



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Pharmaceutical Research & Manufacturers of America Better Government Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="80624.87"/>	<input type="text" value="80624.87"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="50022.56"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19058.51"/>	<input type="text" value="123358.16"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="69081.07"/>	<input type="text" value="203983.03"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3500.00"/>	<input type="text" value="138401.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65581.07"/>	<input type="text" value="65581.07"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13652.18	90277.19
(ii) Unitemized .....	406.33	5580.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14058.51	95858.16
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	19058.51	120858.16
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	2500.00
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	19058.51	123358.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19058.51	123358.16

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	138000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	401.96
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3500.00	138401.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3500.00	138401.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	19058.51	120858.16
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19058.51	120858.16
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: (check only one)	PAGE 6 OF 28
<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

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. Kendra Martello**  
 Full Name (Last, First, Middle Initial)  
 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 General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2014  
**Transaction ID : 62898498**  
 Amount of Each Receipt this Period  
 750.00

**B. Tara Ryan**  
 Full Name (Last, First, Middle Initial)  
 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 Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 953.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2014  
**Transaction ID : PR1338084337457**  
 Amount of Each Receipt this Period  
 129.99  
 P/R Deduction (\$43.33 Semi-Monthly)

**c. Matthew Sulkala**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 4581.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2014  
**Transaction ID : PR1387142437457**  
 Amount of Each Receipt this Period  
 624.75  
 P/R Deduction (\$208.25 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1504.74
<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: (check only one)	PAGE 7 OF 28
<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. Thomas Hardaway**  
Full Name (Last, First, Middle Initial)

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 ▼  
550.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR1407527637457**

Amount of Each Receipt this Period  
75.00

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

**B. Jeff Woodhouse**  
Full Name (Last, First, Middle Initial)

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 Regional Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR1521550937457**

Amount of Each Receipt this Period  
150.00

P/R Deduction (\$50.00 Semi-Monthly)

**C. Sandra J. Dickerson**  
Full Name (Last, First, Middle Initial)

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 Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR1727896237457**

Amount of Each Receipt this Period  
150.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<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: (check only one)	PAGE 8 OF 28
	<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**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey A. Bond</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street, NW			<b>Transaction ID : PR1759644937457</b>
City Washington	State DC	Zip Code 20004-1438	Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA		P/R Deduction (\$75.00 Semi-Monthly)
	Occupation SVP, State Govt Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00		

Full Name (Last, First, Middle Initial) <b>B. Andrew Corsig</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street NW			<b>Transaction ID : PR180532537457</b>
City Washington	State DC	Zip Code 20004-1438	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C	Name of Employer PHRMA		P/R Deduction (\$50.00 Semi-Monthly)
	Occupation Deputy VP, State Govt Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. Mark Grayson</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street, NW			<b>Transaction ID : PR180533237457</b>
City Washington	State DC	Zip Code 20004-1438	Amount of Each Receipt this Period 32.49
FEC ID number of contributing federal political committee. C	Name of Employer PHRMA		P/R Deduction (\$10.83 Semi-Monthly)
	Occupation Asst. VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.26		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	287.49
<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: (check only one)	PAGE 9 OF 28
<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. Anne Holmes**  
Full Name (Last, First, Middle Initial)

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 Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR180533637457**

Amount of Each Receipt this Period  
150.00

P/R Deduction (\$50.00 Semi-Monthly)

**B. Merrill Jacobs**  
Full Name (Last, First, Middle Initial)

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 Regional Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2383.26

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR180533837457**

Amount of Each Receipt this Period  
324.99

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

**C. Kimberly Martin**  
Full Name (Last, First, Middle Initial)

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 ▼  
2288.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR180534537457**

Amount of Each Receipt this Period  
312.00

P/R Deduction (\$104.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	786.99
<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: (check only one)	PAGE 10 OF 28
<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. Michelle Nyman**  
Full Name (Last, First, Middle Initial)  
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 ▼ 238.26

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR180534937457**  
Amount of Each Receipt this Period 32.49  
P/R Deduction (\$10.83 Semi-Monthly)

**B. John O'Connor**  
Full Name (Last, First, Middle Initial)  
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 Regional Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 549.78

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR180535037457**  
Amount of Each Receipt this Period 74.97  
P/R Deduction (\$24.99 Semi-Monthly)

**C. Del Persinger**  
Full Name (Last, First, Middle Initial)  
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 EVP & CFO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2915.50

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR180535437457**  
Amount of Each Receipt this Period 624.75  
P/R Deduction (\$208.25 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 732.21  
**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 11 OF 28
<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. John J. Castellani**  
 Full Name (Last, First, Middle Initial)  
 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 President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4581.50

