Image# 13964682303 PAGE 1 / 12

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Use	Only	
1.	NAME OF COMMITTEE (in full)	TYPE OR PR	INT ▼		nple: If typir the lines.	ng, type	12FE4M5			
Р	HARMACEUTICAL C	CARE MANAGE	EMENT ASS	OCIATION	ON POLIT	TICAL ACTI	ON COMM	IITTEE (P	CMA F	PAC)
Ш										
ΑD	DRESS (number and street		SYLVANIA AVE	NUE NW S	TE 740					
	Check if different than previously reported. (ACC)	WASHING	TON				DC	20004		
2.	FEC IDENTIFICATION	I NUMBER ▼	CI	TY 🛦		S	STATE A	ZI	P CODE	≜ ▲
	C C00388819		_	S THIS REPORT		NEW N) OR	AA (A	MENDED)		
4.	TYPE OF REPORT (Choose One)	(b) Month Report Due C	on:	o 20 (M2) r 20 (M3)		May 20 (M5) Jun 20 (M6)	Ξ.	20 (M8) 20 (M9)		Nov 20 (M11) Non-Election Year Only) Dec 20 (M12) Non-Election
	(a) Quarterly Reports:		Apı	20 (M4)	П.	Jul 20 (M7)	Oct	20 (M10)	Ý	ear Only)
	April 15 Quarterly Repo July 15 Quarterly Repo	(C) 1	2-Day RE -Election		Primary (12F		General		R	lunoff (12R)
	Cottober 15 Quarterly Repo	H	Report for the:	Ш	Convention (12C)	Special	(12S)		
	January 31 Year-End Repo		Electi	on on	M M /	D D /	Y		n the State of	
	July 31 Mid-Yei Report (Non-ele Year Only) (MY	ar (d) 3 ection	0-Day OST-Election		General (300	G)	Runoff (30R)	S	pecial (30S)
	Termination Re (TER)		Electi	on on	M = M /	D = D /	Y		n the state of	
5.	Covering Period	M M / D D D 07 01	2013	Y	through	M M 09	30	2013	Y	
l ce	ertify that I have examine	d this Report and	I to the best o	f my know	rledge and I	belief it is true	e, correct an	d complete.		
Тур	pe or Print Name of Treas	surer Jonathan F	leafitz							
Sig	nature of Treasurer	Jonathan Heafitz		ı	Electronically	y Filed] Da	ate 10	/ 11	/ Y	2013
NO	TE: Submission of false, e	rroneous, or incom	plete information	on may sul	oject the pers	son signing thi	is Report to t	he penalties	of 2 U.S	S.C. §437g.
	Office Use Only				-	-		FEC		1 3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

01 09 30 Report Covering the Period: 07 2013 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 7927.84 January 1, 2013 (b) Cash on Hand at 16857.82 Beginning of Reporting Period..... 38347.28 2417.30 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 19275.12 46275.12 6(a) and 6(c) for Column B)..... 11000.00 38000.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 8275.12 8275.12 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

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

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	Total Tills I criod	Calcilati Teal to Bate
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	2367.30	12897.28
(ii) Unitemized	50.00	450.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	2417.30	13347.28
(I) B (III 1 B	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	25000.00
(d) Total Contributions (add Lines	7	1 100000
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	2417.30	38347.28
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
-		
3. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	7	7
(b) Levin Funds (from Schedule H5)	0.00	0.00
(2) 25711 1 41165 (11611 561164416 116)	7	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	2417.30	38347.28
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	2417.30	38347.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

