

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines
Pharmaceutical Research & Manufacturers of America Better Government Committee

ADDRESS (number and street) 950 F Street, NW Suite 300 Washington DC 20004
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00021972
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff
(d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 11 25 2008 through 12 31 2008

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 Anne Holmes

Signature of Treasurer Electronically Filed by Anne Holmes Date 01 29 2009

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 (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Pharmaceutical Research & Manufacturers of America Better Government Committee

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		32706.46
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	37520.73									
(c) Total Receipts (from Line 19) .....	9987.68	119810.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	47508.41	152517.15								
7. Total Disbursements (from Line 31) .....	11003.01	116011.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36505.40	36505.40								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

Pharmaceutical Research & Manufacturers of America Better Government Committee

Report Covering the Period: From: 

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	9987.68	86102.38
(i) Itemized (use Schedule A) .....	0.00	2708.31
(ii) Unitemized .....	9987.68	88810.69
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	31000.00
(c) Other Political Committees (such as PACs) .....	9987.68	119810.69
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9987.68	119810.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9987.68	119810.69

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	116000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	3.01	11.75
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11003.01	116011.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11003.01	116011.75

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	9987.68	119810.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9987.68	119810.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 22  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial)  
Daniel Durham

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1438

FEC ID number of contributing federal political committee. **C**

Name of Employer PhRMA Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt: 12 / 31 / 2008  
**Transaction ID:** PR1100334616044  
 Amount of Each Receipt this Period: 312.00  
 P/R Deduction (\$104.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Hallie Maranchick

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer PhRMA Occupation Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2599.92

Date of Receipt: 12 / 31 / 2008  
**Transaction ID:** PR1275760016044  
 Amount of Each Receipt this Period: 324.99  
 P/R Deduction (\$108.33 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Alan Goldhammer

Mailing Address 950 F Street, NW Suite 300

City Washington State DC Zip Code 20004-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer PhRMA Occupation Associate VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 12 / 31 / 2008  
**Transaction ID:** PR1338083316044  
 Amount of Each Receipt this Period: 195.00  
 P/R Deduction (\$65.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 831.99

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharon Marshall		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW Suite 300		<b>Transaction ID:</b> PR1338083616044
	City Washington	State DC	Zip Code 20004-1404
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 74.76
	Name of Employer PhRMA	Occupation Board Materials Manager	P/R Deduction (\$24.92 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Tara Ryan		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW Suite 300		<b>Transaction ID:</b> PR1338084316044
	City Washington	State DC	Zip Code 20004-1404
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 129.99
	Name of Employer PhRMA	Occupation Director	P/R Deduction (\$43.33 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher Singer		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW Suite 300		<b>Transaction ID:</b> PR1338084516044
	City Washington	State DC	Zip Code 20004-1404
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 624.00
	Name of Employer PhRMA	Occupation Exec VP & COO	P/R Deduction (\$208.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>828.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kevin Walker</p> <p>Mailing Address 950 F Street, NW Suite 300</p> <p>City State Zip Code <u>Washington</u> DC 20004-1404</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation PhRMA VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">4992.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 2 / 3 1 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> PR1338084616044</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">624.00</span></p> <p>P/R Deduction (\$208.00 Semi-Monthly)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Page</p> <p>Mailing Address 950 F Street, NW Suite 300</p> <p>City State Zip Code <u>Washington</u> DC 20004-1404</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation PhRMA Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1300.08</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 2 / 3 1 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> PR1338085616044</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">162.51</span></p> <p>P/R Deduction (\$54.17 Semi-Monthly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Clement Cypra</p> <p>Mailing Address 950 F Street, NW Suite 300</p> <p>City State Zip Code <u>Washington</u> DC 20004-1404</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation PhRMA Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1195.92</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 2 / 3 1 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> PR1342353716044</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">149.49</span></p> <p>P/R Deduction (\$49.83 Semi-Monthly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">936.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 22  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial)  
Erin Ravelette

Mailing Address 950 F Street, NW  
Suite 300

City Washington State DC Zip Code 20004-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer PhRMA Occupation Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 573.16

Date of Receipt 12 / 31 / 2008

**Transaction ID:** PR1360289016044

Amount of Each Receipt this Period 74.76

P/R Deduction (\$24.92 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Matthew Sulkala

Mailing Address 950 F Street, NW  
Suite 300

City Washington State DC Zip Code 20004-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer PhRMA Occupation Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 12 / 31 / 2008

**Transaction ID:** PR1387142416044

Amount of Each Receipt this Period 300.00

P/R Deduction (\$100.00 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Hardaway

Mailing Address 950 F Street, NW  
Suite 300

City Washington State DC Zip Code 20004-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer PhRMA Occupation Regional Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2008

