Image# 202401309600652297		PAGE 1 / 86
	EPORT OF RECEIPTS ND DISBURSEMENTS Other Than An Authorized Committee	
1. NAME OF <b>TYI</b> COMMITTEE (in full)	<b>PE OR PRINT</b> ▼ Example: If typing over the lines.	, type 12FE4M5
	nagement Association Political Acti	on Committee (PCMA PAC)
ADDRESS (number and street)	27 7th St. NW 9th Floor	
Check if different than previously reported. (ACC)	Vashington	
2. FEC IDENTIFICATION NUME	ER▼ CITY▲	STATE ▲ ZIP CODE ▲
C C00388819	3. IS THIS NE REPORT X (N)	
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> </ul>	Report Due On:	Aug 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M9) Dec 20 (M12) (Non-Election (Non-Election Very Column
April 15	Apr 20 (M4) Jul	20 (M7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report (Q1)July 15Quarterly Report (Q2)	(C) 12-Day PRE-Election Report for the: Convention (12)	C) General (12G) Runoff (12R) Special (12S)
October 15 Quarterly Report (Q3) X January 31 X Voor End Depart (VE)		D D / Y Y Y Y in the State of
Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Report for the:	D D / Y Y Y Y M in the State of
5. Covering Period 07	01 / Y Y Y Y Y Y 01 2023 through	12 / D D / Y Y Y Y 12 31 2023
•	eport and to the best of my knowledge and be Heafitz, Jonathan, , ,	lief it is true, correct and complete.
Signature of Treasurer	onathan, , ,	Date 01 / 01 / 2024
NOTE: Submission of false, erroneous	, or incomplete information may subject the person	n signing this Report to the penalties of 52 U.S.C. § 3010
Office Use Only		FEC FORM 3X Rev. 05/2016

01/30/2024 16 : 20

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

W	/rite or Type Committee Name		
F	Pharmaceutical Care Management A	Association Political Action Comn	nittee (PCMA PAC)
R	eport Covering the Period: From:	/ D D / Y Y Y Y 01 2023 To:	12 / D D / Y Y Y Y 31 2023
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2023		5823.57
	(b) Cash on Hand at Beginning of Reporting Period	17034.32	
	(c) Total Receipts (from Line 19)	21158.68	70277.06
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	38193.00	76100.63
7.	Total Disbursements (from Line 31)	29572.74	67480.37
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8620.26	8620.26
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

### DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

P	nt Association Political Action Co	M = M / D = D / Y = Y = Y
Report Covering the Period: From:	07 01 2023	To: 12 31 2023
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Contributions (other than loans) From:</li> <li>(a) Individuals/Persons Other Than Political Committees</li> <li>(i) Itemized (use Schedule A)</li> </ol>	20699.68	46514.40
(ii) Unitemized (iii) TOTAL (add	459.00	3762.66
Lines 11(a)(i) and (ii)	21158.68	50277.06
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
(such as PACs) (d) Total Contributions (add Lines	0.00	20000.00
<ul> <li>11(a)(iii), (b), and (c)) (Carry</li> <li>Totals to Line 33, page 5)</li> <li>12. Transfers From Affiliated/Other</li> </ul>	21158.68	70277.06
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>	0.00	0.00
<ul><li>(Refunds, Rebates, etc.)</li><li>(Carry Totals to Line 37, page 5)</li><li>16. Refunds of Contributions Made to Federal Candidates and Other</li></ul>	0.00	0.00
Political Committees	0.00	0.00
(Dividends, Interest, etc.)	ds	0.00
(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))►	21158.68	70277.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	21158.68	70277.06

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Page 3

I

### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	72.74	480.37
<ul><li>(c) Total Operating Expenditures</li></ul>		
(add 21(a)(i), (a)(ii), and (b))►	72.74	480.37
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	29500.00	67000.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
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
<ul> <li>(d) Total Contribution Refunds</li> <li>(add Lines 28(a), (b), and (c))</li></ul>	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101 (a) Allocated Federal Election Activity (from Schedule H6)	(20))	
(i) Federal Share	0.00	0.00
<ul><li>(ii) "Levin" Share</li><li>(b) Federal Election Activity Paid</li></ul>	0.00	0.00
(c) Total Federal Election Activity Faid (c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).		
	29572.74	67480.37
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	29572.74	67480.37

### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

#### III. Net Contributions/ Operating Expenditures

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

(subtract	Line 3	7 from	Line	36)	

		-7			-	21158.68
						0.00
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						21158.68
1.1.1		-			-	21130.00
						72.74
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						0.00
la de la companya de	1	7			7	
						72.74
		-7-			-7-	

						70277.06
		7			-7	1 1 45 1
						0.00
		-7			-	
						70277.06
	1		1	1	-	1 1 49 1
						480.37
		-7			-,-	
F	-					480.37
						480.37
	+++++++++++++++++++++++++++++++++++++++	-7	-	+++++++++++++++++++++++++++++++++++++++	-	480.37

COLUMN B

Calendar Year-to-Date

#### Page 5

# Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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PAGE 6 OF

I EIVIIZED RECEIPIS		for each category of the	X 11a 11b 11c 12							
		Detailed Summary Page	13 14 15 16 17							
			berson for the purpose of soliciting contributions te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Pharmaceutical Care Mana	gement Asso	ciation Political Action	Committee (PCMA PAC)							
Full Name of Individual (Last, First, Mid A. Ashley, Dylan T, , ,	dle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 325 7th St NW			M M / D D / Y Y Y Y 10 20 2023							
City	State DC	Zip Code 20004	Transaction ID : A2023-2314432							
Washington		20004	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		10.00							
Name of Employer (for Individual) Pharmaceutical Care Management Assoc		upation (for Individual) cutive	Memo Item							
Receipt For:	I	Year-to-Date ▼	—							
Primary General Other (specify) ▼		210.00	]							
Full Name of Individual (Last, First, Mid B. Ashley, Dylan T, , ,	dle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 325 7th St NW			11 03 2023							
City	State	Zip Code	Transaction ID : A2023-2531027							
Washington	DC	20004	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		10.00							
Name of Employer (for Individual) Pharmaceutical Care Management Assoc		upation (for Individual) ecutive	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary     General       Other (specify) ▼		220.00	]							
Full Name of Individual (Last, First, Mid C. Ashley, Dylan T, , ,	dle Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 325 7th St NW			11 17 2023							
City	State	Zip Code	Transaction ID : A2023-2520978							
Washington	DC	20004	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		10.00							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
Pharmaceutical Care Management Assoc		cutive								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify)		230.00	]							
SUBTOTAL of Receipts This Page (option	nal)		30.00							
TOTAL This Period (last page this line nu	mber only)									

### Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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86

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Pharmaceutical Care Managem	ent Assoc	ciation Political Action	Committee (PCMA PAC)
Full Name of Individual (Last, First, Middle Init         Ashley, Dylan T, , ,         Mailing Address 325 7th St NW         City         Washington         FEC ID number of contributing         federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify) ▼	State DC C Occup Exect Aggregate Y	Zip Code 20004 pation (for Individual) utive /ear-to-Date ▼ 240.00	Date of Receipt 12 01 2023 Transaction ID : A2023-2782388 Amount of Each Receipt this Period 10.00 Memo Item
Full Name of Individual (Last, First, Middle Init         Ashley, Dylan T, , ,         Mailing Address 325 7th St NW         City         Washington         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify) ▼	State DC C Occur Exec	Zip Code 20004 pation (for Individual)	Date of Receipt          12       15       2023         Transaction ID : A2023-2823215         Amount of Each Receipt this Period         10.00         Memo Item
Full Name of Individual (Last, First, Middle Init         Ashley, Dylan T, , ,         Mailing Address 325 7th St NW         City         Washington         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify)	State DC C Occup Execu	Zip Code 20004 pation (for Individual)	Date of Receipt          12       29       2023         Transaction ID : A2023-2823217         Amount of Each Receipt this Period         10.00         Memo Item
SUBTOTAL of Receipts This Page (optional)			30.00

