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Image# 14940214788

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

					Office Use Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼	Example: If over the line		12FE4M5	
International Academy	of Compounding	Pharmacists PA	C (COMP F	PAC)	1
ADDRESS (number and street)	4638 Riverstone Blvd				
Check if different					
than previously reported. (ACC)	Missouri City			TX L	77459
2. FEC IDENTIFICATION NUM	MBER ▼	CITY A	;	STATE A	ZIP CODE ▲
C C00424143	3	. IS THIS REPORT X	NEW (N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report	Feb 20 (M2)	May 20 (M5)	Aug 2	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep 2	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	Jul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
Quarterly Report (Q1) July 15	) (c) 12-Day PRE-Election	Primary	12P)	General (	12G) Runoff (12R)
Quarterly Report (Q2) October 15	Report for the		on (12C)	Special (1	2S)
Quarterly Report (Q3)	)	M	/ D D /	Y Y Y Y	in the
January 31 Year-End Report (YE	)Ele	ection on			State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Electio		(30G)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Report for the	M = M	/ D D /	Y Y Y	in the
	Ele	ection on			State of
5. Covering Period 07	01 20	13 throug	h 12	31/	2013
I certify that I have examined this	Poport and to the hos	t of my knowledge a	ad boliof it is tru	o correct and	complete
Type or Print Name of Treasurer	David Miller	t of my knowledge a	id belief it is tid	e, correct and	Complete.
				M	/ D D / Y Y Y Y
Signature of Treasurer David I	Miller 	[Electron	cally Filed]	ate 01	31 2014
NOTE: Submission of false, erroneo	ous, or incomplete inform	ation may subject the	person signing th	nis Report to th	e penalties of 2 U.S.C. §437g.
Office					FEC FORM 3X
Use Only					Rev. 12/2004

### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

### International Academy of Compounding Pharmacists PAC (COMP PAC)

2013 2013 Report Covering the Period: 07 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 25001.96 January 1, 2013 (b) Cash on Hand at 59375.41 Beginning of Reporting Period..... 167355.00 22450.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 81825.41 192356.96 6(a) and 6(c) for Column B)..... 63791.08 174322.63 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 18034.33 18034.33 (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:

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

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

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

## International Academy of Compounding Pharmacists PAC (COMP PAC)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	20850.00	155830.00
(i) Itemized (use Schedule A)	20000.00	10000000
(ii) Unitemized	1600.00	11525.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	22450.00	167355.00
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees	7 7	
(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)▶	22450.00	167355.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
. All Loans Received	7	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		,
(a) Non-Federal Account	2.00	
(from Schedule H3)	0.00	0.00
(b) Lovin Fundo (franc Cabadula 115)	0.00	0.00
(b) Levin Funds (from Schedule H5)	3	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))  Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	16735
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	22450.00	167355.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Ope (a)	erating Expenditures:  Allocated Federal/Non-Federal  Activity (from Schedule H4)		Calcinati Four to Dute
	(i) Federal Share	0.00	0.00
	(i) Federal Share	7	
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating		
	Expenditures	15791.08	56822.63
(c)	Total Operating Expenditures	45704.00	56922.63
Tron	(add 21(a)(i), (a)(ii), and (b))▶ Insfers to Affiliated/Other Party	15791.08	56822.63
	nmittees	0.00	0.00
Con	tributions to		
	eral Candidates/Committees Other Political Committees	46000.00	115500.00
Inde	ependent Expenditures		
(use	e Schedule E)	0.00	0.00
Coo (2 l	ordinated Party Expenditures  J.S.C. §441a(d))  Schedule F)	0.00	
(use	Schedule F)	0.00	0.00
Loo	n Denovmente Mede	0.00	0.00
LUa	n Repayments Made	3.00	0.00
Loa	ns Made	0.00	0.00
Refu	unds of Contributions To: Individuals/Persons Other		
(a)	Than Political Committees	2000.00	2000.00
	_		
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
(d)	Total Contribution Refunds		
()	(add Lines 28(a), (b), and (c))▶	2000.00	2000.00
Oth	er Disbursements	0.00	0.00
	_	, , , , , , , , , , , , , , , , , , , ,	
	eral Election Activity (2 U.S.C. §431(20))		
(a)	Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) I cacial chare	7	
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Toto	al Disbursements (add Lines 21(c), 22,		
	24, 25, 26, 27, 28(d), 29 and 30(c))	63791.08	474200 63
۷٠,	21, 20, 20, 21, 20(a), 23 and 00(b))	03791.00	174322.63
Tota	al Federal Disbursements		
(sub	otract Line 21(a)(ii) and Line 30(a)(ii)		
from	n Line 31)	63791.08	174322.63

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

oursements

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	22450.00	167355.00
4. Total Contribution Refunds (from Line 28(d))	2000.00	2000.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20450.00	165355.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	15791.08	56822.63
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	15791.08	56822.63

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

FOR LIN	E NUMBER	: PAGE	6 OF	40
(check o	nly one)			
<b>X</b> 11a	11b	11c	12	
13	14	15	16	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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Kevin Atkins Date of Receipt Mailing Address 701 3rd Street 2013 18 City State Zip Code Transaction ID: A2013-3854975 TX Marble Falls 78654 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Pharmacist **Atkins Pharmacy Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin Atkins Date of Receipt Mailing Address 701 3rd Street 09 18 2013 City State Zip Code Transaction ID: A2013-4003322 Marble Falls TX 78654 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Atkins Pharmacy Services** Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin Atkins Date of Receipt Mailing Address 701 3rd Street 10 18 2013 City Zip Code State Transaction ID: A2013-4195638 TX Marble Falls 78654 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Pharmacist Atkins Pharmacy Services Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

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### : 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SA11AI

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule: Transaction ID:

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

FOR	LINE	NU	MBER	:	PAGE	8	OF	40
(ched	ck only	or	ne)					
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	13		14		15	16	,	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)

/ International Academy of Co	ompounding Pharmacists PAC (COM	IP PAC)
Full Name (Last, First, Middle Initial) <b>Kevin Atkins</b>		Date of Receipt
Mailing Address 701 3rd Street		1.1 18 2013
City  Marble Falls	State Zip Code TX 78654	Transaction ID : A2013-4524033
	7,0007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Atkins Pharmacy Services	Pharmacist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  3. Kevin Atkins	'	Date of Receipt
Mailing Address 701 3rd Street		12 18 2013
City	State Zip Code	Transaction ID : A2013-4708423
Marble Falls	TX 78654	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Atkins Pharmacy Services	Occupation Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  C. Danny Barnes		Date of Receipt
Mailing Address 550 New Waverly Place		08 27 2013
City	State Zip Code NC 27511	Transaction ID : A2013-3855025
Cary  FEC ID number of contributing federal political committee.	C 2/311	Amount of Each Receipt this Period  1000.00
Name of Employer	Occupation	-
Triangle Compounding Pharmacy	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional	al)	1100.00
TOTAL This Period (last page this line num	nber only)	