**Transaction ID:** PR1407527616044

Amount of Each Receipt this Period 75.00

P/R Deduction (\$25.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 449.76

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Valerie Jewett		Date of Receipt
	Mailing Address 950 F Street, NW Suite 300		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1416900916044
Name of Employer PhRMA		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1693.92"/>	<input type="text" value="211.74"/>
			P/R Deduction (\$70.58 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Woody		Date of Receipt
	Mailing Address 950 F Street, NW Suite 300		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1485193016044
Name of Employer PhRMA		Occupation Director, Federal Affairs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	<input type="text" value="150.00"/>
			P/R Deduction (\$50.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeff Woodhouse		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1521550916044
Name of Employer PhRMA		Occupation Regional Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1200.00"/>	<input type="text" value="150.00"/>
			P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="511.74"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial)

Chris Badgley

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1438

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHRMA

Occupation  
VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

925.20

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR180532016044

Amount of Each Receipt this Period

115.65

P/R Deduction (\$38.55 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Janice Faiks

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1438

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHRMA

Occupation  
VP, Govt Affairs & Law

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2599.92

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR180533016044

Amount of Each Receipt this Period

324.99

P/R Deduction (\$108.33 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Mark Grayson

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1438

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHRMA

Occupation  
Asst. VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

259.92

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 8

Transaction ID: PR180533216044

Amount of Each Receipt this Period

32.49

P/R Deduction (\$10.83 Semi-Monthly)

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

473.13

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Anne Holmes	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR180533616044
	City State Zip Code Washington DC 20004-1438	Amount of Each Receipt this Period 81.24
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$27.08 Semi-Monthly)
Name of Employer PHRMA	Occupation Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 649.92	

<b>B.</b>	Full Name (Last, First, Middle Initial) Merrill Jacobs	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR180533816044
	City State Zip Code Washington DC 20004-1438	Amount of Each Receipt this Period 324.99
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$108.33 Semi-Monthly)
Name of Employer PHRMA	Occupation Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2599.92	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Lucas	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR180534216044
	City State Zip Code Washington DC 20004-1438	Amount of Each Receipt this Period 32.49
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.83 Semi-Monthly)
Name of Employer PHRMA	Occupation Assoc. VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.92	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>438.72</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial)

Kurt Malmgren

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1438

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHRMA

Occupation  
VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2599.92

Date of Receipt

MM / DD / YYYY  
12 / 31 / 2008

Transaction ID: PR180534416044

Amount of Each Receipt this Period

324.99

P/R Deduction (\$108.33 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Kimberly Martin

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1438

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHRMA

Occupation  
Director

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
12 / 31 / 2008

Transaction ID: PR180534516044

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Hugh Metheny

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1438

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PHRMA

Occupation  
Director

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

MM / DD / YYYY  
12 / 31 / 2008

Transaction ID: PR180534616044

Amount of Each Receipt this Period

375.00

P/R Deduction (\$125.00 Semi-Monthly)

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

**737.49**

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas Moore		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR180534816044
Name of Employer PHRMA		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3123.75	624.75
			P/R Deduction (\$208.25 Bi-Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Michelle Nyman		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR180534916044
Name of Employer PHRMA		Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 259.92	32.49
			P/R Deduction (\$10.83 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) John O'Connor		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR180535016044
Name of Employer PHRMA		Occupation Regional Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 599.76	74.97
			P/R Deduction (\$24.99 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>732.21</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Marjorie Powell		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PHRMA		Occupation Asst. General Counsel	<b>Transaction ID:</b> PR180535616044
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="259.92"/>	Amount of Each Receipt this Period <input type="text" value="32.49"/>
			P/R Deduction (\$10.83 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Smith		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PHRMA		Occupation Director	<b>Transaction ID:</b> PR180535916044
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2496.00"/>	Amount of Each Receipt this Period <input type="text" value="312.00"/>
			P/R Deduction (\$104.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey Trehitt		Date of Receipt
	Mailing Address 950 F Street, NW		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20004-1438
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PHRMA		Occupation Asst. VP	<b>Transaction ID:</b> PR180536316044
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="324.96"/>	Amount of Each Receipt this Period <input type="text" value="40.62"/>
			P/R Deduction (\$13.54 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="385.11"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 22  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Derrick White	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR180536716044
	City State Zip Code Washington DC 20004-1438	Amount of Each Receipt this Period 519.99
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$173.33 Semi-Monthly)
Name of Employer PHRMA	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4159.92	

<b>B.</b>	Full Name (Last, First, Middle Initial) Edward Belkin	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, N.W.	<b>Transaction ID:</b> PR267310216044
	City State Zip Code Washington DC 20004-1404	Amount of Each Receipt this Period 125.01
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$41.67 Semi-Monthly)
Name of Employer PhRMA	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.08	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bryant Hall	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, N.W.	<b>Transaction ID:</b> PR377480516044
	City State Zip Code Washington DC 20004-1404	Amount of Each Receipt this Period 532.35
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$177.45 Semi-Monthly)
Name of Employer PhRMA	Occupation Sr. Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.90	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1177.35</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert Filippone