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

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		Deteiled Current Date		<b>〈</b> 11a		11b	11c	12			
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Any information copied from such Reports and or for commercial purposes, other than using th				for the		pose o	f solicitin	g contrib	utions		
NAME OF COMMITTEE (In Full)											
Pharmaceutical Care Manager	ment Asso	ciation Political Action	Cor	nmitt	ee	(PCI	MA PA	NC)			
Full Name of Individual (Last, First, Middle Ir A. Bradham, Jennifer, , ,	nitial) or Full C	rganization Name		Date of Receipt							
Mailing Address 325 7th St NW 9th Floor				08	/	25		y y 2023	Y		
City	State	Zip Code		Trans	sact	ion ID :	: A2023-2	2093313			
Washington	DC	20004		Amoun	t of	Each I	Receipt t	his Period	b		
FEC ID number of contributing federal political committee.	С			<u> </u>		-		12	.00		
Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) DIR		N	lemo	o Item					
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Other (specify) V		-192	1								
Full Name of Individual (Last, First, Middle Ir B. Bradham, Jennifer, , ,	nitial) or Full C	rganization Name		Date o	f Re	eceipt					
Mailing Address 325 7th St NW 9th Floor			M M / D D / Y Y Y Y 09 08 2023								
City	State	Zip Code		Trans	sacti	ion ID :	A2023-2	2093334			
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City	State	Zip Code		Tran	sact	ion ID	: A2023-2	2136389	_		
Washington	DC	20004		Amoun	t of	Each I	Receipt t	his Period	b		
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Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occ SR I	upation (for Individual) DIR		N	lemo	o Item					
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
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			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Pharmaceutical Care Man	agement Asso	ciation Political Action	Committee (PCMA PAC)						
Full Name of Individual (Last, First, Mid A. Bradham, Jennifer, , ,		rganization Name	Date of Receipt						
Mailing Address 325 7th St NW 9th Floo	or		10 / D D / Y Y Y Y 10 06 2023						
City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2314436 Amount of Each Receipt this Period						
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B. Bradham, Jennifer, , , Mailing Address 325 7th St NW 9th Floo	pr		Date of Receipt						
City	State	Zip Code	Transaction ID : A2023-2314435						
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FEC ID number of contributing federal political committee.	С		12.00						
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Primary     General       Other (specify) ▼		252.00	]						
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Mailing Address 325 7th St NW 9th Flo	or		11 03 2023						
City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2531028           Amount of Each Receipt this Period						
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Name of Employer (for Individual) Pharmaceutical Care Management Asso		upation (for Individual) DIR	Memo Item						
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	Detailed Summary Page		11a		11b	11c		12				
		Detailed Summary Page		13		14	15		16	17		
Any information copied from such Reports and St or for commercial purposes, other than using the				or the		pose of	f solicit		ontribut	tions		
NAME OF COMMITTEE (In Full)												
Pharmaceutical Care Managem	ent Asso	ociation Political Action	Com	nmitte	ee	(PCI	MA P	AC)	1			
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Full Name of Individual (Last, First, Middle Init	ial) or Full C	Organization Name										
B. Bradham, Jennifer, , ,				Date of	Re	eceipt						
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check onl	(check only one)								
11			for each category of the Detailed Summary Page	X 11a	11b	11c	12 16	17					
	y information copied from such Reports and S for commercial purposes, other than using the			person for the	purpose of	f soliciting	g contribu	utions					
	NAME OF COMMITTEE (In Full)												
	Pharmaceutical Care Managem	nent Asso	ociation Political Action	Committe	ee (PCN	MA PA	(C)						
Α.	Full Name of Individual (Last, First, Middle Ini Bradham, Jennifer, , ,	tial) or Full C	Organization Name	Date of	Date of Receipt								
,	Mailing Address 325 7th St NW 9th Floor			M M									
	City	State	Zip Code	_	12 29 2023 Transaction ID : A2023-2823219								
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	Pharmaceutical Care Management Associa	SR	DIR										
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	Primary General		312.00	1									
	Other (specify) <b>v</b>		512.00										
	Full Name of Individual (Last, First, Middle Ini Buxton, Jonathan D, , ,	tial) or Full C	Organization Name	Data a	f Dessint								
В.	Mailing Address 325 7th St NW				f Receipt								
	Maining Address 325 /th St NW			м м 07	14		2023	Y					
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	FEC ID number of contributing federal political committee.	С			50.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual)	М	emo Item								
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	Primary General Other (specify) ▼		700.00	]									
— C.	Full Name of Individual (Last, First, Middle Ini Buxton, Jonathan D, , ,	tial) or Full C	Organization Name	Data a	f Doppint								
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				07	/ D 28		2023	Y					
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			or each category of the		(11a		11	ьΓ	11c		12			
			Detailed Summary Page		13		14		15		16	17		
Any information copied from such Reports and S or for commercial purposes, other than using the														
NAME OF COMMITTEE (In Full)														
Pharmaceutical Care Managem	nent Asso	ocia	tion Political Action	Con	nmitte	ee	(P	СМ	A PA	(C)				
Full Name of Individual (Last, First, Middle Ini <b>A.</b> Buxton, Jonathan D, , ,	itial) or Full C	Orgar	nization Name		Date of Receipt									
Mailing Address 325 7th St NW					08 / D D / Y Y Y Y 2023									
City	State		Zip Code		Trans	acti	ion	ID : 4	2023-1	766	216			
Washington	DC		20004		Amoun	t of	Ea	ch Re	eceipt th	nis F	Period			
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Name of Employer (for Individual) Pharmaceutical Care Management Associa		cupat ecutiv	ion (for Individual) /e		М	emo	o Ite	əm						
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Full Name of Individual (Last, First, Middle Ini B. Buxton, Jonathan D, , ,	tial) or Full C	Drgar	nization Name		Date of	f Re	ecei	pt						
Mailing Address 325 7th St NW					м м 08	1		25	/ Y	20	)23	Y		
City	State		Zip Code		Trans	acti	ion	ID : A	2023-2	093	325			
Washington	DC		20004	Amount of Each Receipt this Period										
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	EMIZED RECEIFTS			Detailed Summary Page		-	1a		11b		11c		12		
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	y information copied from such Reports and Sta for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full)														
$\mathbb{Z}$	Pharmaceutical Care Manageme	ent Asso	cia	ation Political Action	Con	nm	hitte	e	(PC	;M	A PA	'C)			
Α.	Full Name of Individual (Last, First, Middle Initia Buxton, Jonathan D, , ,	al) or Full O	rga	nization Name		Dat	te of	Re	ceipt						
	Mailing Address 325 7th St NW					09 / 22 / 2023									
	City	State		Zip Code		Tr	ransa	acti	on IC	):/	A2023-2	2136	377		
	Washington	DC		20004		Am	ount	of	Each	Re	eceipt th	nis P	eriod		
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	Primary General Other (specify) ▼		-	950.00											
в.	Full Name of Individual (Last, First, Middle Initia Buxton, Jonathan D, , ,	al) or Full O	rga	nization Name		Dat	te of	Re	ceipt						
	Mailing Address 325 7th St NW						™ 10	/	D	D6	/ Y		)23	Y	
	City	State		Zip Code		Tr	ansa	actio	on ID	):/	2023-2	314	454		
	Washington	DC		20004		Am	ount	of	Each	Re	eceipt th	nis P	eriod		
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occ Exe	•	tion (for Individual) ve		Ц	Me	emo	Item	I					
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с.	Full Name of Individual (Last, First, Middle Initia Buxton, Jonathan D, , ,	al) or Full O	rga	nization Name		Dat	te of	Re	ceipt						
	Mailing Address 325 7th St NW					M	10 <sup>™</sup>	/	D	20	/ Y		)23	Y	
	City	State		Zip Code		T	ransa	acti	on IE	):/	A2023-2	2314	452		
	Washington	DC		20004		Am	ount	of	Each	Re	eceipt th	nis P	eriod		
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			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
$\setminus$	NAME OF COMMITTEE (In Full)											
	Pharmaceutical Care Managem	ent Asso	ciation Political Action	Committee (PCMA PAC)								
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name									
Α.	Buxton, Jonathan D, , ,			Date of Receipt								
	Mailing Address 325 7th St NW			11 03 / Y Y Y Y 2023								
	City	State DC	Zip Code	Transaction ID : A2023-2531037								
	Washington	DC	20004	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		50.00								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Pharmaceutical Care Management Associa		cutive									
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	Mailing Address 325 7th St NW											
				11 17 2023								
	City	State	Zip Code	Transaction ID : A2023-2520988								
	Washington	DC	20004	Amount of Each Receipt this Period								
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	Other (specify) ▼	L	1150.00									
С.	Full Name of Individual (Last, First, Middle Init Buxton, Jonathan D, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW			M = M / D = D / Y = Y = Y								
				12 01 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2782398								
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	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
	Pharmaceutical Care Management Associa	Exe	cutive									
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	Mailing Address 325 7th St NW					<sup>M</sup> 12	/	D 29		202	23	Y		
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	Mailing Address 11000 Optum Circle					<sup>м</sup> 07	/	D 01		Y Y 202		Y		
	City	State		Code		Trans	acti	ion ID	: A2023	-27895	34			
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	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
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	Pharmaceutical Care Managem	ent Asso	ciation Political Action	Committee (PCMA PAC)								
Α.	Full Name of Individual (Last, First, Middle Init Dube, Timothy, J, ,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			07 14 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-1646480 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		80.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item								
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	City	State	Zip Code	07 28 2023 Transaction ID : A2023-1766196								
	Washington	DC	20004	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		80.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occ VP	upation (for Individual)	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	]								
— C.	Full Name of Individual (Last, First, Middle Init Dube, Timothy, J, ,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			08 11 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-1766217 Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item								
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			Use separate schedule(s) for each category of the	(check only one)							
			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
$\setminus$	NAME OF COMMITTEE (In Full)										
	Pharmaceutical Care Managem	ient Asso	ciation Political Action	Committee (PCMA PAC)							
