PAGE 1 / 10

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TORWI 3X	For Other Tha	an An Authorize	d Committee	Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typing, type er the lines.	12FE4M5	
Alliance for Pharma	cy Compound	ing PAC (COM	PPAC)		
ADDRESS (number and street Check if different than previously reported. (ACC)	Suite 100 Alexandria	eld Road		VA	2314
2. FEC IDENTIFICATION	I NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00424143		3. IS THIS REPORT	× NEW (N)	OR AMEND (A)	ED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Repo	(b) Monthly Report Due On:	Feb 20 (M2 X Mar 20 (M3 Apr 20 (M4)) Jun 20 (M6) Sep 20 (M	(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
July 15 Quarterly Repo October 15 Quarterly Repo	rt (Q2)	E-Election port for the:	Convention (12C)	Special (12S)	in the
January 31 Year-End Repo July 31 Mid-Yea Report (Non-ela Year Only) (MY Termination Re	ar (d) 30-I POS	Day ST-Election on ort for the:	General (30G)	Runoff (30R)	State of Special (30S)
(TER)		Election on	M = M / D = D	/ Y Y Y Y Y	in the State of
5. Covering Period	M = M / D = D / 02 01	2024	through 0.	2 29 Y	2024
I certify that I have examine Type or Print Name of Treas	Brunner Scot		owledge and belief it	is true, correct and com	nplete.
Signature of Treasurer	Brunner, Scott, , ,			Date 03	20 / 2024
NOTE: Submission of false, e	rroneous, or incomple	ete information may s	ubject the person sign	ng this Report to the per	nalties of 52 U.S.C. § 30109
Office Use				F	EC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Alliance for Pharmacy Compounding PAC (COMP PAC) 2024 02 29 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 49375.72 January 1. 2024 (b) Cash on Hand at 48814.72 Beginning of Reporting Period..... 2339.00 5028.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 54403.72 51153.72 6(a) and 6(c) for Column B)..... 17500.00 14250.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 36903.72 36903.72 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Alliance for Pharmacy Compounding PAC (COMP PAC)

01 02 2024 02 29 2024 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 1249.00 2188.00 (i) Itemized (use Schedule A)..... 2840.00 1090.00 (ii) Unitemized (iii) TOTAL (add 5028.00 2339.00 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 5028.00 2339.00 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), 5028.00 12, 13, 14, 15, 16, 17, and 18(c))....... 2339.00 20. Total Federal Receipts 2339.00 5028.00 (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 Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		100.10 200
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	75000	45000
Expenditures(c) Total Operating Expenditures	750.00	1500.00
(add 21(a)(i), (a)(ii), and (b))▶	750.00	1500.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	13500.00	16000.00
and Other Political Committees Independent Expenditures	13300.00	10000.00
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	4 4
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
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))	14250.00	17500.00
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	14250.00	17500.00

DETAILED SUMMARY PAGE

of Disbursements

,				
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)	2339.00	5028.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2339.00	5028.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	750.00	1500.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	750.00	1500.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

10 FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 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 Bliss, Marcy, , , Date of Receipt Mailing Address 405 Heron Dr 2024 City Zip Code State Transaction ID: A-16487 NJ 08085-1749 Swedesboro Amount of Each Receipt this Period FEC ID number of contributing C 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 400.00 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 02 2024 Zip Code City State Transaction ID: A-16490 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 418.00 Other (specify) 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 2024 City Zip Code State Transaction ID: A-16493 VA Leesburg 20175-2900 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Leesburg Pharmacy RPh Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 609.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

10 FOR LINE NUMBER: **PAGE** 7 OF 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 Jerusik, Jason, , , Date of Receipt Mailing Address 223 Balligomingo Road 2024 City Zip Code State Transaction ID: A-16497 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 460.00 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 02 2024 Zip Code City State Transaction ID: A-16502 Woodbury NY 11797-2055 Amount of Each Receipt this Period FEC ID number of contributing 160.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Pharmacist Town Total Compounding Center Receipt For: Aggregate Year-to-Date ▼ Primary General 320,00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Patel, Gopesh, , , Date of Receipt Mailing Address 12 East St 2024 02 City Zip Code State Transaction ID: A-16503 NY New Hyde Park 11040-1323 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VLS Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 640.00 SUBTOTAL of Receipts This Page (optional)..... 1249.00 TOTAL This Period (last page this line number only).....

