24038284722

RECEIVED
FEC MAIL
OPERATIONS CENTER
2004 JAN 30 P 1:23

Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example:If typing, type over the lines. 12FE4M5

AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE

ADDRESS (number and street) ▼ 6701 DEMOCRACY BLVD

☐ Check if different than previously reported. (ACC)

SUITE 300

BETHESDA MD 20817-

CITY ▲ STATE ▲ ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C00034695

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)	☐ May 20 (M5)	☐ Aug 20 (M8)	☐ Nov 20 (M11) Pre-Election Year Only
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) Pre-Election Year Only
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on ☐ ☐ ☐ In the State of ☐

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

Election on ☐ ☐ ☐ In the State of ☐

5. Covering Period 01 01 2003 through 12 31 2003

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 SUSAN J MILLER

Signature of Treasurer Susan J Miller Date 01 28 2004

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

Office Use Only

FEC FORM 3X (Revised 1/01)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE

Report Covering the Period: From: 07 01 2003 To: 12 31 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2003		7335595
(b) Cash on Hand at Beginning of Reporting Period	6576310	
(c) Total Receipts (from Line 19)	1959464	2501879
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8535774	9835774
7. Total Disbursements (from Line 30)	1267216	2567216
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7268558	7268558
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

☐ 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

24038284724

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

AMERICANS FOR CLINICAL LABORATORY SCIENCE

Report Covering the Period: From: 07/01/2003 To: 12/31/2003

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)	19,346.00	
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	19,346.00	24,617.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	19,346.00	24,617.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	248.64	401.79
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	19,594.64	25,018.79
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	19,594.64	25,018.79

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	79,22-16	1792216
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	79,22-16	1792216
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	4,750,00	775000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶		
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	12,672,16	2567216
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	12,672,16	2567216

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶		

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)

☑ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 1 OF 3

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 FOR CLINICAL LABORATORY SCIENCE

A.

Full Name (Last, First, Middle Initial)
MCGLADREY & PULLEN

Mailing Address
750 N FAIRFAX ST SUITE 400

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement
AUDIT

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Date of Disbursement: 07 / 24 / 2003

Amount of Each Disbursement this Period: 100000

B.

Full Name (Last, First, Middle Initial)
AUTUMN LEAVES

Mailing Address
356 NW AUTUMN PLACE

City: CORVALLIS State: OR Zip Code: 97330

Purpose of Disbursement
MISC. MERCHANDISE

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Date of Disbursement: 08 / 01 / 2003

Amount of Each Disbursement this Period: 247103

C.

Full Name (Last, First, Middle Initial)
ACLA

Mailing Address
1250 H ST, NW SUITE 880

City: WASHINGTON State: DC Zip Code: 20005

Purpose of Disbursement
ADVERTISEMENT IN MEDICARE LAB CLIPS

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Date of Disbursement: 08 / 01 / 2003

Amount of Each Disbursement this Period: 250000

SUBTOTAL of Disbursements This Page (optional) ▶ 597103

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

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) ☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 2 OF 13

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 FOR CLINICAL LABORATORY SCIENCE

A.

Full Name (Last, First, Middle Initial): MCLAUGHLIN, M. PULLEN

Date of Disbursement: 09 / 24 / 2003

Mailing Address: 700 N. FAIRFAX ST, SUITE 400

City: ALEXANDRIA State: VA Zip Code: 22314

Amount of Each Disbursement this Period: 500.00

Purpose of Disbursement: AUDIT

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial): ASCLS

Date of Disbursement: 10 / 17 / 2003

Mailing Address: 6701 DEMOCRACY BLVD SUITE 300

City: BETHESDA State: MD Zip Code: 20817

Amount of Each Disbursement this Period: 471.87

Purpose of Disbursement: BLANKET SPONSORSHIP

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial): ASCLS

Date of Disbursement: 11 / 07 / 2003

Mailing Address: 6701 DEMOCRACY BLVD #300

City: BETHESDA State: MD Zip Code: 20817

Amount of Each Disbursement this Period: 22.97

Purpose of Disbursement: BLANKET SPONSORSHIP

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶ 1493.84

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

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 3 OF 7

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 FOR CLINICAL LABORATORY SCIENCE

A.
Full Name (Last, First, Middle Initial): ARTHUR CRAVES
Date of Disbursement: 12 / 07 / 2003
Mailing Address: 336 NW ARTHUR PLACE
City: CORVALLIS State: OR Zip Code: 97330
Amount of Each Disbursement this Period: 455.29
Purpose of Disbursement: MISCELLANEOUS
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