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	Mailing Address 325 7th St NW 9th Floor			M         M         /         D         /         Y							
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2093319 Amount of Each Receipt this Period							
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item							
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	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2093340							
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occ VP	upation (for Individual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1440.00	]							
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	Mailing Address 325 7th St NW 9th Floor			09 22 2023							
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2136378 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		80.00							
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item							
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	y information copied from such Reports and St for commercial purposes, other than using the					for the		rpose c	of solicitin	ig con	tribut	ions		
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A.	Full Name of Individual (Last, First, Middle Initi Dube, Timothy, J, , Mailing Address 325 7th St NW 9th Floor	al) or Full O	rganiz	ation Name		Date of Receipt								
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	Primary General Other (specify) ▼		<b>,</b>	1680.00										
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	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
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	Pharmaceutical Care Managem	ent Asso	ciation Political Action	Committee (PCMA PAC)								
Α.	Full Name of Individual (Last, First, Middle Init Dube, Timothy, J, ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			M M / D D / Y Y Y Y 11 17 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2520989 Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1840.00									
в.	Full Name of Individual (Last, First, Middle Init Dube, Timothy, J, , Mailing Address 325 7th St NW 9th Floor	ial) or Full O	rganization Name	Date of Receipt								
	City	State	Zip Code	12 01 2023 Transaction ID : A2023-2782399								
	Washington	DC	20004	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		80.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occ VP	upation (for Individual)	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1920.00									
— c.	Full Name of Individual (Last, First, Middle Init Dube, Timothy, J, ,	ial) or Full O	rganization Name	Date of Receipt								
-	Mailing Address 325 7th St NW 9th Floor			12 15 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2823237           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		80.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item								
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pharmaceutical Care Manage	ment Asso	ciation Political Action	Committee (PCMA PAC)
Full Name of Individual (Last, First, Middle I Dube, Timothy, J, , Mailing Address 325 7th St NW 9th Floor City	State	Zip Code	Date of Receipt 12 / 29 / 2023 Transaction ID : A2023-2823238
Washington FEC ID number of contributing federal political committee.	C	20004	Amount of Each Receipt this Period 80.00
Name of Employer (for Individual) Pharmaceutical Care Management Associa Receipt For: Primary General Other (specify) ▼	VP	upation (for Individual) Year-to-Date ▼ 2080.00	Memo Item
Full Name of Individual (Last, First, Middle I DuPaul, Chris, , , Mailing Address 2721 Sherbrooke Rd City Shaker HTS	nitial) or Full O State OH	Zip Code 44122	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Elixir Insurance Receipt For:	Pre	upation (for Individual) sident Year-to-Date ▼ 1000.00	1000.00
Full Name of Individual (Last, First, Middle I Frost, Amanda, M, , Mailing Address 325 7th St NW 9th Floor	nitial) or Full O	rganization Name	Date of Receipt
Washington         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify)	DC C Occu VP	20004 upation (for Individual) Year-to-Date ▼ 700.00	Amount of Each Receipt this Period          Memo Item
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	y information copied from such Reports and S for commercial purposes, other than using the			13     14     15     16     17       person for the purpose of soliciting contributions       per to solicit contributions from such committee.									
$\overline{)}$	NAME OF COMMITTEE (In Full)												
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Α.	Full Name of Individual (Last, First, Middle Init Frost, Amanda, M, , Mailing Address 325 7th St NW 9th Floor	ial) or Full O	rganization Name	Date of Receipt									
	City	State	Zip Code	07 28 2023 Transaction ID : A2023-1766194									
	Washington	DC	20004	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		50.00									
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00										
в.	Full Name of Individual (Last, First, Middle Init Frost, Amanda, M, ,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 325 7th St NW 9th Floor			08 / D D / Y Y Y Y 08 11 2023									
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-1766215 Amount of Each Receipt this Period									
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	Mailing Address 325 7th St NW 9th Floor			08 25 2023									
	City	State DC	Zip Code	Transaction ID : A2023-2093318									
	Washington		20004	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		50.00									
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼										
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	y information copied from such Reports and S for commercial purposes, other than using the														
$\backslash$	NAME OF COMMITTEE (In Full)														
	Pharmaceutical Care Managem		on Committee (PCMA PAC)												
Α.	Full Name of Individual (Last, First, Middle Init Frost, Amanda, M, ,	ial) or Full O	rganization Name			Date of Receipt									
	Mailing Address 325 7th St NW 9th Floor					09 08 2023									
	City	State	Zip Code			Transaction ID : A2023-2093339									
	Washington	DC	20004		/	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						<b>-</b>	1 - 72	50	.00				
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individ	dual)		M	emo	Item							
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	Mailing Address 325 7th St NW 9th Floor					09 22 2023									
	City	State	Zip Code		Transaction ID : A2023-2136376 Amount of Each Receipt this Period										
	Washington	DC	20004												
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C.	Full Name of Individual (Last, First, Middle Init Frost, Amanda, M, ,	ial) or Full O	rganization Name			Date of	f Re	ceipt							
	Mailing Address 325 7th St NW 9th Floor					<sup>M</sup> 10	/	06		2023	Ŷ				
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		Detailed Summary Page					11c	12						
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NAME OF COMMITTEE (In Full)														
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Full Name of Individual (Last, First, Midd A. Frost, Amanda, M, ,	le Initial) or Full O	rganization Name		Date of Receipt										
Mailing Address 325 7th St NW 9th Floor				10 / Y Y Y Y 20 2023										
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Mailing Address 325 7th St NW 9th Floor				<sup>M</sup> 11	/	17		2023 Y	Y					
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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)								
			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)											
	Pharmaceutical Care Managem	ient Asso	ciation Political Action	Committee (PCMA PAC)								
Α.	Full Name of Individual (Last, First, Middle Init Hallemeier, Samuel, , ,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			07 14 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-1646476 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		30.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item								
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B.	Full Name of Individual (Last, First, Middle Init Hallemeier, Samuel, , , Mailing Address 325 7th St NW 9th Floor	tial) or Full O	rganization Name	Date of Receipt								
	City	State	Zip Code	07 28 2023 Transaction ID : A2023-1766192								
	Washington           FEC ID number of contributing           federal political committee.	C	20004	Amount of Each Receipt this Period								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item								
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	Mailing Address 325 7th St NW 9th Floor			08 / D D / Y Y Y Y 08 11 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-1766213 Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	]								
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full)											
$\rangle$	Pharmaceutical Care Managem	ent Asso	ciation Political Action	Committee (PCMA PAC)								
A.	Full Name of Individual (Last, First, Middle Init Hallemeier, Samuel, , ,	tial) or Full C	organization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			08 25 2023								
	City	State	Zip Code	Transaction ID : A2023-2093322								
	Washington	DC	20004	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		30.00								
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
	Pharmaceutical Care Management Associa		MANAGER									
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	Mailing Address 325 7th St NW 9th Floor			09 08 2023								
	City	State	Zip Code	Transaction ID : A2023-2093343								
	Washington	DC	20004	Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item								
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	Mailing Address 325 7th St NW 9th Floor			09 / D D / Y Y Y Y 22 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2136374         Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item								
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
	y information copied from such Reports and S for commercial purposes, other than using the												
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Α.	Full Name of Individual (Last, First, Middle Ini Hallemeier, Samuel, , ,	tial) or Full C	Organization Name	Date of Receipt									
	Mailing Address 325 7th St NW 9th Floor			10 / D D / Y Y Y Y Y 10 06 2023									
	City	State	Zip Code	Transaction ID : A2023-2314448									
	Washington	DC	20004	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		30.00									
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item									
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	Mailing Address 325 7th St NW 9th Floor			10 / D D / Y Y Y Y 2023									
	City	State	Zip Code	Transaction ID : A2023-2314447									
	Washington	DC	20004	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		30.00									
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) MANAGER	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary     General       Other (specify) ▼		630.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini Hallemeier, Samuel, , ,	tial) or Full C	Organization Name	Date of Receipt									
	Mailing Address 325 7th St NW 9th Floor			11 03 / Y Y Y Y 2023									
	City	State DC	Zip Code	Transaction ID : A2023-2531034									
	Washington		20004	Amount of Each Receipt this Period									
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	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
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	Receipt For:	Aggregate	Year-to-Date <b>V</b>										
	Other (specify)		660.00										
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## SCHEDULE A (FEC Form 3X) EMIZED DECEIDTE