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

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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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Jacob "Jake" Beckel Date of Receipt Mailing Address 5710 Hoover Blvd. 19 2013 12 City State Zip Code Transaction ID: A2013-4708424 FL Tampa 33634 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation RPh FIACP Anazao Health Corp. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen Bernardi Date of Receipt Mailing Address 577 Main Street 10 80 2013 City State Zip Code Transaction ID: A2013-4003325 Waltham MA 02452 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Johnson Compounding & Wellness Center Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sheldon Birch Date of Receipt Mailing Address 493 North Main Street 80 27 2013 City Zip Code State Transaction ID: A2013-3854986 UT Tooele 84074 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Intl Academy of Compounding Pharmacist Manager Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)		Ī	7	Ī	Ī	7	Ī	14	50.00	)
TOTAL This Period (last page this line number only)	_	Ξ	7	_	_	7	Ξ	_		

300.00

Primary

Other (specify)

General

## SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE

10 OF

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A 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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Jeffrey Bray Date of Receipt Mailing Address 669 West 900 Noth 2013 27 City State Zip Code Transaction ID: A2013-3855021 UT North Salt Lake 84054 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation MedQuest Solutions **CPhT** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chris Burgess Date of Receipt Mailing Address 322 N. Ingleside Street 07 18 2013 City State Zip Code Transaction ID: A2013-3495277 ΑL Fairhope 36532 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Heritage Compounding Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Burgess Date of Receipt Mailing Address 322 N. Ingleside Street 80 18 2013 City State Zip Code Transaction ID: A2013-3854976 AL Fairhope 36532 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Pharmacist Heritage Compounding Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 800.00 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

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**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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Chris Burgess Date of Receipt Mailing Address 322 N. Ingleside Street 2013 18 City State Zip Code Transaction ID : A2013-4003318 Fairhope AL 36532 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Pharmacist Heritage Compounding Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chris Burgess Date of Receipt Mailing Address 322 N. Ingleside Street 10 18 2013 City State Zip Code Transaction ID: A2013-4195639 ΑL Fairhope 36532 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Heritage Compounding Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Burgess Date of Receipt Mailing Address 322 N. Ingleside Street 11 18 2013 City State Zip Code Transaction ID: A2013-4524034 ΑL Fairhope 36532 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Pharmacist Heritage Compounding Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify)

TOTAL This Period (last page this line number only)	SUBTOTAL of Receipts This Page (optional)			7	Ξ	7	Ξ	30	00.00	)
	TOTAL This Period (last page this line number only)		_	7		7	_	_		

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**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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Chris Burgess Date of Receipt Mailing Address 322 N. Ingleside Street 2013 12 18 City State Zip Code Transaction ID: A2013-4708425 Fairhope AL 36532 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Pharmacist Heritage Compounding Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tracy Christian Date of Receipt Mailing Address 2000 PGA Blvd Suite 5507 08 27 2013 City State Zip Code Transaction ID: A2013-3855028 MD Kensington 20895 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Premier Compounding Pharmacy** Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dale Coker Date of Receipt Mailing Address 2260 Holly Springs Parkway 19 2013 City Zip Code State Transaction ID: A2013-4708426 GA Canton 30115 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Pharmacist Cherokee Custom Script Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify)

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

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NAME OF COMMITTEE (In Full)

International Academy of Compounding Pharmacists PAC (COMP PAC)

Full Name (Last, First, Middle Initial)

A. Joseph DiMatteo

Date of Receipt

$\angle$			,
Α.	Full Name (Last, First, Middle Initial) Joseph DiMatteo		Date of Receipt
	Mailing Address 215 Allegheny Avenue		07 18 2013
	City	State Zip Code	Transaction ID : A2013-3495281
	Oakmont	PA 15139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	
	Medicine Stop	Pharmacist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
В.	Full Name (Last, First, Middle Initial)  Eric Everett		Date of Receipt
	Mailing Address 5453 West 61st Place		08 27 2013
	City	State Zip Code	Transaction ID: A2013-3854980
	Mission	KS 66206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	O'Brien Pharmacy	RPh FIACP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<del></del>	Full Name (Last, First, Middle Initial) Calvin Freedman		Date of Receipt
	Mailing Address 31 Albe Drive Unit 1		08 27 2013
	City	State Zip Code	Transaction ID : A2013-3855023
	Newark	DE 19702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	
	Save Way Compounding Pharmacy	Pharmacist	
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 1500.00	
	Other (specify) ▼	1300.00	
s	SUBTOTAL of Receipts This Page (optional)	<u> </u>	2000.00
Т	TOTAL This Period (last page this line number	only)	

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

FOF	LINE	NU	MBER	:	PAGE	•	14	OF		40	
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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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Cheri Garvin Date of Receipt Mailing Address 109 Old English Court SW 18 2013 City Zip Code State Transaction ID: A2013-3495284 VA Leesburg 20175 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Leesburg Pharmacy Rph Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheri Garvin Date of Receipt Mailing Address 109 Old English Court SW 08 18 2013 City State Zip Code Transaction ID: A2013-3854974 VA Leesburg 20175 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Leesburg Pharmacy Rph Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cheri Garvin Date of Receipt Mailing Address 109 Old English Court SW

Zip Code

20175

State

VA

Occupation

Aggregate Year-to-Date ▼

С

Rph

2013

100.00

09

18

Transaction ID: A2013-4003316

Amount of Each Receipt this Period

City

Leesburg

FEC ID number of contributing

federal political committee.

Name of Employer

Leesburg Pharmacy

Receipt For:

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

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for each category of the 12 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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Cheri Garvin Date of Receipt Mailing Address 109 Old English Court SW 2013 11 18 City Zip Code State Transaction ID: A2013-4524035 VA Leesburg 20175 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Leesburg Pharmacy Rph Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheri Garvin Date of Receipt Mailing Address 109 Old English Court SW 12 18 2013 City State Zip Code Transaction ID: A2013-4708427 VA Leesburg 20175 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Leesburg Pharmacy Rph Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sam Georgiou Date of Receipt Mailing Address 2015 Lord Baltimore Drive 80 27 2013 City Zip Code State Transaction ID: A2013-3854985 MD **Baltimore** 21244 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Pharmacist Professional Arts Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 700.00 SUBTOTAL of Receipts This Page (optional).....