Calendar Year-to-Date 0.00 0.0 0.00 0.0 0.00 0.0 0.00 0.0 0.00 0.0 0.00 38000.0 0.00 0.0 0.00 0.0
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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	2417.30	38347.28
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2417.30	38347.28
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. 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 L	INE NU	JMBER	:	PAGE	6	OF	12
(check	only or	ne)					
X 1	1a	11b		11c	12		
13	3	14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Kristin Bass Mailing Address 812 N. Jackson St		Date of Receipt
		09 24 2013
City	State Zip Code	Transaction ID : SA11AI.4640
Arlington	VA 22201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	961.55
Name of Employer	Occupation	
Pharmaceutical Care Mgmt Assoc	SVP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3461.58	
Full Name (Last, First, Middle Initial) Tim Brogan		Date of Receipt
Mailing Address 2804 9th Street S		09 24 2013
City	State Zip Code	Transaction ID : SA11AI.4641
Arlington	VA 22204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
PCMA	Policy Analyst	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	720.00	
Full Name (Last, First, Middle Initial) Jonathan Heafitz		Date of Receipt
Mailing Address 2704 Emmet Road		09 24 2013
City Silver Spring	State Zip Code MD 20902	Transaction ID : SA11AI.4642 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
РСМА	Sr Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	450.00	
Other (specify) ▼	450.00	

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

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

I OIT LINE HOMBET			PAGE	7	OF	12		
(ch	eck only	or	ne)					
>	11a		11b		11c	12	2	
	13		14		15	16	3	17

NAME OF COMMITTEE (In Full)	ng the name and address of any political committee NAGEMENT ASSOCIATION POLITICAL	
Full Name (Last, First, Middle Initial) A. Barbara Levy		Date of Receipt
Mailing Address 522 N.Alfred Street		09 24 2013
City	State Zip Code	Transaction ID : SA11AI.4643
Alexandria	VA 22314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
PCMA	Assist VP State Affairs and GC	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. 199. 199. 10 10 10 10 10 10	
Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) 3. Brian McCarthy		Date of Receipt
Mailing Address 1922 37th Street		09 24 2013 _
City	State Zip Code	Transaction ID : SA11AI.4645
Washington	DC 20007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
PCMA	Assist VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1035.00	
Full Name (Last, First, Middle Initial)		Data of Descipt
Mailing Address 1401 North Oad St		Date of Receipt
#990		09 24 _2013 _
City	State Zip Code	Transaction ID : SA11AI.4647
Arlington	VA 22209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	480.75
Name of Employer	Occupation	_
Pharmaceutical Care Mgmt Assoc	VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1730.70	
SUBTOTAL of Receipts This Page (ontion	al)	1080.75
o	,	
TOTAL This Period (last page this line nu	mber only)	2367.30

SCHEDULE B (FEC Form 3X)	Hoo operate arts	dula/a\ I	NUMBER: PAGE 8 OF 12
ITEMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary	of the	
Any information copied from such Reports and Stat or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGE		•	
Full Name (Last, First, Middle Initial)			Date of Dielement
A. BENNET FOR COLORADO			Date of Disbursement
Mailing Address PO BOX 3078			07 30 2013
City	State Zip Code	е	Transaction ID : SB23.4659
DENVER Purpose of Disbursement	CO 80201		- Transaction is . 6526.4665
·			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
MICHAEL F BENNET Office Sought: House Disburs	oment For 2012	Туре	1000.00
Senate President	ement For: 2016 Primary Ger Other (specify) ▼	neral	
State: CO District: 00			
Full Name (Last, First, Middle Initial) B. CASTRO FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 544			09 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SAN ANTONIO	State Zip Code TX 78292	e	Transaction ID : SB23.4678
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name			Amount of Each Disbursement this Period
Joa Castro		Category/ Type	500.00
Office Sought: House Disburs	ement For: 2014 Primary Ger Other (specify)	neral	
Full Name (Last, First, Middle Initial) C. RONALD D DESANTIS			Date of Disbursement
Mailing Address PO BOX 405			09 26 2013
City PONTE VEDRA BEACH	State Zip Code 32004	e	Transaction ID : SB23.4683
Purpose of Disbursement			
Candidate Name		Category/	Amount of Each Disbursement this Period
RON DESANTIS FOR CONGRE	SS	Type	500.00
Office Sought: House Disburs	Primary Ger Other (specify)	neral	
			2000.00
SUBTOTAL of Disbursements This Page (optional))	<u> </u>	2000.00
TOTAL This Period (last page this line number on	ly)		