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TEMIZED RECEIPTS	for each category o Detailed Summary	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Pharmaceutical Care Mar	nagement Association Political	Action Committee (PCMA PAC)
Hallemeier, Samuel, , ,	liddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 325 7th St NW 9th F		11 17 2023
City	State Zip Code DC 20004	Transaction ID : A2023-2520985
Washington	DC 20004	Amount of Each Receipt this Period
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Name of Employer (for Individual) Pharmaceutical Care Management As	Occupation (for Individual) socia SR MANAGER	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)		90.00
Full Name of Individual (Last, First, N Hallemeier, Samuel, , ,	liddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 325 7th St NW 9th FI	oor	M M / D D / Y Y Y Y 12 01 2023
City	State Zip Code	Transaction ID : A2023-2782395
Washington	DC 20004	Amount of Each Receipt this Period
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City	State Zip Code	Transaction ID : A2023-2823229
Washington	DC 20004	Amount of Each Receipt this Period
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Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Pharmaceutical Care Management As	,	_
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	Mailing Address 325 7th St NW 9th Floor														
	City	State		Zip Code		Trans	sacti	ion ID :	A2023-1	766208					
	Washington	DC		20004		Amoun	t of	Each F	Receipt th	nis Perioo	ł				
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	Mailing Address 325 7th St NW 9th Floor				08 25 2023										
	City	State		Zip Code		Trans	sacti	on ID :	A2023-2	093320					
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	Primary General Other (specify) ▼		<u>,</u>	255.00											
С.	Full Name of Individual (Last, First, Middle Init Head, William, R, ,	ial) or Full C	Drgan	ization Name		Date o	of Re	ceipt							
	Mailing Address 325 7th St NW 9th Floor					<sup>M</sup> 09	/	08		y y 2023	Y				
	City	State		Zip Code		Tran	sact	ion ID :	A2023-2	2093341					
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	Other (specify)		-	270.00											
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and St for commercial purposes, other than using the											
$\backslash$	NAME OF COMMITTEE (In Full)											
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Α.	Full Name of Individual (Last, First, Middle Initi Head, William, R, ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor	<b>0</b>		09 / D D / Y Y Y Y 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2136369								
			20004	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		15.00								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi AVF	upation (for Individual)	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
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В.	Full Name of Individual (Last, First, Middle Initi Head, William, R, ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			10 / D D / Y Y Y Y 10 06 2023								
	City	State	Zip Code	Transaction ID : A2023-2314438								
	Washington	DC	20004	Amount of Each Receipt this Period								
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	Mailing Address 325 7th St NW 9th Floor			10 20 / Y Y Y Y 10 20 2023								
	City	State	Zip Code	Transaction ID : A2023-2314437								
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	Mailing Address 325 7th St NW 9th Floor					M M / D D / Y Y Y Y 11 03 2023										
	City	State		Zip Code		Transaction ID : A2023-2531029										
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FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period									
Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ECTOR		N	lemo	tem							
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Primary   General     Other (specify)		634.92	]										
SUBTOTAL of Receipts This Page (optional)	)		 ►	<u> </u>		, . , .		86.	58				