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

## SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 16 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	 e) 11b 14	11c 15	$\vdash$	12 16	17
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A 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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Jim Gillespie Date of Receipt Mailing Address 2121 Whitesburg Drive 2013 City State Zip Code Transaction ID: A2013-3495285 ΑL Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Huntsville Compounding Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jim Gillespie Date of Receipt Mailing Address 2121 Whitesburg Drive 80 18 2013 City State Zip Code Transaction ID: A2013-3854977 Huntsville ΑL 35801 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Huntsville Compounding Pharmacy** Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jim Gillespie Date of Receipt Mailing Address 2121 Whitesburg Drive 09 18 2013 Zip Code City State Transaction ID: A2013-4003319 AL Huntsville 35801 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation **Pharmacist Huntsville Compounding Pharmacy** Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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	g the name and address of any political committee t	
,	ompounding Pharmacists PAC (COM	IP PAC)
Full Name (Last, First, Middle Initial) Jim Gillespie		Date of Receipt
Mailing Address 2121 Whitesburg Drive		10 18 2013
City	State Zip Code	Transaction ID : A2013-4195642
Huntsville	AL 35801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	7
Huntsville Compounding Pharmacy	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  Jim Gillespie		Date of Receipt
Mailing Address 2121 Whitesburg Drive		1,1 18 2013 The state of the st
City	State Zip Code	Transaction ID : A2013-4524036
Huntsville	AL 35801	Amount of Each Receipt this Period
FEC ID number of contributing	0	T
federal political committee.	C	100.00
Name of Employer	Occupation	-
Huntsville Compounding Pharmacy	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General		
Other (specify) ▼	1100.00	
Full Name (Last, First, Middle Initial)	·	Date of Receipt
Mailing Address 2121 Whitesburg Drive		12 18 2013
City	State Zip Code	Transaction ID : A2013-4708428
Huntsville	AL 35801	Amount of Each Receipt this Period
FEC ID number of contributing	0	
federal political committee.	C	100.00
Name of Employer	Occupation	-
Huntsville Compounding Pharmacy	Pharmacist	-
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify)	1200.00	
<i>Carlot (opoonly)</i> <b>\</b>		
SUBTOTAL of Receipts This Page (optional	al)	300.00
	<u>^</u> _	
TOTAL This Period (last page this line nun	nber only)	1

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

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Full Name (Last, First, Middle Initial)  Joe Grasela  Mailing Address 1875 3rd Avenue  City State Zip Code San Diego CA 92101  FEC ID number of contributing federal political committee.  Name of Employer University Compounding Pharmacy Receipt For: Primary General Other (specify)  Other (specify)  Aggregate Year-to-Date  7000.00  Full Name (Last, First, Middle Initial)  Gary Grove	PPAC)
3. Gary Grove	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1522 East Sunshine  City State Zip Code Springfield MO 65804  FEC ID number of contributing federal political committee.  Name of Employer Grove Pharmacy  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Bill Hunter  Mailing Address 300 Frances Street  City State Zip Code Goodlettsville TN 37072  FEC ID number of contributing federal political committee.  Name of Employer Roman Pharmacy Receipt For: Primary General Other (specify)   Aggregate Year-to-Date   300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	

federal political committee.

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

FOF	LINE	NU	MBER	:	PAGE	•	19	OF		40
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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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) Charles Leiter Date of Receipt Mailing Address 1700 Park Avenue Suite 30 2013 12 19 City State Zip Code Transaction ID: A2013-4708429 CA San Jose 95126 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Pharmacist** Leiter's Rx Compounding Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Pack Date of Receipt Mailing Address 701 W. Market Street 80 01 2013 City Zip Code State Transaction ID: A2013-3854964 OH 45805 Lima Amount of Each Receipt this Period FEC ID number of contributing

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Name of Employer Pack Pharmacy  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation Pharmacist  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  C. Vimal Parag  Mailing Address 6375 McGinnis Ferry Road  City	State Zip Code	Date of Receipt    M
Alpharetta  FEC ID number of contributing federal political committee.	GA 30005	Amount of Each Receipt this Period  250.00
Name of Employer  Health Mart Pharmacy of Jones Creek  Receipt For:  Primary General  Other (specify) ▼	Occupation RPh  Aggregate Year-to-Date ▼  250.00	

SUBTOTAL of Receipts This Page (optional).....

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

1000.00

500.00

## SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 20 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	one) 11b 14	11c		12 16	17
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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) International Academy of Cor	npounding Pharmacists PAC (COM	P PAC)
Full Name (Last, First, Middle Initial)  A. Brenda Pavlic		Date of Receipt
Mailing Address 31 Albe Drive Unit 1		07 18 2013
City	State Zip Code	Transaction ID : A2013-3495278
Newark	DE 58104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Save Way Compounding Pharmacy	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1350.00	
Full Name (Last, First, Middle Initial)  3. Brenda Pavlic		Date of Receipt
Mailing Address 31 Albe Drive Unit 1		08 18 2013
City	State Zip Code	Transaction ID : A2013-3854978
Newark	DE 58104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Save Way Compounding Pharmacy	Pharmacist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	
Full Name (Last, First, Middle Initial)  5. Brenda Pavlic		Date of Receipt
Mailing Address 31 Albe Drive Unit 1		09 18 _ 2013 _
City	State Zip Code	Transaction ID : A2013-4003317
Newark	DE 58104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Save Way Compounding Pharmacy	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1450.00	
SUBTOTAL of Receipts This Page (optional)	<b>_</b>	150.00
TOTAL This Period (last page this line numb	er only)	

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

FOR	FOR LINE NUMBER:			:	PAGE	2	21	OF	40
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$\rangle$	International Academy of Composition	ounding Pharmacists PAC (COMF	PPAC)		
Α.	Full Name (Last, First, Middle Initial) Brenda Pavlic		Date of Receipt		
	Mailing Address 31 Albe Drive Unit 1	10 18 2013 a			
	City Newark	State Zip Code vark DE 58104			
	FEC ID number of contributing federal political committee.	50.00			
	Name of Employer Save Way Compounding Pharmacy	Occupation Pharmacist			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00			
В.	Full Name (Last, First, Middle Initial) Richard Rasmuson	Date of Receipt			
	Mailing Address 1320 E. 2nd South	07 18 2013			
	City Salt Lake City	State Zip Code UT 84102	Transaction ID : A2013-3495279  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	100.00		
	Name of Employer University Pharmacy	Occupation Pharmacist			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  700.00			
— С.	Full Name (Last, First, Middle Initial) Richard Rasmuson		Date of Receipt		
	Mailing Address 1320 E. 2nd South		08 18 2013		
	City Salt Lake City	State Zip Code UT 84102	Transaction ID : A2013-3854973  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	100.00		
	Name of Employer	Occupation			
	University Pharmacy Receipt For: Primary General Other (specify)	Pharmacist  Aggregate Year-to-Date ▼  800.00			
s	UBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	250.00		