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 9 OF 12
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 X 23 24 25 26 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 MANAGEN	MENT ASSOCIATION P	OLITICAL A	CTION COMMITTEE (PCMA PAC)
<u>/</u>		,	
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. FREEDOM FUND			M M / D D / Y Y Y Y
Mailing Address 701 8TH STREET, NW			07 31 2013
SUITE 500			
City	State Zip Code		Transaction ID : SB23.4657
WASHINGTON Purpose of Disbursement	DC 20001		
r dipose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Catagony	
		Category/ Type	500.00
Office Sought: House Disburse	ement For:		
Senate	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. FRIENDS OF DAVID SCHWEIKE	RT		Date of Disbursement
TRIENDS OF BAVID SOFTWEINE	IX I		M = M / D = D / Y = Y = Y
Mailing Address 228 S WASHINGTON STREET STE 115			08 01 2013
City	State Zip Code		Transaction ID : SB23.4662
ALEXANDRIA Purpose of Disbursement	VA 22314		
Fulpose of Disbulsement			Amount of Each Disbursement this Period
Candidate Name		Catagony	
		Category/ Type	500.00
	ement For: 2014		
	Primary General		
President State: AZ District: 06	Other (specify) ▼		
State: AZ District: 06 Full Name (Last, First, Middle Initial)			
C. FRIENDS OF TREY RADEL			Date of Disbursement
- INILINDO OF THE FRADEL			M M / D D / Y Y Y Y
Mailing Address PO BOX 1329			09 30 2013
0"	7: 0 1		
City FORT MYERS	State Zip Code FL 33902		Transaction ID : SB23.4700
Purpose of Disbursement	7.2 33302		
			Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
HENRY J. III RADEL		Туре	500.00
	ement For: 2014		
Senate President	Primary General Other (specify) ▼		
State: FL District: 19	Salor (Spoony)		
.,			
SUBTOTAL of Disbursements This Page (optional)			1500.00
TOTAL This Period (last page this line number only	/)		

Any information copied from such Reports and States of for commercial purposes, other than using the nare NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGEM Full Name (Last, First, Middle Initial) - JOE GARCIA Mailing Address 4710 SW 67TH AVENUE #H7	for each Detailed ments may me and add	dress of any polition	21b 27 seed by any persocal committee to	22 X 23 24 25 20 28c 29 36c 29 29 36c 29 29 36c 29 29 29 29 29 29 29 29 29 29 29 29 29
r for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGEN Full Name (Last, First, Middle Initial) JOE GARCIA Mailing Address 4710 SW 67TH AVENUE #H7	me and add	dress of any polition	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGEM Full Name (Last, First, Middle Initial) JOE GARCIA Mailing Address 4710 SW 67TH AVENUE #H7				
Mailing Address 4710 SW 67TH AVENUE #H7				
Mailing Address 4710 SW 67TH AVENUE #H7				
#H7				Date of Disbursement
City,				09 25 2013
City MIAMI	State FL	Zip Code 33155		Transaction ID : SB23.4673
Purpose of Disbursement		33133		
·				Amount of Each Disbursement this Period
Candidate Name JOE GARCIA FOR CONGRESS			Category/ Type	500.00
Office Sought: House Disburser	ment For: Primary Other (spe	General	71.	
Full Name (Last, First, Middle Initial)				
· JOHNSON FOR CONGRESS				Date of Disbursement
Mailing Address P.O. BOX 14496				07 18 2013
POLAND	State OH	Zip Code 44514		Transaction ID : SB23.4648
Purpose of Disbursement			· · ·]	Amount of Each Disbursement this Period
Candidate Name			Category/ Type	1250.00
	ment For: Primary Other (spe	General		
Full Name (Last, First, Middle Initial) - MARK POCAN FOR CONGRESS				Date of Disbursement
Mailing Address PO BOX 327				07 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code		Transaction ID : SB23.4654
MADISON Purpose of Disbursement	WI	53701		11a113a6ti011 ID . 3D23.4034
i dipose oi Dispuisement				Amount of Each Disbursement this Period
			Category/	
Candidate Name				1000.00
Office Sought: House Senate President Disburse	ment For: Primary Other (spe	General	Type	1000.00
Office Sought: House Senate President Disburse	Primary Other (spe	General ecify) ▼	Type	2750.00