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR1828048037457**  
 Amount of Each Receipt this Period 624.75  
 P/R Deduction (\$208.25 Semi-Monthly)

**B. Chip Davis**  
 Full Name (Last, First, Middle Initial)  
 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 EVP, Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4581.50

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR1849830237457**  
 Amount of Each Receipt this Period 624.75  
 P/R Deduction (\$208.25 Semi-Monthly)

**C. Jenny Wolff Cline**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 1100.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR1856317237457**  
 Amount of Each Receipt this Period 150.00  
 P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1399.50
<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: (check only one)	PAGE 12 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Naomi Morales**  
 Full Name (Last, First, Middle Initial)  
 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, HR & Admin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR1856318437457**  
 Amount of Each Receipt this Period 150.00  
 P/R Deduction (\$200.00 Semi-Monthly)

**B. Josephine Martin**  
 Full Name (Last, First, Middle Initial)  
 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 EVP, Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4950.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR1872660837457**  
 Amount of Each Receipt this Period 675.00  
 P/R Deduction (\$225.00 Semi-Monthly)

**C. Kimberly Love**  
 Full Name (Last, First, Middle Initial)  
 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 Sr Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR1884612437457**  
 Amount of Each Receipt this Period 75.00  
 P/R Deduction (\$104.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<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: (check only one)	PAGE 13 OF 28
<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**

Full Name (Last, First, Middle Initial) <b>A. Jennifer Romans</b>		Date of Receipt
Mailing Address 950 F Street, NW		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20004-1438
FEC ID number of contributing federal political committee.		<b>Transaction ID : PR1902212737457</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="312.00"/>
Name of Employer	Occupation	P/R Deduction (\$104.00 Semi-Monthly)
PhRMA	Sr. Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2288.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Cara Moon</b>		Date of Receipt
Mailing Address 950 F Street, NW Suite 300		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20004-1440
FEC ID number of contributing federal political committee.		<b>Transaction ID : PR1923874737457</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="225.00"/>
Name of Employer	Occupation	P/R Deduction (\$75.00 Semi-Monthly)
PhRMA	Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1650.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Scott LaGanga</b>		Date of Receipt
Mailing Address 950 F Street, NW		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20004-1438
FEC ID number of contributing federal political committee.		<b>Transaction ID : PR1942076637457</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	P/R Deduction (\$50.00 Semi-Monthly)
PhRMA	Deputy VP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1100.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="687.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 14 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) <b>A. Jay Taylor</b>			Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1952911337457</b>
Mailing Address 950 F Street, NW			Amount of Each Receipt this Period 150.00
City Washington	State DC	Zip Code 20004-1438	P/R Deduction (\$50.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer PhRMA	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) <b>B. Kristy Lupejkis</b>			Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1960864337457</b>
Mailing Address 950 F Street, NW			Amount of Each Receipt this Period 30.00
City Washington	State DC	Zip Code 20004-1438	P/R Deduction (\$10.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer PhRMA	Occupation Mgr., Policy & Research		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>C. Lucia Cretella Lynch</b>			Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1965270637457</b>
Mailing Address 950 F Street, NW			Amount of Each Receipt this Period 150.00
City Washington	State DC	Zip Code 20004-1438	P/R Deduction (\$50.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer PhRMA	Occupation Deputy VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	330.00
<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: (check only one)	PAGE 15 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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**

Full Name (Last, First, Middle Initial) <b>A. Jill Kronisch</b>			Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1965270737457</b>
Mailing Address 950 F Street, NW			Amount of Each Receipt this Period 150.00
City Washington	State DC	Zip Code 20004-1438	P/R Deduction (\$50.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
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 ▼ 1100.00		

Full Name (Last, First, Middle Initial) <b>B. Christian Clymer</b>			Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1965270837457</b>
Mailing Address 950 F Street, NW			Amount of Each Receipt this Period 150.00
City Washington	State DC	Zip Code 20004-1438	P/R Deduction (\$50.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer PhRMA	Occupation Deputy VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) <b>C. Neassa Kaelan Hollon</b>			Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1965270937457</b>
Mailing Address 950 F Street, NW			Amount of Each Receipt this Period 50.00
City Washington	State DC	Zip Code 20004-1438	P/R Deduction (\$25.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer PhRMA	Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<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: (check only one)	PAGE 16 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Alicia Subasinghe**  
Full Name (Last, First, Middle Initial)

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 Sr. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2014

**Transaction ID : PR1966944037457**

Amount of Each Receipt this Period  
 30.00

P/R Deduction (\$10.00 Semi-Monthly)