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

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

FOR LINE NUMBER:				:	PAGE	2	22 OF	40
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X	11a		11b		11c		12	
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NAME OF COMMITTEE (In Full)		
angle International Academy of Compo	ounding Pharmacists PAC (COMF	PAC)
Full Name (Last, First, Middle Initial)  1. Stan Reeves		Date of Receipt
Mailing Address P.O. Box 310		08 27 _ 2013 _
City	State Zip Code	Transaction ID : A2013-3855030
Demopolis	AL 36732	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	
F & F Drugs	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	4500.00	
Other (specify) ▼	4500.00	
Full Name (Last, First, Middle Initial)  David Rochefort		Date of Receipt
Mailing Address 262 Cottage Street Suite 116	07 18 2013	
City	State Zip Code	Transaction ID : A2013-3495286
Littleton	NH 03561	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Eastern States Compounding Pharmacy	Occupation	
Receipt For:	Pharmacist	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. David Rochefort		Date of Receipt
Mailing Address 262 Cottage Street Suite 116		08 18 _2013 _
City	State Zip Code	Transaction ID : A2013-3854972
Littleton	NH 03561	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Eastern States Compounding Pharmacy	Pharmacist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		2600.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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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) International Academy of Compounding Pharmacists PAC (COMP PAC) Full Name (Last, First, Middle Initial) David Rochefort Date of Receipt Mailing Address 262 Cottage Street Suite 116 2013 18 City Zip Code State Transaction ID: A2013-4003321 NH Littleton 03561 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Eastern States Compounding Pharmacy **Pharmacist** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** David Rochefort Date of Receipt Mailing Address 262 Cottage Street Suite 116 10 18 2013 City State Zip Code Transaction ID: A2013-4195644 NH Littleton 03561 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Eastern States Compounding Pharmacy Pharmacist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** David Rochefort Date of Receipt Mailing Address 262 Cottage Street Suite 116 11 18 2013 City Zip Code State Transaction ID: A2013-4524037 NH Littleton 03561 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation **Pharmacist** Eastern States Compounding Pharmacy Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

ı	FOR LINE	E NUMBER	: PAGE	24 OF	40			
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NAME OF COMMITTEE (In Full) International Academy of Comp	oounding Pharmacists PAC (COMI	P PAC)
Full Name (Last, First, Middle Initial)  A. David Rochefort  Mailing Address 262 Cottage Street Suite 116		Date of Receipt
City Littleton  FEC ID number of contributing federal political committee.	State Zip Code NH 03561	12 18 2013  Transaction ID: A2013-4708430  Amount of Each Receipt this Period  50.00
Name of Employer  Eastern States Compounding Pharmacy  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Pharmacist  Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  3. Joseph Rossetti  Mailing Address 149 Shrewsbury Street		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Worcester  FEC ID number of contributing federal political committee.	State Zip Code MA 01604	Transaction ID : A2013-3854966  Amount of Each Receipt this Period  1000.00
Name of Employer Boulevard Pharmaceutical Receipt For:	Occupation Pharmacist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  Andy Ruiz  Mailing Address 3709 Promontory Point, Suite  City	e 131 State Zip Code	Date of Receipt  12 19 2013  Transaction ID: A2013-4708431
Austin  FEC ID number of contributing federal political committee.	TX 78744	Amount of Each Receipt this Period  500.00
Name of Employer  Texas Compounding Pharmacy  Receipt For:  Primary General  Other (specify) ▼	Occupation PharmD  Aggregate Year-to-Date ▼  600.00	
SUBTOTAL of Receipts This Page (optional)	<b>_</b>	1550.00

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

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

ı	FOR LINE NUMBER:			PAGE	2	25	OF	40		
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	and statements may not be sold or used by any per g the name and address of any political committee				
NAME OF COMMITTEE (In Full) International Academy of Co	ompounding Pharmacists PAC (COM	IP PAC)			
Full Name (Last, First, Middle Initial) Tom Siegenthaler  Mailing Address 2220-A West Park Row		Date of Receipt			
City	State Zip Code	08 27 2013 Transaction ID : A2013-3854982			
Arlington	TX 76013	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	500.00			
Name of Employer	Occupation	1			
The Medicine Shoppe	PharmD				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00				
Full Name (Last, First, Middle Initial)  Tom Silvonek	Date of Receipt				
Mailing Address 3330 Hamilton Blvd.	08 27 2013				
City	State Zip Code PA 18103	08 27 2013 Transaction ID : A2013-3854984			
Allentown	PA 18103	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ÿ				
Name of Employer	Occupation	1			
Dorneyville Pharmacy	RPh FIACP	]			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial)  Steven Spruill	1	Date of Receipt			
Mailing Address 1330 Big A Road		08 01 2013			
City	State Zip Code	Transaction ID : A2013-3854963			
Тоссоа	GA 30577	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer	Occupation	1			
Maddox Drugs	Pharmacist				
Receipt For:	Aggregate Year-to-Date ▼	7			
Primary General  Other (specify) ▼	500.00				
SUBTOTAL of Receipts This Page (optional	al)	2000.00			
. 3 ( )	<u> </u>				
TOTAL This Period (last page this line nur	nber only)	20850.00			

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SCHEDULE B (FEC Form 3X)		PAGE 26 OF 40				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orling				
	Detailed Summary Page	X 21b		23 24 25 26 28b 28c 29 30b		
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NAME OF COMMITTEE (In Full)						
	iding Pharmacists	PAC (COM	P PAC)			
Full Name (Last, First, Middle Initial)						
A. Comerica Bank	Comerica Bank					
Mailing Address P.O. Box 650282			07	03 2013		
City	state Zip Code		Transaction ID : B470974			
Dallas	TX 75265		II ID . D470374			
Purpose of Disbursement Bank Service Charge		001	Amount of E	ach Disbursement this Period		
Candidate Name		Category/ Type		553.74		
Office Sought: House Disbursen	nent For: 2013	, , , , , , , , , , , , , , , , , , ,	,	,		
	Primary General					
	Other (specify)	1-				
State: District:	Not Applicab	ie				
Full Name (Last, First, Middle Initial)			Date of Disb	urcomont		
B. JB & Associates						
Mailing Address 2011 Waugh Drive			07	05 2013		
City	Transactio	n ID : B457641				
Houston Purpose of Disbursement	_					
Admin expen-Fundraising Exp.		003	Amount of E	ach Disbursement this Period		
Candidate Name		Category/ Type		560.00		
Office Sought: House Disbursen	nent For: 2013					
	Primary General					
	Other (specify)	lo.				
State: District:  Full Name (Last, First, Middle Initial)	Not Applicab	ie				
C. JB & Associates			Date of Disb			
Mailing Address 2011 Waugh Drive			07	11 2013		
City	State Zip Code					
· ·	TX 77006		Transactio	n ID : B457841		
Purpose of Disbursement Admin expen-Fundraising Exp.						
		003	Amount of E	ach Disbursement this Period		
Candidate Name		Category/ Type		325.00		
Office Sought: House Disbursen	nent For: 2013					
	Primary General					
	Other (specify) ▼					
State: District:	Not Applicab	le				
CURTOTAL of Dishurasments This David (anti-unit)				1438.74		
SUBTOTAL of Disbursements This Page (optional)		·····				
TOTAL This Period (last page this line number only)						