ess of any polition	cal committee to	one) 22 X 23 24 25 2 28a 28b 28c 29 3 on for the purpose of soliciting contributions osolicit contributions from such committee. CTION COMMITTEE (PCMA PAC) Date of Disbursement M M / D D / 2013 Transaction ID : SB23.4692 Amount of Each Disbursement this Period 500.00
OCIATION P Zip Code 25325 014 General	Category/	Date of Disbursement Transaction ID: SB23.4692 Amount of Each Disbursement this Period Date of Disbursement
Zip Code 25325	Category/	CTION COMMITTEE (PCMA PAC) Date of Disbursement M M M / P D / Y Y Y Y Y Date of Disbursement this Period Date of Disbursement Date of Disbursement
25325 014 General		Transaction ID: SB23.4692 Amount of Each Disbursement this Period 500.00 Date of Disbursement
25325 014 General		Transaction ID: SB23.4692 Amount of Each Disbursement this Period 500.00 Date of Disbursement
25325 014 General		Transaction ID : SB23.4692 Amount of Each Disbursement this Period 500.00 Date of Disbursement
25325 014 General		Amount of Each Disbursement this Period 500.00 Date of Disbursement
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General		Date of Disbursement
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Zip Code 07740		Transaction ID : SB23.4651
		Amount of Each Disbursement this Period
	Category/ Type	2500.00
General ify) ▼		
	-	Date of Disbursement
		09 17 2013
Zip Code 44282		Transaction ID : SB23.4669
		Amount of Each Disbursement this Period
	Category/ Type	500.00
General		
		3500.00
	General ify) Special-Prima Zip Code 44282 014 General ify) General	Category/ Type Color of the co

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12 OF 1
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 21b 22 X 23 24 25 2
	Betalied Guillinary 1 age	27 28a 28b 28c 29 3
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar	nents may not be sold or used ne and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGEM	ENT ASSOCIATION POL	LITICAL ACTION COMMITTEE (PCMA PAC)
Full Name (Last, First, Middle Initial)		
A. TOM REED FOR CONGRESS		Date of Disbursement
Mailing Address PO BOX 391	7'- 0-4	09 26 2013
City GENEVA	State Zip Code NY 14456	Transaction ID : SB23.4687
Purpose of Disbursement	14456	
Candidate Name		Amount of Each Disbursement this Period
THOMAS W II REED		Category/ 750.00
	ment For: 2014	Type
	Primary General Other (specify) ▼	
State: NY District: 23		
Full Name (Last, First, Middle Initial)		
B. JUAN C. VARGAS		Date of Disbursement
Mailing Address 5429 MADISON AVE		09 26 2013
SACRAMENTO	State Zip Code 95841	Transaction ID : SB23.4697
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name VARGAS FOR CONGRESS	(Category/ Type 500.00
Office Sought: House Disburser	nent For: 2014	
Senate President	Primary General Other (specify) ▼	
State: CA District: 51		
Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		Amount of Each Disbursement this Period Category/ Type
Office Sought: Senate President State: Disburser	nent For: Primary General Other (specify)	
State. District.		
SUBTOTAL of Disbursements This Page (optional)		1250.00