**B. Phil Levis**  
Full Name (Last, First, Middle Initial)

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2014

**Transaction ID : PR1975068937457**

Amount of Each Receipt this Period  
 15.00

P/R Deduction (\$5.00 Semi-Monthly)

**C. Elizabeth A. Lane**  
Full Name (Last, First, Middle Initial)

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 HR Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2014

**Transaction ID : PR1978739437457**

Amount of Each Receipt this Period  
 150.00

P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	195.00
<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: (check only one)	PAGE 17 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Leslie Wood**  
Full Name (Last, First, Middle Initial)  
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 Sr. Director, State Advocacy  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **660.00**

Date of Receipt **11 / 24 / 2014**  
**Transaction ID : PR1978739537457**  
Amount of Each Receipt this Period **90.00**  
P/R Deduction (\$30.00 Semi-Monthly)

**B. Colleen Maloney**  
Full Name (Last, First, Middle Initial)  
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, Federal Affairs  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1100.00**

Date of Receipt **11 / 24 / 2014**  
**Transaction ID : PR1980251537457**  
Amount of Each Receipt this Period **150.00**  
P/R Deduction (\$50.00 Semi-Monthly)

**C. Kimberly Sidhu**  
Full Name (Last, First, Middle Initial)  
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 Sr Director, Finance  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **330.00**

Date of Receipt **11 / 24 / 2014**  
**Transaction ID : PR1981809537457**  
Amount of Each Receipt this Period **45.00**  
P/R Deduction (\$15.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>285.00</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: (check only one)	PAGE 18 OF 28
	<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. Lori Kendrick**  
Full Name (Last, First, Middle Initial)

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, Board Ops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **11 / 24 / 2014**

**Transaction ID : PR1983560037457**

Amount of Each Receipt this Period **75.00**

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

**B. James 'Mit' Spears**  
Full Name (Last, First, Middle Initial)

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 General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **4581.50**

Date of Receipt **11 / 24 / 2014**

**Transaction ID : PR1983731837457**

Amount of Each Receipt this Period **624.75**

P/R Deduction (\$208.25 Semi-Monthly)

**C. Shannon Graham**  
Full Name (Last, First, Middle Initial)

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 Deputy VP-Federal Advocacy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2288.00**

Date of Receipt **11 / 24 / 2014**

**Transaction ID : PR1985816137457**

Amount of Each Receipt this Period **312.00**

P/R Deduction (\$104.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1011.75</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: (check only one)	PAGE 19 OF 28
<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**

Full Name (Last, First, Middle Initial) <b>A. Christopher Kuzmuk</b>		Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR1991519437457</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 75.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer PhRMA	Occupation Asst VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B. Jocelyn Ulrich</b>		Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR2023737737457</b>
Mailing Address 950 F Street		Amount of Each Receipt this Period 105.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$35.00 Semi-Monthly)
Name of Employer PhRMA	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) <b>C. Nick Shipley</b>		Date of Receipt 11 / 24 / 2014 <b>Transaction ID : PR2028383837457</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 312.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		P/R Deduction (\$104.00 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 ▼ 2288.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	492.00
<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: (check only one)	PAGE 20 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Tracy Napper**  
Full Name (Last, First, Middle Initial)  
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 Sr Mgr, Human Resources  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR2033625037457**  
Amount of Each Receipt this Period 75.00  
P/R Deduction (\$25.00 Semi-Monthly)

**B. Wendy Gregg**  
Full Name (Last, First, Middle Initial)  
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 Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR2033625137457**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Semi-Monthly)

**C. Peter Fotos**  
Full Name (Last, First, Middle Initial)  
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, Fed Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR2039979137457**  
Amount of Each Receipt this Period 150.00  
P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 255.00  
**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 21 OF 28
<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. John P. Tunnell**  
Full Name (Last, First, Middle Initial)  
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 Deputy VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR2047670137457**  
Amount of Each Receipt this Period 150.00  
P/R Deduction (\$50.00 Semi-Monthly)

**B. Carrie Robison**  
Full Name (Last, First, Middle Initial)  
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 Legislative Associate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR2081364337457**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Semi-Monthly)

**C. Sarah Spurgeon**  
Full Name (Last, First, Middle Initial)  
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 General Counsel  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 24 / 2014  
**Transaction ID : PR2105040537457**  
Amount of Each Receipt this Period 30.00  
P/R Deduction (\$10.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 210.00  
**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 22 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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**

Full Name (Last, First, Middle Initial) <b>A. Linda Distlerath</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street NW		<b>Transaction ID : PR2106688637457</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 312.00
Name of Employer PhRMA	Occupation Dep VP, Intl Alliance Dev	P/R Deduction (\$104.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2288.00	