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S	CHEDULE B (FEC Form 3X)	FOR LINE			E NUMBER: PAGE 27 OF 40				
IT	EMIZED DISBURSEMENTS	Use separate sched for each category of		(check only	one)			7.00	
		Detailed Summary F		21b	22 28a	23 28b	24 25 29 29	26 30b	
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	for commercial purposes, other than using the name							5	
	NAME OF COMMITTEE (In Full)								
$ \rangle$	International Academy of Compour	nding Pharmacis	sts PA	C (COM	P PAC)				
_	Full Name (Last, First, Middle Initial)				<b>D</b> : .				
Α.	JB & Associates				Date of Disbursement				
	Mailing Address 2011 Waugh Drive				07	31			
	,	State Zip Code			Transaction ID : B460811				
	Houston Purpose of Disbursement	TX 77006			· · · · · ·		2.000.1		
	Admin expen-Fundraising Exp.			003	Amount	t of Each [	Disbursement this Perio	od	
	Candidate Name			Category/			364.00	$\Box$	
	Office Sought: House Disbursen	nent For: 2013		Туре		,			
		Primary Gene	eral						
		Other (specify)							
	State: District:	Not App	olicable						
В.	Full Name (Last, First, Middle Initial)  Comerica Bank				Date of	Disburser	ment		
	CONTENICA DANK				M M	/ D 1			
C	Mailing Address P.O. Box 650282				08	05			
	City State Zip Code Dallas TX 75265					Transaction ID : B474736  Amount of Each Disbursement this Period			
	Purpose of Disbursement Bank Service Charge 001								
	Candidate Name			Category/ Type					
		nent For: 2013							
		Primary Gene Other (specify) ▼	eral						
	State: District:	Not App	olicable						
_	Full Name (Last, First, Middle Initial)								
C.	Comerica Bank					Disburser			
	Mailing Address P.O. Box 650282				09	03			
		State Zip Code TX 75265			Trans	action ID :	: B475764		
	Purpose of Disbursement	13203							
	Bank Service Charge			001	Amount	t of Each [	Disbursement this Perio	od	
	Candidate Name			Category/ Type			436.52	$\Box$	
	Office Sought: House Disbursen	nent For: 2013		٠,,٠٠		,			
	Senate	Primary Gene	eral						
		Other (specify) ▼							
	State: District:	Not App	olicable						
s	SUBTOTAL of Disbursements This Page (optional)			·····•		,	850.14		
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S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER:					PAG	E 28	OF 40
IT	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(chec	k only	one)				
			ummary Page		21b 27	22 28a	23 28b	24 28c	25 29	26 30b
Δr	ny information copied from such Reports and Staten	l nents may no	nt he sold or use	d by any						
	for commercial purposes, other than using the nam									
$\setminus$	NAME OF COMMITTEE (In Full)									
$ \rangle$	International Academy of Compour	nding Pha	armacists P	AC (C	OMF	PAC)				
_	Full Name (Last, First, Middle Initial)					D :	. D			
Α.	Comerica Bank						Disburse			
	Mailing Address P.O. Box 650282					09	1	3	2013	Y
	City State Zip Code					Trans	action ID	: B475766		
	Dallas	TX	75265			irans	action ib	: D4/3/00		
	Purpose of Disbursement Bank Service Charge			001		Amount	of Each	Disbursem	ent this	Period
	Candidate Name			Catego						1.04
	Office Sought: House Disbursen	nent For: 20	113	Туре			-	- 1		
		Primary	General							
		Other (specit	fy) 🔻							
	State: District:		Not Applicable							
_	Full Name (Last, First, Middle Initial)					D : -	. D			
В.	Comerica Bank						Disburse			
	Mailing Address P.O. Box 650282					10	0	3	2013	Y
	City S	State TX	Zip Code 75265			Trans	action ID	: B481641		
	Purpose of Disbursement	1//	13203							
	Bank Service Charge			001		Amount	of Each	Disbursem	ent this	Period
	Candidate Name			Categor Type			. ,	,	4	9.38
		nent For: 20								
		Primary	General							
	President State: District:	Other (specif	y) ▼ Not Applicable							
_	Full Name (Last, First, Middle Initial)				+					
C.	Comerica Bank					Date of	Disburse	ement		
						M = M	/ D		YY	Y
	Mailing Address P.O. Box 650282					11	0	4	2013	
			Zip Code			Trans	action ID	: B484367		
	Dallas Purpose of Disbursement	TX	75265							
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	Candidate Name			Catego		Amount	OI Eacil	DispuiseIII		9.33
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S	CHEDULE B (FEC Form 3X)		$\Box$	FOR LINE N	IUMBER:		PAGE	29	OF 40
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		(check only	one)	¬ oc   ⊏	764 5		
		Detailed Summary Page		X 21b 27	22 28a	23 28b	24 28c	25 29	26 30b
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$\mathbb{Z}$	International Academy of Compour	nding Pharmacists	PA	C (COMF	PAC)				
_	Full Name (Last, First, Middle Initial)				D.: 1=	1-1-			
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	Mailing Address P.O. Box 650282				12	03		2013	Y
	City State Zip Code					tion ID : I	2496120		
	Dallas	TX 75265			Hallsac	. כוו ווטו	3400139		
	Purpose of Disbursement Bank Service Charge		Т	001	Amount o	f Each Di	sburseme	nt this	Period
	Candidate Name			Category/				149	9.26
	Office Sought: House Disbursen	nont For: 2042		Туре		7	7	143	5.25
		nent For: 2013  Primary General							
		Other (specify) ▼							
	State: District:	Not Applica	ble						
	Full Name (Last, First, Middle Initial)								
В.	Fitts, Roberts & Co PC				Date of D	isburseme	ent		
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	Mailing Address 5718 Westheimer, Ste 800			12	19	<u> </u>	2013		
		State Zip Code			Transac	tion ID : I	3484151		
	Houston Purpose of Disbursement	TX 77057	T_						
	Admin expen-Accounting svcs.			001	Amount o	f Each Di	sburseme	nt this	Period
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_	Full Name (Last, First, Middle Initial)		-						
C.	IACP				Date of D	isburseme	ent		
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	Mailing Address 4638 Riverstone Blvd				07	22	1	2013	
		State Zip Code			Transac	tion ID : I	3458033		
		TX 77459	_		Hallodu	ו . עו ווטיי			
	Purpose of Disbursement Fundraising Exp. reimbursement		Т	001					
	Candidate Name		┨┖		Amount o	Each Di	sburseme	nt this	Period
			'	Category/ Type				282	4.24
	Office Sought: House Disbursen	nent For: 2013				7	7		
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SCHEDULE B (FEC Form 3X)			F05 :	F NUMBER: PAGE 30 OF 40			
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	NAME OF COMMITTEE (In Full)	dina Dharmasista I					
/	International Academy of Compour	iding Pharmacists I	PAC (COMI	- PAU)			
<u></u>	Full Name (Last, First, Middle Initial)		Ī				
Α.	IACP			Date of Disbursement			
				M M / D D / Y Y Y Y			
	Mailing Address 4638 Riverstone Blvd			10 23 2013			
	City	State Zip Code		Transaction ID : B476152			