17

SCHEDULE B (FEC Form 3X)	Haa	water allowed to ()	TOTT EINE NOMBETT.				8 OF	10		
ITEMIZED DISBURSEMENTS					22 🗀	26 —	27			
	Detailed Summary Page		X 21b 28a	22 23 28c 28c		26 29	27 30b			
Any information copied from such Reports and Staten	ı nents mav r	not be sold or use	ed by any person	on for the purp	ose of sol	icitina cor	ntribution	ns		
or for commercial purposes, other than using the nam	ne and addr	ess of any politic	al committee to	solicit contribu	utions from	such co	mmittee	4.		
NAME OF COMMITTEE (In Full)										
Alliance for Pharmacy Compoundir	ng PAC	(COMP PAC	C)							
A. Hanco Scarborough LLP				Data of Dis	hurcomont					
Hance Scarborough LLP				Date of Disbursement				1		
Mailing Address 412 First Street Southeast Suite One				02 13 2024						
City S Washington	State Zip Code DC 20003			FEC Identification Number						
Purpose of Disbursement		20000		С						
PAC Management			001	Transaction ID : B-16457						
Candidate Name			Category/	Amount of I			this Per	riod		
Office Coughts House			Type				750.00			
Office Sought: House Disbursen Senate	nent For: Primary	General		Memo Item			ш			
	Other (spec									
State: District:										
Full Name (Last, First, Middle Initial)										
В.				Date of Disbursement						
Mailing Address				M M / D D / Y Y Y Y						
Mailing Address	Mailing Address						-	-		
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						7	-46-	ш.		
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Full Name (Last, First, Middle Initial)				D . (D:						
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Purpose of Disbursement	C									
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Office Sought: House Disbursen										
	Primary	General				7				
	Other (spec	cify) 🔻		Memo I	Item					
State: District:										
SUBTOTAL of Disbursements This Page (optional)							750.00			
2223712 of State Committee This Lago (optional)						7		#		
TOTAL This Period (last page this line number only)							750.00	. 1		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or commercial purposes. NAME OF COMMITTEE (In Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name (Last, First, Middle Initial) Suzzzi for Congress Mailing Address PO Box 669 City State Zip Code NY 11542 Purpose of Disbursement Contribution Candidate Name Senate President State: NY District: 03 Senate Primary General Pr		CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		rate schedule(s)	FOR LINE I	VOIVIDEI I.)F 10		
ANAME OF COMMITTEE (in Full) Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name (Last, First, Middle Initial) A. Suozzi for Congress Mailing Address PO Box 669 City Glen Cove NY 11542 Purpose of Disbursement Contribution Candidate Name Senate President State: RL Special-2024 Full Name (Last, First, Middle Initial) B. Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa FL 3866 City State NY District: 03 State Primary General Primary Address 301 W Platt Street, #385 City Tampa FL 3866 City State: Primary General Contribution Contribution Candidate Name Castor, Kathy Office Sought: House Disbursement For: 2024 Condidate Name Castor, Kathy City Tampa FL 3866 City Glen Cove NY 11542 City Tampa FL 3866 City Gleneral Primary General Contribution Contrib			Detailed S	Summary Page					
Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name (Last, First, Middle Initial) A. Suozzi for Congress Mailing Address PO Box 669 City State Ny District: 03 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address PO Box 11542 President State: Ny District: 03 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa Purpose of Disbursement Contribution Candidate Name Castor, Kalty Office Sought: Senate President State: Primary General Primary Caster, Kalty Office Sought: Senate Primary General Pr									
Alliance for Pharmacy Compounding PAC (COMP PAC) Full Name (Last, First, Middle Initial) A. Suozzi for Congress Mailing Address PO Box 669 City Glen Cove Purpose of Disbursement Contribution Candidate Name Suozzi, Thomas, Office Sought: State Primary General President State: NY District: 03 Full Name (Last, First, Middle Initial) B. Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa Furpose of Disbursement Contribution Contribution Confidate Name Castor, Kalty, Office Sought: Very District: 14 Full Name (Last, First, Middle Initial) B. Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa Furpose of Disbursement Contribution Confidate Name Castor, Kalty, Office Sought: Very District: 14 Full Name (Last, First, Middle Initial) Candidate Name Castor, Kalty, Office Sought: Very District: 14 Full Name (Last, First, Middle Initial) Contribution C		1 1 7	ne and addre	ess of any politica	ar committee to	Solicit Contributions from Such Committee			
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Mailing Address PO Box 669 City Glen Cove NY 11542 Purpose of Disbursement Contribution Candidate Name Suozzi, Thomas, , Office Sought: Senate Primary General President State: NY District: 03 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa FL 33606 Purpose of Disbursement Contribution Candidate Name Castor, Karly , Office Sought: House Senate Primary General President State: FL District: 14 Full Name (Last, First, Middle Initial) State: FL District: 14 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa FL 33606 FEC Identification Number Category/ Type Transaction ID : B-16452 Amount of Each Disbursement C C C00410761 Transaction ID : B-16452 Amount of Each Disbursement this Per 2500.00 Memo Item Date of Disbursement C C C00410761 Transaction ID : B-16452 Amount of Each Disbursement Transaction ID : B-16452 Amount of Each Disbursement C C C00440761 Transaction ID : B-16452 Amount of Each Disbursement Transaction ID : B-16454 Transaction ID : B-164	_	Full Name (Last, First, Middle Initial)				D (D)			
