code Type State President Other (specify) Mailing Address Cardidate Name Disbursement For: Senate Primary General Disbursement This Period Transaction ID: 16337643 Amount of Each Disbursement his Period Transaction ID: 16337643 Amount of Each Disbursement his Period Transaction ID: 16337643 Amount of Each Disbursement his Period Transaction ID: 16337643 Amount of Each Disbursement his Period Transaction ID: 16337643 Amount of Each Disbursement his Period Transaction ID: 16337643 Amount of Each Disbursement his Period Transaction ID: 16337643 Amount of Each Disbursement Category' Type Office Sought: House Disbursement For: Senate Primary General Disbursement This Page (optional)	Candidate Name			Category/							
Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City Washington DC 20006 Purpose of Disbursement Legal Fees Candidate Name											
State: District: Other (specify) ▼ President District: District: Other (specify) ▼ President District: Distric		7				4373.57					
State: District: Full Name (Last, First, Middle Initial) B. Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Ct. Mailing Address City State Zip Code DC 20006 FEC Identification Number Firmary General Other (specify) Date of Disbursement this Period FEC Identification Number Category/ Type Memo Item Date of Disbursement Full Name (Last, First, Middle Initial) Ct. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate President State: District: State: Disbursement Category/ Type Memo Item FEC Identification Number Category/ Type Memo Item State: Disbursement For: Senate President Other (specify) Memo Item State: District: Substrotal of Disbursement This Page (optional)					Legal Fees						
B. Ballard Spahr LLP Mailing Address 1909 K Street, NW 12th Floor City		Julion (Spe	Jony) ▼		Memo	Item					
Mailing Address 1909 K Street, NW 12th Floor City Washington Purpose of Disbursement Legal Fees Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Category/ Purpose of Disbursement City Mailing Address City State District: Full Name (Last, First, Middle Initial) City State City Mailing Address City Mailing Address City Mailing Address State St	Full Name (Last, First, Middle Initial)										
12th Floor City State Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Category/ City State Zip Code Purpose of Disbursement Candidate Name Category/ City State Zip Code FEC Identification Number Category/ Type FEC Identification Number Category/ Amount of Each Disbursement Category/ Type Memo Item State: District: Senate Primary General Other (specify) ▼ Substate: District: Substate: District: Memo Item Substate: Disbursement For: Senate Primary General Other (specify) ▼ Substate: District: Memo Item Substate: District: Memo Item Substate: District: Memo Item	B. Ballard Spahr LLP				Date of Di						
Washington Purpose of Disbursement Legal Fees Candidate Name Category/ Type Office Sought: House Primary General State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Memo Item FEC Identification Number Category/ Type 884.67 Legal Fees Memo Item FEC Identification Number Category/ Type Total Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ✓ Memo Item Substitute Substi	12th Floor				11 17 2021						
Purpose of Disbursement Legal Fees Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Category/ Type Other (specify) Date of Disbursement Category/ Type Other (specify) Date of Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Office Sought: House Senate Primary General Other (specify) Category/ Type Date of Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substock Amount of Each Disbursement this Period Memol tem Substock Amount of Each Disbursement this Period Memol tem Substock Amount of Each Disbursement this Period Memol tem	-				FEC Identi	fication Number					
Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Memo Item Memo Item State: District: Substock Amount of Each Disbursement this Period Memo Item Substock Amount of Each Disbursement this Period FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substock Amount of Each Disbursement this Period Memo Item	Purpose of Disbursement		20000								
Candidate Name Category/ Type				001		action ID : 16337643					
Office Sought:	Candidate Name										
Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) Memo Item State: District: State Zip Code FEC Identification Number Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Subtotal Address Subtotal Address State Size Senate Primary General Other (specify) Memo Item	Office Sought: House Disburse	ment For:		Туре		884 67					
State: District: Other (specify) Memo Item Date of Disbursement Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Memo Item State: Disbursement For: Senate Primary General Other (specify) State: District: Memo Item Substitute: State St		1	General								
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substrict: M.M.M. / D.D. / Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.	President				Momo	-					
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: M M M / D D / YYYYY FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item Subtroctal of Disbursements This Page (optional)	State: District:	1			Memo	item					
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Substortal of Disbursements This Page (optional)	,				D . (D)						
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substitute Disbursement This Page (optional)	С.										
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substitute of Disbursement For: Senate Primary General Other (specify) ▼ Substitute of Disbursements This Page (optional)	Mailing Address				M = M /	D D / Y Y Y Y Y					
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substruct: Memo Item Substruct: Substruct: Senate Primary General Other (specify) State: Disbursements This Page (optional)	City	State	Zip Code		FEC Identi	ification Number					
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement				C						
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	Candidata Nama										
Senate Primary General Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)					Amount of	Each Disbursement this Period					
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)		1	0			4 4					
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)											
SUBTOTAL of Disbursements This Page (optional)		Culei (spe	Jony) ▼		Memo	Item					
SOBTOTAL OF DISDUISEMENTS THIS Tage (Optional)											
5759 74	SUBTOTAL of Disbursements This Page (optional).					5258.24					
				·		5259.24					