	Missouri City	TX 77459		Transaction ID . B476152			
	Purpose of Disbursement		1				
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_	Full Name (Last, First, Middle Initial)						
В.	IACP			Date of Disbursement			
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	Mailing Address 4638 Riverstone Blvd			10 23 2013			
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	City S Missouri City	State Zip Code TX 77459		Transaction ID: B476153			
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	Candidate Name						
			Category/ Type	1189.06			
	Office Sought: House Disbursen	nent For: 2013	- 7 100	, , , , , , , , , , , , , , , , , , , ,			
		Primary General					
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C.	Public Affairs Support Services Inc.			Date of Disbursement			
	. abile / tilding Support Services into	•		M M / D D / Y Y Y Y			
	Mailing Address 1950 Roland Clarke Place Suite 30	0		07 05 2013			
	2						
	City	State Zip Code		Transaction ID : B457642			
		VA 20191		11a113aCtiVII ID . D43/042			
	Purpose of Disbursement						
	Admin expen-Report prep.		001	Amount of Each Disbursement this Period	ı		
	Candidate Name		Category/	1182.42	٦.		
		Type	1102.42				
		nent For: 2013					
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SCHEDULE B (FEC Form 3X)			F00 : :::=	ALLIM DED	GE 31 OF 40		
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۲		and address of any point	car committee to	Control Contributions II Offi Suc	σσιτιπιιασσ.		
	NAME OF COMMITTEE (In Full)	alina Dhamasaiste I					
/	International Academy of Compour	naing Pharmacists	PAC (COMI	PAC)			
	Full Name (Last, First, Middle Initial)						
Α.	Sarah Dodge			Date of Disbursement			
	- <u> </u>			M M / D D / Y	YYYY		
	Mailing Address 19575 Tantara Terrace, Unit 206			07 22	2013		
	City	State 7:n Cada					
	,	State Zip Code VA 20176		Transaction ID : B45893	2		
	Lansdowne Purpose of Disbursement	VA 20176					
	Fundraising Exp. reimbursement		003	Amount of Each Disburser	ment this Period		
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		Other (specify)					
	State: District:	Not Applicab	le				
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В.				Date of Disbursement			
υ.	Public Affairs Support Services Inc	•					
	Mailing Address 1950 Roland Clarke Place Suite 30	00		08 14	2013		
	Walling Address 1950 Roland Clarke Place Suite 30	JU		00 14	14 2013		
	City	State Zip Code					
		VA 20191		Transaction ID : B47039	96		
	Purpose of Disbursement						
	Admin expen-Report prep.		001	Amount of Each Disbursement this Period			
	Candidate Name		Category/				
			Type		1159.27		
	Office Sought: House Disbursen	nent For: 2013					
	Senate	Primary General					
	President	Other (specify) ▼					
_	State: District:	Not Applicab	le				
	Full Name (Last, First, Middle Initial)						
C.	Public Affairs Support Services Inc.			Date of Disbursement			
				M M / D D / Y	YYY		
	Mailing Address 1950 Roland Clarke Place Suite 30	0		08 26	2013		
	,	State Zip Code		Transaction ID : B47142	26		
		VA 20191					
	Purpose of Disbursement Admin expen-Report prep.		004				
			001	Amount of Each Disburser	ment this Period		
	Candidate Name		Category/		1143.69		
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 32 OF 40
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NAME OF COMMITTEE (In Full)				
International Academy of Compour	iding Pharmacists	PAC (COM	P PAC)	
Full Name (Last, First, Middle Initial)				
A. Public Affairs Support Services Inc			Date of Disbursem	ent
Mailing Address 1950 Roland Clarke Place Suite 30	0		10 03	2013
City	State Zip Code		Transaction ID :	R/75032
Reston Purpose of Disbursement	VA 20191		Transaction ib .	D47 3032
Admin expen-Report prep.		001	Amount of Each D	isbursement this Period
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B. Public Affairs Support Services Inc	•		Date of Disbursem	_
Mailing Address 1950 Roland Clarke Place Suite 30	00		10 23	2013
				23 2013
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Full Name (Last, First, Middle Initial)			Date of Disbursem	ent
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 33 OF 40
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
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NAME OF COMMITTEE (In Full)		240 (0014	D D ( 0 )	
/ International Academy of Compour	iding Pharmacists I	PAC (COM	P PAC)	
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Public Affairs Support Services Inc.			Date of Disburseme	/ <b>Y Y Y Y</b>
Mailing Address 1950 Roland Clarke Place Suite 30	0		12 31	2013
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	VA 20191		Transaction ib . E	3404092
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Office Sought: House Disbursem	nent For: 2013	Туре		1103.33
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President	Other (specify) ▼			
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r dipose of Disbursement			Amount of Each Disbursement this Perio	
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Office Sought: House Disbursem	nent For:			7
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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 34 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	NOMBER:
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NAME OF COMMITTEE (In Full)	" DI ' '	DAG (0014)	D D A O \
│ International Academy of Compou	nding Pharmacists I	PAC (COMI	P PAC)
Full Name (Last, First, Middle Initial)			
A. David Schweikert for Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 15749 E El Lago Blvd			08 02 2013
City	State Zip Code		
Fountain Hills	AZ 85268		Transaction ID : B469861
Purpose of Disbursement			
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
David Schweikert  Office Sought:  House Disburser	ment For: 2014	Туре	
Senate Sought.	Primary General		
President	Other (specify) ▼		
State: AZ District: 06	·		
Full Name (Last, First, Middle Initial)			
B. Marco Rubio for US Senate			Date of Disbursement
Mailing Address DOD 110100			M M / D D / Y Y Y Y
Mailing Address PO Box 140420			09 11 2013
City	State Zip Code		Transaction ID - B472204
Miami	FL 33114		Transaction ID : B472301
Purpose of Disbursement Contribution		044	Amount of Each Dishumannout this Davied
Candidate Name		011	Amount of Each Disbursement this Period
Marco Rubio		Category/ Type	2500.00
	ment For: 2016	.,,,,,	
X Senate	Primary General		
President	Other (specify) ▼		
State: FL District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
C. Simpson for Congress			
