

**FEC
FORM 3X**

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

RECEIVED

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12 FEB 4 15 PM 11:11 AM
FEDERAL MAIL CENTER

AMERICAN SOCIETY OF CONSULTANT PHARMACISTS
POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 11321 DUKE ST

Check if different than previously reported. (ACC)

ALEXANDRIA VA 22314

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

C00199547

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
X October 15 Quarterly Report (Q3)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
January 31 Year-End Report (YE)	(c) 12-Day			
July 31 Mid-Year Report (Non-election Year Only) (MY)	Primary (12P)	General (12G)	Runoff (12R)	
Termination Report (TER)	PRE-Election Report for the:	Convention (12C)	Special (12S)	
	Election on M M / D D / Y Y Y Y			in the State of
	(d) 30-Day			
	POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
	Election on M M / D D / Y Y Y Y			in the State of

5. Covering Period 07 01 2014 through 09 30 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 JOSEPH P. STANAL

Signature of Treasurer *Joseph P. Stanal* Date 10 14 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

American Society of Consultant Pharmacists Political Action Committee

Report Covering the Period: From: ^M0^M7' ^D0^D1' ^Y2^Y0^Y1^Y4 To: ^M0^M9' ^D3^D0' ^Y2^Y0^Y1^Y4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^Y 2 ^Y 0 ^Y 1 ^Y 4		22 , 72,944.02
(b) Cash on Hand at Beginning of Reporting Period.....	, 74,231.35	
(c) Total Receipts (from Line 19).....	, 3,833.85	, 6,121.18
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 78,065.20	, 79,065.20
7. Total Disbursements (from Line 31).....	, 4,500.00	, 5,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 73,565.20	, 73,565.20
9. 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. 06/2004)

Page 3

Write or Type Committee Name

American Society of Consultant Pharmacists Political Action Committee

Report Covering the Period: From: ^M07 ^M' ^D01 ^D' ^Y2014 To: ^M09 ^M' ^D30 ^D' ^Y2014

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).....	, 200.00	, 700.00
(ii) Unitemized	, 3,630.00	, 5,410.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	, 3,830.00	, 6,110.00
(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)	, 3,830.00	, 6,110.00
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.).....	, 3.85	, 11.18
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)).....▶	, 3,833.85	, 6,121.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	, .	, .

FORM 3X-N1-10000

DETAILED SUMMARY PAGE

of Disbursements

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,500.00	5,500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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)) ..	4,500.00	5,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	4,500.00	5,500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE OF	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	<input type="checkbox"/> 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)
American Society of Consultant Pharmacists Political Action Committee

A. Full Name (Last, First, Middle Initial) Brickley, Ross, W.			Date of Receipt M M / D D / Y Y Y Y 08 21 / 20 14		
Mailing Address 5408 Quetzel Ct			Amount of Each Receipt this Period , 200.00		
City Garner	State NC	Zip Code 27529			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , 200.00		
Name of Employer CCRx		Occupation Pharmacist			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ , 200.00			

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period , , .		
City	State	Zip Code			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , .		
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period , , .		
City	State	Zip Code			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period , , .		
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			

SUBTOTAL of Receipts This Page (optional).....▶	, , .
TOTAL This Period (last page this line number only).....▶	, , .

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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)	, 3,830.00	, 6,110.00
34. Total Contribution Refunds (from Line 28(d))	, 0.00	, 0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 3,830.00	, 6,110.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, 0.00	, 0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	, 0.00	, 0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, 0.00	, 0.00

NON-FEDERAL

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

American Society of Consultant Pharmacists Political Action Committee

Full Name (Last, First, Middle Initial)

A. Butterfield for Congress		Date of Disbursement
Mailing Address 216 NE Nash St, Suite A		M M / D D / Y Y Y Y 07 29 2014
City Wilson	State NC	Amount of Each Disbursement this Period 2,500.00
Zip Code 27893		
Purpose of Disbursement Campaign Contribution		Category/ Type
Candidate Name G.K. Butterfield		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 1st	

B. Guthrie for Congress		Date of Disbursement
Mailing Address P.O. Box 9639		M M / D D / Y Y Y Y 08 21 2014
City Bowling Green	State KY	Amount of Each Disbursement this Period 2,000.00
Zip Code 42102		
Purpose of Disbursement Campaign Contribution		Category/ Type
Candidate Name Brett Guthrie		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY	District: 2nd	

C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State	Amount of Each Disbursement this Period
Zip Code		
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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

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

FEC Form 3X
7/01/2014-9/30/2014

COLUMN A
This Period

COLUMN B
Year-to-Date

		COLUMN A This Period	COLUMN B Year-to-Date
6	a Cash on Hand January 1, 2014		72,944.02
	b Cash on Hand at Beginning of Reporting Period	74,231.35	
	c Total Receipts	3,833.85	6,121.18
	d Subtotal	78,065.20	79,065.20
7	Total Disbursements	4,500.00	5,500.00
8	Cash on Hand at Close of Reporting Period	73,565.20	73,565.20
11	a i Itemized	200.00	700.00
	ii Unitemized	3,630.00	5,410.00
	iii TOTAL	3,830.00	6,110.00
	b Political Party Committees		0.00
	c Other Political Committees		0.00
	d Total Contributions	3,830.00	6,110.00
17	Other Federal Receipts	3.85	11.18
19	Total Receipts	3,833.85	6,121.18
21	Operating Expenditures	0.00	0.00
23	Contributions to Federal Candidates/Committees	4,500.00	5,500.00
29	Other Disbursements	0.00	0.00
31	Total Disbursements	4,500.00	5,500.00
32	Total Federal Disbursements	4,500.00	5,500.00
33	Total Contributions (other than loans)	3,830.00	6,110.00
35	Net Contributions (other than loans)	3,830.00	6,110.00

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