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2010 JUL 22 AM 11: 42

FEC FORM 1

STATEMENT OF ORGANIZATION

	(See instructions)	Office use only
NAME OF COMMITTEE (in		ole: If typying, type lines 12FE4M5
Health Industr	y Distributors Association Political Action	Committee
سسسا		
ADDRESS (number and s	310 Montgomery Street	
(Check if address		
is changed)	Alexandria	VA 22314
	CITY	STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail addres	ss)
(Check if address is changed)	fishburn@hida.org	
. a changed)	بيبييي	<u></u>
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	·
(Check if address	To Be Determined	
is changed)		
•		
2. DATE : 0.7	20 2010	
3. FEC IDENTIFICA	TION NUMBER C: To Be	Determined
4. IS THIS STATEM	ENT X NEW(N) OR	AMENDED (A)
I certify that I have exami	ned this Statement and to the best of my knowledge and b	pelief it is true, correct and complete
Type or Print Name of	Treasurer Vincent Tallman	
Signature of Treasure	Wincer Tallma	Date 07 21 2010
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the p	person signing this Statement to the penalties of 2 U.S.C. §437g. JLD BE REPORTED WITHIN 10 DAYS
Office Use Only	Fer To	or further Information contact: aderal Election Commission oil Free 800-424-9530 (Revised 02/2009) ocal 202-694-1100

	FEG	Form 1 (Revised 02/2009)	Page 2	
	TYPE OF C	COMMITTEE (Check One)		_
,	Candidate	Committee:		
,	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)		
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	ne candidate	
	Name of Candidate	 -	<u> </u>	Ĺ.
	Candidate Party Affilia	Office : House Senate President	State	.41 ***-
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District :	4
	Name of Candidate	<u> </u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	l
	Party Com	mittee:		
	(d)		emocratic, epublican,etc.) Party	y.
	Political A	ction Committee (PAC):		
	(e) X	, and the state of	d organization is a:	
	, -	to the second control of the second control	Organization	
		Membership Organization X Trade Association Coop	erative	
		X In addition, this committee is a Lobbyist/Registrant PAC.		
	(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	i fund or party	
		In addition, this committee is a Lobbyist/Registrant PAC.		
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
	oint Fundr	raising Representative:		_
	(9)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political	
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political	
	Cor	mmittees Participating in Joint Fundraiser		
		1. FEC ID number C	and the same of the same of	
		2. FEC ID number C		
		3. FEC ID number C		
		4. FEC ID number		

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Write or Type Committee N	ame		
Health Industry Dis	tributors Association Political Action Commi	ttee (HIDA PAC)	
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundra	ising Representative, or Lead	ership PAC Sponsor
Health Industry Dist	ributors Association	<u> </u>	<u> </u>
<u>. l. l.</u>	<u> </u>	<u> </u>	
Mailing Address	310 Montgomery Street		<u> </u>
	1		
	Alexandria	· · · · · · · · · · · · · · · · · · ·	, 22314] _ [, ,],
	CITY▲	STATE A	ZIP CODE
Relationship:			
X Connected Organia	zation Saffiliated Committee . Joint Fu	undraising Representative	Leadership PAC Sponsor
•	nittee books and records. ncent Tallman 1020 N. Fairfax Street Fl. 5		
	Alexandria	VA	22314 _
Title or Position ♥ Custo	CITY ▲	STATE A Telephone number 703	ZIP CODE 1 - 684 - 2915
	ame and address (phone number – optional) of the fany designated agent (e.g., assistant treasurer		ee; and the
Full Name of TreasurerV	incent Tallman		
Mailing Address	1020 N. Fairfax Street Fl. 5		
	Alexandria	VA	22314 _
Title or Position ♥	CITY A	STATE A	ZIP CODE A
Treas	surer	Talaahaanb 703	_ 684 _ 291,5
		Telephone number	

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Full Name of Designated Agent	Lisa Queeney		
Mailing Address	310 Montgomery Street		
	Alexandria		22314 -
Title or Position ¥	CITY A	STATE A	ZIP CODE A
Assista	ant Treasurer Teleph	one number	_ 838 6124
Banks or Other Deposi		ommittee deposits funds,	holds accounts, rents
safety deposit boxes or r Name of Bank, Deposito	maintains funds.	ommittee deposits funds,	holds accounts, rents
safety deposit boxes or r Name of Bank, Deposito	maintains funds. ory, etc. urke & Herbert . 100 South Fairfax Street	<u></u>	
safety deposit boxes or r Name of Bank, Deposito	maintains funds. ory, etc. urke & Herbert 100 South Fairfax Street	ommittee deposits funds,	holds accounts, rents
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(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): 65 **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):