City Glen Cove NY 11542 Purpose of Disbursement Contribution Candidate Name Sunzat, Thomas, Office Sought: House Senate Primary General President State: FL Disbursement For: 2024 City Tampa State Zip Code Type Castor, Karthy, Office Sought: Senate President Senate Primary General President Sanate President Senate Purpose of Disbursement For: 2024 FEUI Name (Last, First, Middle Initial) State: FL District: 14 Castor, Karthy, Office Sought: Senate Primary General Primary General Primary General President Senate Primary General Prim	Α.	Suozzi for Congress							
Glen Cove Purpose of Disbursement Contribution Candidate Name Suozzi, Thomas Office Sought: NY		Mailing Address PO Box 669				02 01 2024			
Glen Cove Purpose of Disbursement Contribution Candidate Name Suczat, Thomas, . Office Sought: Senate President Senate Primary General President State: NY District: 03 Full Name (Last, First, Middle Initial) B. Castor for Congress Mailling Address 301 W Platt Street, #385 City Tampa Purpose of Disbursement Contribution Candidate Name Castor, Kathy, ., Office Sought: Very State Primary Senate Primary General Very Second Very Second Very Second Very Second Very Second Very Second Very Senate President State: FL District: 14 Full Name (Last, First, Middle Initial) B. Castor for Congress Mailling Address 301 W Platt Street, #385 City State Zip Code FL 33606 Purpose of Disbursement Contribution Candidate Name Castor, Kathy, ., Office Sought: Very State President Other (specify) Memo Item FEC Identification Number C C00410761 Transaction ID: B-16452 Amount of Each Disbursement his Per 2500.00 Memo Item FEC Identification Number C C00410761 Transaction ID: B-16454 Transa		-							
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Candidate Name Suczi, Thomas, Office Sought:		•			011	C C00607200			
Suczzi, Thomas, Office Sought:									
Office Sought:						Amount of Each Disbursement this Period			
State: NY District: 03 Special-2024 Full Name (Last, First, Middle Initial) Castor for Congress Mailing Address 301 W Platt Street, #385 City Tampa FL 33606 Purpose of Disbursement Contribution Candidate Name Castor, Kathy, Office Sought: House Disbursement For: 2024 Senate Primary General City State I Zip Code FL 33606 FEC Identification Number Category/ Type Transaction ID : B-16452 Amount of Each Disbursement this Per 2500.00 Memo Item Date of Disbursement Code Transaction ID : B-16454 Category/ Type City Santa Fe Purpose of Disbursement Contribution Candidate Name Contribution Candidate Name Lujan, Ben, R., Office Sought: House Disbursement For: 2024 Santa Primary General Category/ Type Category/ Type Date of Disbursement Category/ Type Cat			ment For: 2	024	Турс				
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Tampa Purpose of Disbursement Contribution Candidate Name Castor, Kathy, , , Office Sought: State: FL District: 14 Category/ Type Disbursement For: 2024 Primary General Other (specify) Category/ Type Disbursement For: 2024 Primary General Other (specify) Date of Disbursement Contribution Candidate Name Lujan, Ben, R, , Office Sought: House Disbursement For: 2024 Primary General Date of Disbursement Category/ Type Date of Disbursement Category/ Type Transaction ID: B-16454 Amount of Each Disbursement this Per Category/ Type Category/ Type Transaction ID: B-16454 Amount of Each Disbursement this Per Category/ Type Category/ Type Category/ Type General Date of Disbursement Category/ Type		Mailing Address 301 W Platt Street, #385		1					
Purpose of Disbursement Contribution Candidate Name Castor, Kathy, Office Sought:		-		1 .		FEC Identification Number			
Contribution Candidate Name Castor, Kathy, , , Office Sought: House Senate Primary Other (specify) Category/ Type President State: FL District: 14 Full Name (Last, First, Middle Initial) Category/ Type Disbursement For: 2024 Primary General Other (specify) Date of Disbursement Code NM 87594 FEC Identification Number Category/ Type Category/ Type Category/ Type Category/ Type Disbursement For: 2024 FEC Identification Number Category/ Type Category/ Type Category/ Type Disbursement For: 2024 Amount of Each Disbursement this Permanal Primary General		·	FL	33606					
Candidate Name Castor, Kathy, , , Office Sought:		•			011	C C00410761			
Castor, Kathy, . , Office Sought: House Senate President Other (specify) State: FL District: 14 Full Name (Last, First, Middle Initial) C. People for Ben Mailing Address PO Box 31129 City Santa Fe Purpose of Disbursement Contribution Candidate Name Lujan, Ben, R, , Office Sought: House Senate Primary General Disbursement For: 2024 Type 2500.00 Memo Item Date of Disbursement Date of Disbursement Code NM 87594 FEC Identification Number Category/ Type Transaction ID : B-16454 Amount of Each Disbursement this Permany General Category/ Type Disbursement For: 2024 Senate Primary General									
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