B.
Full Name (Last, First, Middle Initial)
Date of Disbursement: / /
Mailing Address
City State Zip Code
Amount of Each Disbursement this Period
Purpose of Disbursement
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

C.
Full Name (Last, First, Middle Initial)
Date of Disbursement: / /
Mailing Address
City State Zip Code
Amount of Each Disbursement this Period
Purpose of Disbursement
Candidate Name
Category/Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶ 455.29

TOTAL This Period (last page this line number only) ▶ 7922.16

24038284729

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) ☐ 21a ☐ 22 ☑ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

PAGE 1 OF 3

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 FOR CLINICAL LABORATORY SCIENCE

A.

Full Name (Last, First, Middle Initial): RON WYDEN

Mailing Address: 516 HART SENATE OFFICE BUILDING

City: WASHINGTON State: DC Zip Code: 20510

Purpose of Disbursement: CONTRIBUTION

Candidate Name: WYDEN

Category/Type:

Office Sought: ☐ House ☑ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☑ General ☐ Other (specify) ▼

Date of Disbursement: 10 / 17 / 2003

Amount of Each Disbursement this Period: 500.00

B.

Full Name (Last, First, Middle Initial): JOHN BOOZMAN

Mailing Address: PO BOX 671

City: ROGERS State: AR Zip Code: 72757

Purpose of Disbursement: CONTRIBUTION

Candidate Name: BOOZMAN

Category/Type:

Office Sought: ☑ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☑ General ☐ Other (specify) ▼

Date of Disbursement: 10 / 17 / 2003

Amount of Each Disbursement this Period: 500.00

C.

Full Name (Last, First, Middle Initial): ARLEN SPECTER

Mailing Address: 426 C ST, NE

City: WASHINGTON State: DC Zip Code: 20002

Purpose of Disbursement: CONTRIBUTION

Candidate Name: SPECTER

Category/Type:

Office Sought: ☐ House ☑ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☑ General ☐ Other (specify) ▼

Date of Disbursement: 10 / 27 / 2003

Amount of Each Disbursement this Period: 1,000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 2,000.00

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

24038284730

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) 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29

PAGE 2 OF 3

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 FOR CLINICAL LABORATORY SCIENCE

A.
Full Name (Last, First, Middle Initial): ENSIGN FOR SENATE
Mailing Address: 40 SOUTH GREBE ROAD
City: ARLINGTON State: VA Zip Code: 22204
Purpose of Disbursement: CONTRIBUTION
Candidate Name: ENSIGN
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 07/07/2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): DIANA DEGETTE
Mailing Address: 770 GRANT ST, SUITE 238
City: DENVER State: CO Zip Code: 80203
Purpose of Disbursement: CONTRIBUTION
Candidate Name: DEGETTE
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 07/15/2003
Amount of Each Disbursement this Period: 250.00

C.
Full Name (Last, First, Middle Initial): XAVIER BECERRA
Mailing Address: PO BOX 116
City: HYATTSVILLE State: MD Zip Code: 20781
Purpose of Disbursement: CONTRIBUTION
Candidate Name: BECERRA
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 07/17/2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 2250.00

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

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)
☐ 21b ☐ 22 ☑ 25 ☐ 24 ☐ 23
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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 FOR CLINICAL LABORATORY SCIENCE

A.

Full Name (Last, First, Middle Initial): FRIENDS OF MIKE FERGUSON

Date of Disbursement: 11 / 27 / 2005

Mailing Address: 35 ROBIN ST

City: ROCKAWAY State: NJ Zip Code: 07866

Amount of Each Disbursement this Period: 500.00

Purpose of Disbursement: CONTRIBUTION

Category/Type:

Candidate Name: FERGUSON

Office Sought: ☑ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☑ General ☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial):

Date of Disbursement: ___ / ___ / ___

Mailing Address:

City: State: Zip Code:

Amount of Each Disbursement this Period:

Purpose of Disbursement:

Category/Type:

Candidate Name:

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial):

Date of Disbursement: ___ / ___ / ___

Mailing Address:

City: State: Zip Code:

Amount of Each Disbursement this Period:

Purpose of Disbursement:

Category/Type:

Candidate Name:

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶ 500.00

TOTAL This Period (last page this line number only) ▶ 4750.00

24038284732

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	Date of Receipt 1/30/04
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JACQ	1/30/04
PREPARER	DATE PREPARED

(6/2000)