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			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
$\setminus$	NAME OF COMMITTEE (In Full)											
	Pharmaceutical Care Managem	ent Asso	ciation Political Action	Committee (PCMA PAC)								
Α.	Full Name of Individual (Last, First, Middle Init Mack, Michelle, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			M M / D D / Y Y Y Y 11 17 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2520984 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		28.86								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ECTOR	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 663.78	1								
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в.	Mack, Michelle, , ,		rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			12 01 2023								
	City	State	Zip Code	Transaction ID : A2023-2782394								
	Washington	DC	20004	Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ECTOR	Memo Item								
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<u> </u>	Full Name of Individual (Last, First, Middle Init Mack, Michelle, , ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			12 / D D / Y Y Y Y 12 15 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2823227         Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		28.86								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ECTOR	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 721.50	]								
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Pharmaceutical Care Manag	ement Asso	ciation Political Action	Comm	ittee	e (PC	CMA	۹ PA	C)					
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Receipt For:	Aggregate	Year-to-Date ▼											
Primary General			1										
Other (specify) <b>v</b>		3269.10											
Full Name of Individual (Last, First, Middl C. McCarthy, Brian, , ,	e Initial) or Full O	rganization Name	Dat	e of F	Receipt	t							
Mailing Address 325 7th St NW 9th Floor				09 <sup>M</sup>		08	/ Y	2023	Y				
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Other (specify)		3461.40											
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Any information copied from such Reports an or for commercial purposes, other than using				or the			soliciting	g contribu	tions					
NAME OF COMMITTEE (In Full)														
Pharmaceutical Care Manag	ement Asso	ciation Political Action	Com	mitte	ee	(PCN	/IA PA	.C)						
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Mailing Address 325 7th St NW 9th Floor				09 22 2023										
City	State	Zip Code		Transaction ID : A2023-2136379										
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Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) cutive		M	emo	Item								
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Mailing Address 325 7th St NW 9th Floor				<sup>M</sup> 10	/	20		2023 Y	Y					
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Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item								
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Other (specify)		4038.30	]											
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			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1									
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$\overline{\}$	NAME OF COMMITTEE (In Full)												
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A.	Full Name of Individual (Last, First, Middle Init McCarthy, Brian, , ,	ial) or Full O	Organization Name	Date of Receipt									
	Mailing Address 325 7th St NW 9th Floor			11 03 2023									
	City	State	Zip Code	Transaction ID : A2023-2531039									
	Washington	DC	20004	Amount of Each Receipt this Period									
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ecutive	Memo Item									
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В.	McCarthy, Brian, , ,			Date of Receipt									
	Mailing Address 325 7th St NW 9th Floor	Otata	Zin Onde	11 17 2023									
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2520990									
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	Mailing Address 325 7th St NW 9th Floor			12 01 2023									
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2782400									
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) cutive	Memo Item									
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т	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)									
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	Primary General		4807.50	1									
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	Mailing Address 325 7th St NW 9th Floor			M M / D D / Y Y Y Y 10 20 2023									
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2314431									
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa	Occi VP	upation (for Individual)	Memo Item									
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	Other (specify)		210.00	]									
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с.	Full Name of Individual (Last, First, Middle Init Mitoko, Jill, , ,	ial) or Full O	Orgai	nization Name		Date of	Re	ceip	t							
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	y information copied from such Reports and State for commercial purposes, other than using the na														
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В.	Full Name of Individual (Last, First, Middle Initial Mitoko, Jill, , ,	) or Full (	Orgar	nization Name			Date of	Re	ceipt						
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C.	Full Name of Individual (Last, First, Middle Initial Murphy, Katherine, C, ,	) or Full (	Orgar	nization Name			Date of	Re	ceipt						
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Α.	Full Name of Individual (Last, First, Middle Init Murphy, Katherine, C, , Mailing Address 325 7th St NW 9th Floor	ial) or Full C	Orgai	nization Name		Date of	Rec										
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А.	Mailing Address 325 7th St NW 9th Floor												
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Pharmaceutical Care Manage	ement Asso	ociation Political Action	Committee (PCMA PAC)								
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City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2531035           Amount of Each Receipt this Period								
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City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2823231           Amount of Each Receipt this Period							
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	Mailing Address 325 7th St NW			08 / D D / Y Y Y Y 2023									
	City	State	Zip Code	Transaction ID : A2023-1766210 Amount of Each Receipt this Period									
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В.	Full Name of Individual (Last, First, Middle Init Rose, Connor P, , ,	rganization Name	Date of Receipt										
	Mailing Address 325 7th St NW			08 25 2023									
	City	State	Zip Code	Transaction ID : A2023-2093327									
	Washington	DC	20004	Amount of Each Receipt this Period									
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	Mailing Address 325 7th St NW			09 08 2023									
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	Mailing Address 325 7th St NW 9th Floor			07 28 2023							
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ıт.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
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Ar or	y information copied from such Reports and S for commercial purposes, other than using the	statements ma name and a	ay not be sold or used by any address of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.								
$\setminus$	NAME OF COMMITTEE (In Full)											
	Pharmaceutical Care Managem	nent Asso	ciation Political Actior	n Committee (PCMA PAC)								
Α.	Full Name of Individual (Last, First, Middle Ini Scott, Juan, C, ,	tial) or Full O	organization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			12 01 / Y Y Y Y 12 01 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2782403 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.30								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) cutive	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4615.20									
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B.	Scott, Juan, C, , Mailing Address 325 7th St NW 9th Floor			Date of Receipt								
	City	State	Zip Code	Transaction ID : A2023-2823242								
	Washington	DC	20004	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		192.30								
	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ecutive	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4807.50									
с.	Full Name of Individual (Last, First, Middle Ini Scott, Juan, C, ,	tial) or Full O	organization Name	Date of Receipt								
	Mailing Address 325 7th St NW 9th Floor			12 / D D / Y Y Y Y Y 29 / 2023								
	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2823253           Amount of Each Receipt this Period								
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) cutive	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4999.80									
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Mailing Address 325 7th St NW 9th Floor				07 / D D / Y Y Y Y 2023										
City	State	Zip Code		Transaction ID : A2023-1646482										
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Mailing Address 325 7th St NW 9th Floor				<sup>M</sup> 08	/	D 11		y 2023	Y					
City	State	Zip Code		Trans	sact	ion ID :	A2023-1	766219						
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Mailing Address 325 7th St NW 9th Floor				08 <sup>M</sup>	/	25	D / Y	ү ү 2023	Y			
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A.	Full Name of Individual (Last, First, Middle Init Shrader, Melodie, , ,	tial) or Full O	Orgar	nization Name		D	ate o	f Re	cei	ipt						
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 3846.00												
В.	Full Name of Individual (Last, First, Middle Init Shrader, Melodie, , ,	tial) or Full O	Orgar	nization Name		D	ate o	f Re	ecei	ipt						
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	Mailing Address 325 7th St NW 9th Floor					M M	_	D I		YY	Y				
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— с.	Full Name of Individual (Last, First, Middle Init Stephenson, Sean G, , ,	ial) or Full	Orga	nization Name		Date	of Re	ecei	ipt											
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	City	State	Zip Code	08 11 2023									
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В.	Full Name of Individual (Last, First, Middle Initia Stephenson, Sean G, , ,	Date of Receipt											
	Mailing Address 325 7th St NW	08 25 2023											
	City	State	Zip Code	Transaction ID : A2023-2093328									
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	City Washington	State DC	Zip Code 20004	Transaction ID : A2023-2093349 Amount of Each Receipt this Period									
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Full Name of Individual (Last, First, Middle Initi         B. Stephenson, Sean G, , ,         Mailing Address 325 7th St NW         City         Washington         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify) ▼	State DC	Zip Code 20004 tion (for Individual)	Date of Receipt					
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	City	State	Zip Code	11 03 2023									
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	Mailing Address 325 7th St NW	11 17 2023											
	City	State	Zip Code	Transaction ID : A2023-2520983									
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	Name of Employer (for Individual) Pharmaceutical Care Management Associa		upation (for Individual) ecutive	Memo Item									
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	Mailing Address 325 7th St NW			12 01 Y Y Y Y 2023									
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### Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 77 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
Any information copied from such Reports and S or for commercial purposes, other than using the											
NAME OF COMMITTEE (In Full) Pharmaceutical Care Managem	ient Associa	ation Political Action	Committee (PCMA PAC)								
Full Name of Individual (Last, First, Middle Init         A.       Stephenson, Sean G, , ,         Mailing Address 325 7th St NW         City         Washington         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify) ▼	Mailing Address 325 7th St NW         Dity       State       Zip Code         Washington       DC       20004         EC ID number of contributing       C       C         Wame of Employer (for Individual)       Occupation (for Individual)         Pharmaceutical Care Management Associa       Executive         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       500.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name										
Full Name of Individual (Last, First, Middle Init         Stephenson, Sean G, , ,         Mailing Address 325 7th St NW         City         Washington         FEC ID number of contributing         federal political committee.         Name of Employer (for Individual)         Pharmaceutical Care Management Associa         Receipt For:         Primary       General         Other (specify) ▼	State DC	Zip Code 20004 tion (for Individual) ve	Date of Receipt 12 29 2023 Transaction ID : A2023-2823225 Amount of Each Receipt this Period 20.00 Memo Item								
Full Name of Individual (Last, First, Middle Init         Mailing Address         City         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Receipt For:         Primary       General         Other (specify)	State	Zip Code	Date of Receipt								
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			40.00								