Full Name (Last, First, Middle Initial) <b>B. Jenny Bryant</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street, NW		<b>Transaction ID : PR2108810237457</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 312.00
Name of Employer PhRMA	Occupation Supervisor	P/R Deduction (\$104.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2288.00	

Full Name (Last, First, Middle Initial) <b>C. Michelle Drozd</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street NW		<b>Transaction ID : PR2108810537457</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer PhRMA	Occupation Sr Director	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	774.00
<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: (check only one)	PAGE 23 OF 28
<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. Andrew Hu**  
Full Name (Last, First, Middle Initial)

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 Sr Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 24 / 2014**

**Transaction ID : PR2122788237457**

Amount of Each Receipt this Period  
**60.00**

P/R Deduction (\$20.00 Semi-Monthly)

**B. Stephanie Fischer**  
Full Name (Last, First, Middle Initial)

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 ▼ **660.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 24 / 2014**

**Transaction ID : PR2135011637457**

Amount of Each Receipt this Period  
**90.00**

P/R Deduction (\$30.00 Semi-Monthly)

**C. William W. Chin**  
Full Name (Last, First, Middle Initial)

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 Executive VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4581.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 24 / 2014**

**Transaction ID : PR2139726937457**

Amount of Each Receipt this Period  
**624.75**

P/R Deduction (\$208.25 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **774.75**

**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 24 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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**

Full Name (Last, First, Middle Initial) <b>A. Linda Carroll Shern</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street NW		<b>Transaction ID : PR2139727037457</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer PhRMA	Occupation Deputy VP	P/R Deduction (\$20.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) <b>B. Timothy McClung</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street, NW		<b>Transaction ID : PR2153712837457</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer PhRMA	Occupation Director, Policy	P/R Deduction (\$10.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. Ryan Garofalo</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 950 F Street NW		<b>Transaction ID : PR2161207937457</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
Name of Employer PhRMA	Occupation Sr Manager	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<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: (check only one)	PAGE 25 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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. Charles M Clapton**  
Full Name (Last, First, Middle Initial)

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 SVP, Federal Advocacy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **3540.25**

Date of Receipt **11 / 24 / 2014**

**Transaction ID : PR2168909837457**

Amount of Each Receipt this Period **624.75**

P/R Deduction (\$208.25 Semi-Monthly)

**B. Robert Zirkelbach**  
Full Name (Last, First, Middle Initial)

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 Sr VP, Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2707.25**

Date of Receipt **11 / 24 / 2014**

**Transaction ID : PR2199024637457**

Amount of Each Receipt this Period **624.75**

P/R Deduction (\$208.25 Semi-Monthly)

**C. Emily Griffin**  
Full Name (Last, First, Middle Initial)

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 Sr Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 24 / 2014**

**Transaction ID : PR2203171337457**

Amount of Each Receipt this Period **75.00**

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

**SUBTOTAL** of Receipts This Page (optional)..... **1324.50**

**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 26 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Holly Campbell**  
Full Name (Last, First, Middle Initial)

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, Communications

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR2250049737457**

Amount of Each Receipt this Period 150.00

P/R Deduction (\$50.00 Semi-Monthly)

**B. Patrick Stone**  
Full Name (Last, First, Middle Initial)

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 ▼ 275.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR533051237457**

Amount of Each Receipt this Period 37.50

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

**C. Lori Reilly**  
Full Name (Last, First, Middle Initial)

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 ▼ 4373.00

Date of Receipt  
11 / 24 / 2014  
**Transaction ID : PR917374937457**

Amount of Each Receipt this Period 624.75

P/R Deduction (\$208.25 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	812.25
<b>TOTAL</b> This Period (last page this line number only).....▶	13652.18

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

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

FOR LINE NUMBER: PAGE 27 OF 28  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Eli Lilly and Company PAC**

Mailing Address 555 12th Street, N.W.  
Suite 650

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2014  
**Transaction ID : 62936945**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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**

Full Name (Last, First, Middle Initial)

**A. Motor City PAC**

Mailing Address 220 I Street NE  
Suite 250

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 17 / 2014

**Transaction ID : 62897156**

Amount of Each Disbursement this Period

1000.00

Federal Contribution

Full Name (Last, First, Middle Initial)

**B. Thom Tillis Committee**

Mailing Address PO Box 97396

City Raleigh State NC Zip Code 27624

Purpose of Disbursement  
2014 General Debt Retirement

Candidate Name

**Thom Tillis**

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
2014 General Debt

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2014

**Transaction ID : 62909458**

Amount of Each Disbursement this Period

2500.00

2014 General Debt Retirement

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

3500.00

3500.00