Mailing Address 1487 Parkway Drive			09 17 2013
•	State Zip Code		Transaction ID : B472923
Blackfoot Purpose of Disbursement	ID 83221		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Michael K Simpson		Type	5000.00
	nent For: 2014		
Senate	Primary General		
State: ID District: 02	Other (specify) ▼		
State: ID District: 02			
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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 35 OF 40			
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NAME OF COMMITTEE (In Full)						
$ \; angle$ International Academy of Compou	nding Pharmacists F	PAC (COMI	P PAC)			
Full Name (Last, First, Middle Initial)						
A. Volunteers for Shimkus			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address PO Box 661			07 22 2013			
City	State Zip Code					
Collinsville	IL 62234		Transaction ID : B458907			
Purpose of Disbursement						
Contribution		011	Amount of Each Disbursement this Period			
Candidate Name		Category/	5000.00			
John M Shimkus  Office Sought:	ment For: 2014	Туре	3000.00			
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President	Other (specify)					
State: IL District: 15	, , , , , , , , , , , , , , , , , , ,					
Full Name (Last, First, Middle Initial)						
B. John S Fund			Date of Disbursement			
Martina Addison = = =			M M / D D / Y Y Y Y			
Mailing Address PO Box 853			08 26 2013			
City	State Zip Code					
Edwardsville	IL 62025		Transaction ID : B471425			
Purpose of Disbursement Contribution						
Candidate Name		011	Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	5000.00			
Office Sought: House Disburse	ment For: 2013	туре				
Senate	Primary General					
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Full Name (Last, First, Middle Initial)			Data of Dishursonmont			
C. Pompeo for Congress Inc.			Date of Disbursement			
Mailing Address PO Box 780146			09 16 2013			
City	State Zip Code		Transaction ID : B472728			
Wichita Purpose of Disbursement	KS 67212					
Contribution		011	Assessed of Early Disharm and this Bosis d			
Candidate Name			Amount of Each Disbursement this Period			
Michael R Pompeo		Category/ Type	4000.00			
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IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			k only	ly one)					7.00		
		Detailed Summary Page			21b 27	22 28a	X	23 28b	_	24 28c	25 29		26 30b
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or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	nems may not be sold or us ne and address of any politi	sea by cal cor	any nmiti	persor tee to	solicit co	purp ntrib	utions	or so s froi	m such	comm	ution ittee.	5
$\setminus$	NAME OF COMMITTEE (In Full)												
$  \rangle$	International Academy of Compour	nding Pharmacists I	PAC	(C	OMP	PAC	)						
$\angle$	•												
Δ	Full Name (Last, First, Middle Initial)					Date o	f Die	hurse	emer	nt			
	Pompeo for Congress Inc.					M M	_	D			YY	II Y	
	Mailing Address PO Box 780146					09	]		6	Ĺ.	2013		
	City	State Zin Code											
	City S Wichita	State Zip Code KS 67212				Trans	sacti	on ID	: B4	472729			
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		nent For: 2014 Primary											
	President	Other (specify)											
	State: KS District: 04	· · · · · · · · · · · · · · · · · · ·											
_	Full Name (Last, First, Middle Initial)												
В.	Guthrie for Congress					Date o	f Dis	burse	emer	nt			
	Mailing Address PO Box 9639					м = м 07	1	D	22	/ Y	2013	Y	
	Maining Address PO DOX 3033					UI			-		2013		
	•	State Zip Code				Trans	sacti	on ID	) : R	458908			
	Bowling Green Purpose of Disbursement	KY 42102				Hall	Javil	J ID	. ن	.00000			
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	Candidate Name			egor	v/			,51		. 23(	-	-	т.
	Brett Guthrie			ype	у,			7		7	25	00.00	
		nent For: 2014											
		Primary General											
	President State: KY District: 02	Other (specify) ▼											
_	Full Name (Last, First, Middle Initial)				_								
C.	Guthrie for Congress					Date o	f Dis	burse	emer	nt			
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	Mailing Address PO Box 9639					07		2	2	L	2013		
	City	State Zip Code											
	Bowling Green	KY 42102				Trans	sacti	on ID	) : B4	458910			
	Purpose of Disbursement Contribution												
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		ment For: 2014		,,,,				7		7			-
		Primary Seneral											
	President	Other (specify) ▼											
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			Summary Page		22 28a	23 28b	24 28c	25 29	26 30b
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or	for commercial purposes, other than using the nam	e and add	lress of any politic	cal committe	e to solicit co	ntributions from	om such o	ommitte	90.
$\setminus$	NAME OF COMMITTEE (In Full)								
	International Academy of Compour	nding P	harmacists F	PAC (CO	MP PAC)	)			
_	Full Name (Last, First, Middle Initial)				D.t.	( D'alamana			
Α.	Billy Long for Congress					f Disburseme			
	Mailing Address 3246 B East Ridgeview				09	18		2013	Υ
	,	State	Zip Code		Trans	action ID : E	8/72071		
	Spinights a	MO	65804			action ib . L	3472371		
	Purpose of Disbursement Contribution			011	Amoun	t of Each Dis	sbursemer	nt this F	Period
	Candidate Name			Category/				2000	00
	Billy Long			Type		-	7	2000	.00
		nent For: Primary							
		Other (spe	General ecify)						
	State: MO District: 07	(5)	· - J/ •						
	Full Name (Last, First, Middle Initial)								
В.	Friends of Max Baucus					f Disburseme		Y	V
	Mailing Address 122 C Street NW Ste 240				10	31		2013	
	Washington	State DC	Zip Code 20001		Trans	saction ID : E	3449686		
	Purpose of Disbursement Contribution			011	Amoun	t of Each Dis	sbursemer	nt this F	Period
	Candidate Name			Category/	·     -			4500	00
	Max Baucus			Type		-	7	-1500	.00
	X Senate	nent For: Primary Other (spe	General		Voided:	Original che	ck dated 0	3/15/13	<b>,</b>
_	Full Name (Last, First, Middle Initial)								
C.	Friends of Sherrod Brown				Date of	f Disburseme			
	Mailing Address PO Box 15293				11	21		2013	Y
		State DC	Zip Code 20003		Trans	saction ID : E	3482109		
	Washington Purpose of Disbursement		20003		-				
	Contribution			011	Amoun	t of Each Dis	sbursemer	nt this F	Period
	Candidate Name			Category/	- I			1500	00
	Sherrod Brown	=		Type				1500	.00
	Senate President	nent For: Primary Other (spe	General						
_	State: OH District:								
s	SUBTOTAL of Disbursements This Page (optional)			······	<u> </u>	-	-	2000.	00
Т	TOTAL This Period (last page this line number only)			)	. L.				