SC	CHEDULE B (FEC Form 3X)			F	OR LI	NUMBER: PAGE 78 OF 86								
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c	heck	only one) 21b 22 23 26 27								
		Detailed	Summary Page			28a 28b 28c 29 30b								
	y information copied from such Reports and State for commercial purposes, other than using the na													
$\backslash$	NAME OF COMMITTEE (In Full)													
	Pharmaceutical Care Managemer	nt Associa	ation Politica	al Ac	ctior	n Committee (PCMA PAC)								
А.	Full Name (Last, First, Middle Initial)					Date of Disbursement								
Α.	PayPal Inc.													
	Mailing Address P.O. Box 7022					07 01 2023								
	City	State	Zip Code			FEC Identification Number								
	Mountain View	CA	94039											
	Purpose of Disbursement Credit Card Processing Fee			0	01									
	Candidate Name			<u> </u>		Transaction ID : B862862								
					egory. ype	Amount of Each Disbursement this Period								
	Office Sought: House Disburse	ment For: 2	2023			72.74								
	Senate	Primary	General											
	State: District:	Other (spec	cify) ▼ Not Applicable			Memo Item								
	Full Name (Last, First, Middle Initial)													
В.						Date of Disbursement								
	Mailing Address													
	City	State	Zip Code			FEC Identification Number								
	Purpose of Disbursement													
	Candidate Name			Cate	egory	Amount of Each Disbursement this Period								
			-											
	Office Sought: House Disburse Senate	ment For:												
	President	-	Primary General Other (specify)											
	State: District:		5,			Memo Item								
_	Full Name (Last, First, Middle Initial)													
C.						Date of Disbursement								
	Mailing Address					M = M / D = D / Y = Y = Y								
	-	21.1												
	City	State	Zip Code			FEC Identification Number								
	Purpose of Disbursement					C								
	Candidate Name	Amount of Each Disbursement this Period												
		egory. ype	Amount of Lacit Disbursement this Period											
		ment For:				1 1 75 1 1 75 1 1 75 1								
	President	Primary Other (spec	General											
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s	UBTOTAL of Disbursements This Page (optional).				)	72.74								
						72.74								
IΤ	OTAL This Period (last page this line number only	()			····· ]									

	CHEDULE B (FEC Form 3X)					NUMBER: PAGE 79 OF 86										
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(cł	heck only 21b 28a	y one) 22 X 23 26 27 28b 28c 29 30b										
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may r me and addr	not be sold or use ress of any politic	ed by al com	any pers nmittee to	son for the purpose of soliciting contributions o solicit contributions from such committee.										
$\backslash$	NAME OF COMMITTEE (In Full)															
	Pharmaceutical Care Managemen	nt Associa	ation Politica	al Ac	tion C	committee (PCMA PAC)										
_	Full Name (Last, First, Middle Initial)					Date of Dishursement										
Α.	Eric Burlison for Congress					Date of Disbursement										
	Mailing Address 411 First St SE					09 21 2023										
	5	State DC	Zip Code 20003			FEC Identification Number										
	Washington Purpose of Disbursement	DC	20003			<b>C</b> C00788414										
	Contribution			0	11											
	Candidate Name			Cate	egory/	Transaction ID : B855420 Amount of Each Disbursement this Period										
	Burlison, Eric, , ,				/pe	Amount of Each Disbursement this Period										
	Office Sought: X House Disburse Senate X	ment For: 2 Primary	2024 General			2500.00										
	President		Memo Item													
	State: MO District: 07					Memo Item										
_	Full Name (Last, First, Middle Initial)															
В.	Velvet Hammer Pac					Date of Disbursement										
	Mailing Address 1140 Third Street NE 2nd Floor					09 / 21 / 2023										
	City	State	Zip Code			FEC Identification Number										
	Washington	DC	20002													
	Purpose of Disbursement Contribution			0	11	C C00692111										
	Candidate Name			<u></u>		Transaction ID : B855421										
					egory/ /pe	Amount of Each Disbursement this Period										
	Office Sought: House Disburse	nent For: 2023				1500.00										
	Senate	Primary	General													
	State: District:	Other (spec	cify) Not Applicable		Memo Item											
_	Full Name (Last, First, Middle Initial)			7												
C.						Date of Disbursement										
	Beatty for Congress					M M / D D / Y Y Y										
	Mailing Address 499 South Capitol Street SW - Sui	it				09 28 2023										
	City	State	Zip Code			FEC Identification Number										
	Washington	DC	20003													
	Purpose of Disbursement			0	11	C C00507368										
	Contribution Candidate Name				11	Transaction ID : B856204										
	Beatty, Joyce, , ,				egory/ /pe	Amount of Each Disbursement this Period										
		ment For: 2	2024	. ,		500.00										
	Senate X	Primary	General													
	President	Other (spec	cify) 🔻			Memo Item										
_	State: OH District: 03															
_	IIPTOTAL of Dishuraamonto This Dass (anti-					4500.00										
$\vdash$	<b>UBTOTAL</b> of Disbursements This Page (optional).	••••• •														
т	OTAL This Period (last page this line number only															

SCHEDULE B (FEC Form 3X)		FC	R LI	NE N	NUMBER: PAGE 80 OF											
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(ch	neck (	-			23 26 27								
		Summary Page			1b 3a	22 28b		23 28c	20		27 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na				any p	erso	n for the	purp	ose o	of solici	ting c	ontributi					
NAME OF COMMITTEE (In Full)																
Pharmaceutical Care Managemer	nt Associa	ation Politica	al Ac	tion	Cc	ommitt	ee (	PC	MA F	PAC	)					
Full Name (Last, First, Middle Initial) A. Cassidy Leadership Fund Mailing Address PO Box 80505						Date of Disbursement										
City Datas David	State LA	Zip Code			+	FEC Identification Number										
Baton Rouge Purpose of Disbursement	LA	70898			_											
Contribution			01	11	11	C C00771543										
Candidate Name				gory/		Transaction ID : B856212 Amount of Each Disbursement this Period										
Office Sought: House Disburse	ment For: 2	2023	ly	pe							1000.00	)				
Senate President	Primary Other (spec	General cify) ▼				Me	mol	tom								
State: District:		Not Applicable	•			Memo Item										
Full Name (Last, First, Middle Initial)         B.         Curtis for Congress         Mailing Address       439 New Jersey Ave SE						Date of Disbursement										
City Washington Purpose of Disbursement	State DC							FEC Identification Number								
Contribution Candidate Name Curtis, John, , ,		011 Category/ Type			Transaction ID : B856208 Amount of Each Disbursement this Period											
Senate President	ment For: 2 Primary Other (spec	General Cify)						1000.00	)							
State: UT District: 03		Convention			_	-										
Full Name (Last, First, Middle Initial) C. Friends of McCormick						Date o	f Disl	ourse		Y	Y	Y				
Mailing Address PO Box 3043						09		28	3	2	023					
City Cummings	State GA	Zip Code 30040				FEC Id	entifi	cation	Numb	er						
Purpose of Disbursement	•		_	-		С	C007	70674	7							
Contribution Candidate Name McCormick, Richard, D, , MD			11 gory/ pe	4	Transaction ID : B856209 Amount of Each Disbursement this Period											
Office Sought: House Disburse	ment For: 2	-	. ,			500.00										
State: GA District: 07	Primary Other (spec	General cify) ▼			Memo Item											
SUBTOTAL of Disbursements This Page (optional).				-	_			<u>-</u>			2500.0	0				