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1404

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PhRMA

Occupation  
Director

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2050.08

Date of Receipt

MM / DD / YYYY  
12 / 31 / 2008

Transaction ID: PR533051116044

Amount of Each Receipt this Period

256.26

P/R Deduction (\$85.42 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Patrick Stone

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1404

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PhRMA

Occupation  
Manager

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
12 / 31 / 2008

Transaction ID: PR533051216044

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Semi-Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Steven Tilton

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004-1404

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
PhRMA

Occupation  
Director

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

4608.00

Date of Receipt

MM / DD / YYYY  
12 / 31 / 2008

Transaction ID: PR533051516044

Amount of Each Receipt this Period

576.00

P/R Deduction (\$192.00 Semi-Monthly)

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

869.76

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Laurel Dodson Jackson	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR636282016044
	City State Zip Code Washington DC 20004-1404	Amount of Each Receipt this Period 32.49
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$10.83 Semi-Monthly)
Name of Employer PhRMA	Occupation Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.92	

<b>B.</b>	Full Name (Last, First, Middle Initial) Heather Keiser Strawn	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR737804916044
	City State Zip Code Washington DC 20004-1404	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$75.00 Semi-Monthly)
Name of Employer PhRMA	Occupation Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian Nagle	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 950 F Street, NW	<b>Transaction ID:</b> PR743030016044
	City State Zip Code Washington DC 20004-1404	Amount of Each Receipt this Period 324.99
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$108.33 Semi-Monthly)
Name of Employer PhRMA	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2599.92	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>582.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 22						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial) Lori Reilly		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 950 F Street, NW		<b>Transaction ID:</b> PR917374916044
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 243.75
Name of Employer PhRMA	Occupation Director	P/R Deduction (\$81.25 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1950.00	

**B.**

Full Name (Last, First, Middle Initial) Mimi Simoneaux		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 950 F Street, NW		<b>Transaction ID:</b> PR917375116044
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 789.44
Name of Employer PhRMA	Occupation Vice President	P/R Deduction (\$263.16 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1033.19</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>9987.68</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pharmaceutical Research & Manufacturers of America Better Government Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bright For Congress.Com		Transaction ID: 27504779	
	Mailing Address P.O.Box 2106		Date of Disbursement 12 / 15 / 2008	
	City Montgomery	State AL	Zip Code 36102	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement		011 Category/ Type	
Candidate Name Mr. Bobby Bright				
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: AL	District: 02	2008 General Debt		
<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Kratovil For Congress		Transaction ID: 27504780	
	Mailing Address P.O. Box 518		Date of Disbursement 12 / 15 / 2008	
	City Stevensville	State MD	Zip Code 21666	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement		011 Category/ Type	
Candidate Name Mr. Frank Kratovil				
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: MD	District: 01	2008 General Debt		
<b>C.</b>	Full Name (Last, First, Middle Initial) Minnick For Congress		Transaction ID: 27504781	
	Mailing Address 8150 W Emerald Street Suite 170		Date of Disbursement 12 / 15 / 2008	
	City Boise	State ID	Zip Code 83704	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement		011 Category/ Type	
Candidate Name Mr. Walter Minnick				
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: ID	District: 01	2008 General Debt		

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pharmaceutical Research & Manufacturers of America Better Government Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chambliss For Senate</p> <p>Mailing Address P.O. Box 4084</p> <p>City Macon State GA Zip Code 31208</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Saxby Chambliss</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 08</p>	<p><b>Transaction ID:</b> 27504782 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0	8	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	0	8													
2000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mike Crapo For Us Senate</p> <p>Mailing Address PO Box 1948</p> <p>City Boise State ID Zip Code 83701</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Sen. Mike Crapo</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District:</p>	<p><b>Transaction ID:</b> 27504784 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0	8	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	0	8													
1500.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) People For Patty Murray U S Senate Campaign</p> <p>Mailing Address PO Box 3662</p> <p>City Seattle State WA Zip Code 98199</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Sen. Patty Murray</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District:</p>	<p><b>Transaction ID:</b> 27504788 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0	8	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	0	8													
2500.00																						

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

**6000.00**

**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)

PAGE 22 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pharmaceutical Research & Manufacturers of America Better Government Committee

**A.**

Full Name (Last, First, Middle Initial)  
Committee To Elect Alan Grayson

Mailing Address 8419 Oak Park Road

City Orlando State FL Zip Code 32819

Purpose of Disbursement

010  
 011  
Category/  
Type

Candidate Name  
Mr. Alan Grayson

Office Sought:  House  
 Senate  
 President  
State: FL District: 08

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
2008 General Debt

Transaction ID: 27504796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
Parker Griffith for Congress

Mailing Address P.O. Box 2916

City Huntsville State AL Zip Code 35804

Purpose of Disbursement

010  
 011  
Category/  
Type

Candidate Name  
Parker Griffith

Office Sought:  House  
 Senate  
 President  
State: AL District: 05

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
2008 General Debt

Transaction ID: 27504800

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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