S	CHEDULE B (FEC Form 3X)	IEDULE B (FEC Form 3X)			
	EMIZED DISBURSEMENTS	Use separate schedule(s	(check onl	NUMBER: PAGE 38 OF 40 y one)	
• •	LIVIIZED DIODOTIOLIVILIATO	for each category of the Detailed Summary Page	21b	22 🔀 23 24 25 26	
		Detailed Summary Fage	27	28a 28b 28c 29 30b	
	ny information copied from such Reports and Staten				
or	for commercial purposes, other than using the name	ne and address of any politi	cal committee t	o solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$ \rangle$	International Academy of Compour	nding Pharmacists	PAC (COM	IP PAC)	
$\angle$	Full Name (Last, First, Middle Initial)			T	
Α.	Boehner for Speaker			Date of Disbursement	
				M M / D D / Y Y Y Y	
	Mailing Address 320 First Street SE			12 26 2013	
	City	State Zin Code			
	City S Washington	State Zip Code DC 20003		Transaction ID : B484586	
	Purpose of Disbursement	2000		-	
	Contribution		011	Amount of Each Disbursement this Period	
	Candidate Name		Category/	5000.00	
	0(0		Type	5000.00	
		nent For: 2013 Primary General			
		Primary General Other (specify) ▼			
	State: District:	Not Applicab	le		
	Full Name (Last, First, Middle Initial)				
В.		C.		Date of Disbursement	
				M = M / D = D / Y = Y = Y	
	Mailing Address PO Box 3750			07 22 2013	
	City	State Zip Code			
	Brentwood	TN 37024		Transaction ID : B458905	
	Purpose of Disbursement			-	
	Contribution		011	Amount of Each Disbursement this Period	
	Candidate Name		Category/	5000.00	
	Marsha Blackburn  Office Sought:	nent For: 2014	Туре	333500	
		Primary General			
		Other (specify)			
	State: TN District: 07	· · · · · · · · · · · · · · · · · · ·			
_	Full Name (Last, First, Middle Initial)				
C.	Alexander for Senate 2014 Inc			Date of Disbursement	
	Matter Address Agency			M M / D D / Y Y Y Y	
	Mailing Address 1015 Stonebridge Park Drive			09 26 2013	
	City	State Zip Code			
	Franklin	TN 37069		Transaction ID : B474455	
	Purpose of Disbursement Contribution				
	Candidate Name		011	Amount of Each Disbursement this Period	
	Lamar Alexander		Category/ Type	2000.00	
		nent For: 2014	rype		
		Primary Seneral			
		Other (specify) ▼			
	State: TN District:				
S	SUBTOTAL of Disbursements This Page (optional)		·····	12000.00	
Ţ	OTAL This Paried (last page this line number and )				
1 1	<b>OTAL</b> This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 39 OF 40	
ITEMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary Pa	le(s) (check only		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	nents may not be sold one and address of any page 2	or used by any pers	son for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
International Academy of Compour	nding Pharmacis	ts PAC (COM	P PAC)	
Full Name (Last, First, Middle Initial)				
A. Chuck Fleischmann for Congress (	Committee		Date of Disbursement	
Mailing Address P.O. Box 11091			09 26 2013	
	State Zip Code		Transaction ID : B474454	
Chattanooga Purpose of Disbursement	TN 37401			
Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Chuck Fleischmann  Office Sought:   House   Disbursen	ant For Old 4	Туре		
Senate President	nent For: 2014  Primary General Genera	ral		
State: TN District: 03				
Full Name (Last, First, Middle Initial)				
3. Michael Burgess for Congress			Date of Disbursement	
Mailing Address PO Box 2334			09 10 2013	
City	State Zip Code		Tuesday ID D470440	
Denton	TX 76202		Transaction ID : B472119	
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	2500.00	
Michael C. Burgess		Type	2500.00	
Senate President	nent For: 2014  Primary Gener  Other (specify)	ral		
State: TX District: 26  Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement	Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought:    House   Disbursen	nent For: Primary Gener Other (specify) ▼			
oldio. District.				
SUBTOTAL of Disbursements This Page (optional)		······	3500.00	
TOTAL This Period (last page this line number only)			46000.00	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 40 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE NUMBER:  (check only one)	
II LIVIIZED DISBURSEIVIEN IS	for each category of the	21b	22 23 24 25 26
	Detailed Summary Page	27	X 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	ents may not be sold or used	by any perso	
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
International Academy of Compoun	ding Pharmacists PA	AC (COMF	P PAC)
/omational / loadonly of compound	ang mamadoloto 17	.5 (55)	,
Full Name (Last, First, Middle Initial)			
A. Joe Grasela			Date of Disbursement
			M M / D D / Y M Y M Y
Mailing Address 4638 Riverstone Blvd, Ste 100			10 29 2013
Cit.	toto 7:- Oct		
,	tate Zip Code TX 77459		Transaction ID : B475435
Missouri City Purpose of Disbursement	1/409		
Employee Refund		010	Amount of Each Disbursement this Period
Candidate Name			
		Category/ Type	2000.00
Office Sought: House Disbursem	ent For: 2013		,
	Primary General		
President	Other (specify) ▼		
State: District:	Not Applicable		
Full Name (Last, First, Middle Initial)			
В.			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address			
City	tate Zip Code		
City	iai <del>o</del> Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name Category/		Category/	
		Type	
Office Sought: House Disbursem	ent For:		
	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			Date of Dishurasment
C.			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
aming / taal 500			
City	tate Zip Code		
Purpose of Disbursement			
Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disbursem	ont For:	Туре	
	ent For: Primary General		
	Other (specify)		
State: District:	other (openly)		
Side. Siderot.			
SUBTOTAL of Disbursements This Page (optional)			2000.00
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TOTAL This Period (last page this line number only).			2000.00