SCHEDULE B (FEC Form 3X)	11			NE NUMBER: PAGE 81 OF 86								
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	2	only one) 1b 22 X 23 26 27 8a 28b 28c 29 30b								
Any information copied from such Reports and State or for commercial purposes, other than using the nar												
NAME OF COMMITTEE (In Full)												
Pharmaceutical Care Managemen	t Associa	ation Political	Action	Committee (PCMA PAC)								
Full Name (Last, First, Middle Initial)				Data of Dista								
A. Kuster for Congress				Date of Disbursement								
Mailing Address P.O. Box 1498				09 28 2023								
5	State	Zip Code		FEC Identification Number								
Concord Purpose of Disbursement	NH	03302										
Contribution			011	C C00462861								
Candidate Name			Catagory	Transaction ID : B856206 Amount of Each Disbursement this Period								
Kuster, Ann McClane, , ,			Category/ Type	Amount of Lacit Disbursement this renou								
	ment For: 2			1000.00								
Senate X	Primary Other (spec	General										
State: NH District: 02	Other (oper	y) ▼		Memo Item								
Full Name (Last, First, Middle Initial)												
<sup>B.</sup> Lisa Blunt Rochester for Senate	Date of Disbursement											
Mailing Address 415 New Jersey Ave SE #1				09 28 2023								
,	State	Zip Code		FEC Identification Number								
Washington Purpose of Disbursement	DC	20003		C C00842301								
Contribution			011	C C00843391								
Candidate Name			Category/	Transaction ID : B856214 Amount of Each Disbursement this Period								
Blunt Rochester, Lisa, , ,			Type									
	ment For: 2	2024		1000.00								
	Primary	General										
State: DE District:	Other (spec	cify)		Memo Item								
Full Name (Last, First, Middle Initial)				Deterrit Dieterrit								
C. Mike Kelly for Congress				Date of Disbursement								
Mailing Address 5827 Colfax Avenue				09 / 28 / 2023								
City	State	Zip Code		FEC Identification Number								
Alexandria Purpose of Disbursement	VA	22311										
Contribution			011	C C00474189								
Candidate Name	Category/	Transaction ID : B856211 Amount of Each Disbursement this Period										
Kelly, George J. (Mike), , ,	Amount of Lach Dispursement this Period											
Office Sought: X House Disburse	ment For: 2	2024	Туре	1000.00								
Senate X	Primary	General										
State: PA District: 10	Other (spec	cify) 🔻		Memo Item								
State: PA District: 16												
SUBTOTAL of Disbursements This Page (optional)			••••••	3000.00								
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 82 OF 86								
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(check only									
	Detailed	Summary Page	28a	28b 28c 29 30b								
Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
Pharmaceutical Care Manageme	nt Associ	ation Politica	al Action C	ommittee (PCMA PAC)								
Full Name (Last, First, Middle Initial)				Date of Disbursement								
A. Pallone for Congress												
Mailing Address 495 Broadway				09 28 2023								
City												
Long Branch Purpose of Disbursement	NJ	07740		0 00000000								
Contribution			011	C C00226928								
Candidate Name			Category/	Transaction ID : B856207 Amount of Each Disbursement this Period								
Pallone, Frank, , , Jr.			Туре									
Senate	ement For: 2 Primary Other (spe	General		2500.00								
State: NJ District: 06		Memo Item										
Full Name (Last, First, Middle Initial)												
<sup>B.</sup> RAND PAUL FOR US SENATE				Date of Disbursement								
Mailing Address PO BOX 1100				09 / 28 / Y Y Y Y 2023								
City	State	Zip Code		FEC Identification Number								
Goshen Purpose of Disbursement	KY	40026		C C00496075								
Contribution			011									
Candidate Name			Category/	Transaction ID : B856213 Amount of Each Disbursement this Period								
Paul, Rand, , ,			Type									
		2028		2500.00								
	Primary	General										
State: KY District:	Other (spe	сіту)		Memo Item								
Full Name (Last, First, Middle Initial)												
C. Tuberville For Senate Inc.				Date of Disbursement								
Mailing Address 422 First Street SE 3rd Floor				09 / D D / Y Y Y Y 28 2023								
City	State	Zip Code		FEC Identification Number								
Washington Purpose of Disbursement	DC	20003										
Contribution			011	C C00701672 Transaction ID : B856210								
Candidate Name	Candidate Name											
Tuberville, Thomas, , ,			Category/ Type	Amount of Each Disbursement this Period								
	ement For: 2	2026		1000.00								
X Senate	Primary	General		_								
State: AL District:	Other (spe	city) 🔻		Memo Item								
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ITEN	MIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(cl	heck oi 21 28											
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∖ N∕	AME OF COMMITTEE (In Full)															
/ F	Pharmaceutical Care Managemer	nt Associa	ation Politica	al Ac	tion	Committee (PCMA PAC)										
	III Name (Last, First, Middle Initial)					Date of Disbursement										
	Sinema for Arizona					M M / D D / Y Y Y Y										
Ma	ailing Address PO Box 15854			10 03 2023												
Ci	ty ashington	State DC	Zip Code 20003			FEC Identification Number										
	Irpose of Disbursement		20003	_		C C00508804										
	Contribution			0	11	Transaction ID : B856563										
Ca	andidate Name			Cate	egory/	Amount of Each Disbursement this Period										
	nema, Kyrsten, , ,				ype	400.00										
Of		ment For: 2														
	Y Senate Y President	Primary Other (spec	General cify) ▼			Mamo Itam										
St	ate: AZ District:					Memo Item										
	II Name (Last, First, Middle Initial)															
B. S	Sinema for Arizona					Date of Disbursement										
Ma	ailing Address PO Box 7586					10 03 2023										
Ci	-	State	Zip Code			FEC Identification Number										
	noenix Irpose of Disbursement	AZ	85011													
	Contribution			0	)11	C C00508804										
	andidate Name			Cate	naon/	Transaction ID : B856564 Amount of Each Disbursement this Period										
Si	inema, Kyrsten, , ,				egory/ ype	Amount of Each Disbursement this Period										
Of	fice Sought: House Disburse	ment For: 2	-			2100.00										
	X Senate	Primary	Primary X General			· · · · · · · · · · · · · · · · · · ·										
St	ate: AZ District:	Other (spec	cify)			Memo Item										
	II Name (Last, First, Middle Initial)															
<mark>С.</mark> Е	Balderson for Congress					Date of Disbursement										
Ma	ailing Address 5827 Colfax Avenue															
Ci	-	State	Zip Code			FEC Identification Number										
	exandria Irpose of Disbursement	VA	22311			C C00663650										
	Contribution			0	11	C C00662650										
	andidate Name			1.1		Transaction ID : B862150 Amount of Each Disbursement this Period										
В	Balderson, Troy, , ,				egory/ ype	Amount of Each Dispursement this reliou										
Of	fice Sought: X House Disburse	ment For: 2	2024			1000.00										
	Senate	Primary	General			, , , , , , , , , , , , , , , , , , , ,										
0.	President	Other (spec	cify) 🔻			Memo Item										
St	ate: OH District: 12															
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S	CHEDULE B (FEC Form 3X)			FC	)R I	INF N	NUMBER: PAGE 84 OF 86										
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the		heck	only o	one)		00								
			Summary Page			21b 28a							27 30b				
	y information copied from such Reports and State for commercial purposes, other than using the nar																
$\setminus$	NAME OF COMMITTEE (In Full)																
	Pharmaceutical Care Managemen	t Associa	ation Political	l Ac	tior	n Co	mmitte	ee (	(PC	MA	PA	NC)					
A.	Full Name (Last, First, Middle Initial) Byron Donalds for Congress			Date of Disbursement										_			
	Mailing Address 1110 Trinity Drive																
	City Alexandria	State VA	Zip Code 22314				FEC Identification Number										
	Purpose of Disbursement		·				С	C00	73332	29			<u> </u>				
	Contribution Candidate Name			0	11		Transaction ID : B862158 Amount of Each Disbursement this Period										
	Donalds, Byron, , ,			Cate T\	egory /pe	//											
	· · · · · · · · · · · · · · · · · · ·	ment For: 2 Primary	2024	.,	/ 00		L				-	1	000.00	)			
	State: FL District: 19	Other (spec	cify) ▼				Memo Item										
	Full Name (Last, First, Middle Initial)																
Β.	Dan Crenshaw for Congress						Date of Disbursement										
	Mailing Address 439 New Jersey Ave SE				12 12 2023												
	5	State	Zip Code 20003				FEC Identification Number										
	Washington Purpose of Disbursement	DC	_	C C00660795													
	Contribution			Transaction ID : B862149													
	Candidate Name			Cate	gory	//	Amount of Each Disbursement this P										
	Crenshaw, Daniel, , ,	mant Fam. (	Туре					-									
		ment For: 2 Primary	2024 General					1000.00					,				
	President	Other (spec															
	State: TX District: 02						Memo Item										
C.	Full Name (Last, First, Middle Initial)						Date of	f Dis	burse	men	ł						
0.	Elect Democratic Women						M M	/	D			Y	Y	Y			
	Mailing Address PO Box 15096						12		1:		L		023				
		State DC	Zip Code				FEC Id	entifi	catior	n Nu	mber						
	Washington Purpose of Disbursement		20003				С	C00	68529	97							
	Contribution			0	11		_		ction	-	<b>B</b> 862	152					
	Candidate Name	//	Amount		eriod												
		ment For: 2					500.00										
	Senate President	Primary Other (spec	General														
	State: District:	5.101 (Spec	Not Applicable				Me	mo I	tem								
Γ								-		-		-	2500.0	0			
S	UBTOTAL of Disbursements This Page (optional)						<u></u>	-	,		7	-	2500.0	0			
т	OTAL This Period (last page this line number only	)							, .		,						

SCHEDULE B (FEC Form 3X)			FC		NUMBER: PAGE 85 OF 86									
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the		neck only	y one)									
		Summary Page		21b										
				28a	28b 28c 29 30b									
Any information copied from such Reports and State or for commercial purposes, other than using the na														
Pharmaceutical Care Managemer	nt Associ	ation Politica	al Ac	tion C	committee (PCMA PAC)									
Full Name (Last, First, Middle Initial)														
A. Issa for Congress	Date of Disbursement													
Mailing Address 1200 Trinity Drive	12 12 2023													
City	State	Zip Code			EEC Identification Number									
Alexandria	VA	22314			FEC Identification Number									
•	urpose of Disbursement													
Contribution Candidate Name	11	Transaction ID : B862151												
Issa, Darrell, , ,	gory/ pe	Amount of Each Disbursement this Period												
Office Sought: X House Disburse	he	500.00												
Senate														
State: CA District: 48	Other (spe	cify) ▼			Memo Item									
Full Name (Last, First, Middle Initial)														
B. Jacky Rosen Victory Fund	Date of Disbursement													
Mailing Address PO Box 15854														
City	State DC	Zip Code 20003			FEC Identification Number									
Washington Purpose of Disbursement														
Contribution	C C00772517													
Candidate Name	aon/	Transaction ID : B862154 Amount of Each Disbursement this Period												
	Category/ Type													
Office Sought: House Disburse	Sought: House Disbursement For: 2023													
Senate	Primary													
State: District:	Other (spe	cify) Not Applicable	e		Memo Item									
Full Name (Last, First, Middle Initial)														
C. Schneider for Congress	Date of Disbursement													
Mailing Address 315 Inspiration Lane	12 12 2023													
		7. 0.1												
City Gaithersburg	State MD	Zip Code 20878			FEC Identification Number									
Purpose of Disbursement		200.0	_	_	C C00495952									
Contribution	Transaction ID : B862157													
Candidate Name	Amount of Each Disbursement this Period													
Schneider, Brad, , ,														
Office Sought: House Disburse	1500.00													
President	Primary Other (spe	General												
State: IL District: 10	Other (spe	criy) 🔻			Memo Item									
SUBTOTAL of Disbursements This Page (optional).				🕨	3000.00									
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TOTAL This Period (last page this line number only	/)			🕨	, ,									

SCHEDULE B (FEC Form 3X)						E NUMBER: PAGE 86 OF 86										
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			only	<u> </u>	- <sup>-</sup>	<b>\</b>								
		Summary Page			21b 28a	2	2 Bb	~ `	23 28c		26 29		27 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na				any	perso	n for	the p	ourp	ose (		olicitir		ntribut			
NAME OF COMMITTEE (In Full)																
Pharmaceutical Care Managemer	nt Associ	ation Politica	al Ac	ctior	n Co	omm	itte	e (	PC	M	A P/	AC)				
Full Name (Last, First, Middle Initial) A. Strategy PAC							Date of Disbursement									
Mailing Address 5827 Colfax Ave																
City Alexandria	State VA	Zip Code 22311		FEC Identification Number												
Purpose of Disbursement	•••	22011	_			<b>C</b> C00497842										
Contribution 011																
Candidate Name Category/						Transaction ID : B862155 Amount of Each Disbursement this Per										
				ype	í	,	Juni	01 2		Dio	Saloo			onou		
Office Sought: House Disburse Senate	ement For: 2 Primary		1000.00													
State: District:	Other (spe	Other (specify) ▼ Not Applicable						Memo Item								
Full Name (Last, First, Middle Initial)																
B. Team Rick Scott						Date of Disbursement										
Mailing Address PO Box 76024							12	,		2			023			
City	State	Zip Code				FE	) Ide	entific	catior	n Nı	umbe	r				
Washington Purpose of Disbursement	5															
Contribution 011						C C00692343 Transaction ID : B862156 Amount of Each Disbursement this Period										
Candidate Name																
	Category/ Type						Amount of Each Dispursement this renou									
Office Sought: House Disburse	Sought: House Disbursement For: 2023						2500.00									
Senate																
State: District:	Other (spe	Other (specify) Not Applicable						Memo Item								
Full Name (Last, First, Middle Initial)																
C. Terri Sewell for Congress						Date of Disbursement										
Mailing Address 499 South Capitol Street SW - Suit						12 / D D / Y Y Y 12 2023										
City	State	Zip Code				FEG	) Ide	entific	catio	n Nı	umbe	r				
Washington Purpose of Disbursement	DC	20003				$\sim$		200	1500	76	-					
Contribution			0	)11	Ш	С			4589				_			
Candidate Name Category/						Transaction ID : B862153 Amount of Each Disbursement this Period										
Sewell, Terri, , , Type																
Office Sought: X House Disburse							1000.00									
Senate	Primary General															
President	Other (specify)					Memo Item										
State: AL District: 07																
SUBTOTAL of Disbursements This Page (optional)									_		-9-		4500.0	0		
TOTAL This Period (last page this line number only	v)				_							2	9500.0	0		
	, ,						1		,		,		1.00	-		