Image# 12950084304 PAGE 1 / 11

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

					Office Use Only
NAME OF TY COMMITTEE (in full)	YPE OR PRINT ▼	Example: If over the lin	typing, type es.	12FE4M5	
PHARMACEUTICAL CARE	MANAGEMENT A	ASSOCIATION PO	DLITICAL ACT	ION COMMI	TTEE (PCMA PAC)
ADDRESS (number and street)	601 PENNSYLVANIA A	AVENUE NW STE 740			
Check if different than previously reported. (ACC)	WASHINGTON			DC	20004
2. FEC IDENTIFICATION NUM	IBER ▼	CITY ▲		STATE A	ZIP CODE ▲
C C00388819		B. IS THIS REPORT	NEW (N) <b>OR</b>	× AMI	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 2	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due on.	Mar 20 (M3)	Jun 20 (M6)		20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)	Jul 20 (M7)		Jan 31 (YE)
July 15 Quarterly Report (Q2)	(C) 12-Day		(12P) tion (12C)	General (	
October 15 Quarterly Report (Q3)					
X January 31 Year-End Report (YE)	, E	lection on	/ D D /	Y   Y   Y   Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Electic		(30G)	Runoff (30	DR) Special (30S)
Termination Report (TER)	Report for th	lection on	/ D D /	Y . Y . Y . Y	in the State of
5. Covering Period 10		111 throu	ugh 12	/ 31 /	2011
I certify that I have examined this	Report and to the bear	st of my knowledge	and belief it is tru	e, correct and	complete.
Type or Print Name of Treasurer	Jonathan Heafitz				
Signature of Treasurer Jonatha	ın Heafitz	[Electro	nically Filed]	Date 01	13 2012
NOTE: Submission of false, erroneo	us, or incomplete inform	nation may subject the	e person signing th	nis Report to the	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a	Cash on Hand January 1, 2011		13220.72
(t	Cash on Hand at Beginning of Reporting Period	13904.54	
(0	Total Receipts (from Line 19)	8406.08	50839.90
(0	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22310.62	64060.62
To	otal Disbursements (from Line 31)	11000.00	52750.00
R	ash on Hand at Close of eporting Period ubtract Line 7 from Line 6(d))	11310.62	11310.62
th	ebts and Obligations Owed TO e Committee (Itemize all on chedule C and/or Schedule D)	0.00	
th	ebts and Obligations Owed BY e Committee (Itemize all on chedule C and/or Schedule D)	0.00	

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (PCMA PAC)

I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3406.08	14839.90
(i) itemized (use otherwise A)		
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	3406.08	14839.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	5000.00	
(such as PACs)	5000.00	35000.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	9406.09	49839.90
Totals to Line 33, page 5)	8406.08	49039.90
. Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
6. All Loans Received		0.00
	0.00	0.00
Loan Repayments Received	0.00	0.00
6. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other		
Political Committees	0.00	1000.00
Other Federal Receipts	7	
(Dividends, Interest, etc.)	0.00	0.00
s. Transfers from Non-Federal and Levin Funds	0.00	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Levill Fallas (ilem consado Fle)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
o. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	8406.08	50839.90
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	8406.08	50839.90

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period		
. Operating Expenditures: — (a) Allocated Federal/Non-Federal		Calendar Year-to-Date	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	0.00	0.00	
Expenditures(c) Total Operating Expenditures	0.00	0.00	
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00	
Transfers to Affiliated/Other Party			
Committees	0.00	0.00	
Contributions to Federal Candidates/Committees			
and Other Political Committees	11000.00	52750.00	
Independent Expenditures			
(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	2.22	
(use Schedule F)	0.00	0.00	
Loan Repayments Made	0.00	0.00	
Loan nepayments wade		5.00	
Loans Made	0.00	0.00	
Refunds of Contributions To:		7	
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
F			
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees		0.00	
(such as PACs)	0.00	0.00	
(d) Total Contribution Refunds			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
(add Lines 20(a), (b), and (c))		7 7	
Other Disbursements	0.00	0.00	
	7	7 7	
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)	0.00	0.00	
(i) Federal Share	0.00	0.00	
(ii) "Lovin" Shara	0.00	0.00	
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00		
With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add	7		
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))	11000.00	52750.00	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)	44000.00	52750.00	
from Line 31)	11000.00	52750.00	

#### **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)	8406.08	49839.90
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8406.08	49839.90
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

ı	FOR LINE	NUMBER	: PAGE	6 OF	11
ı	(check onli	y one)			
	<b>X</b> 11a	11b	11c	12	
	13	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 or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MAN	AGEMENT ASSOCIATION POLITICAL A	CTION COMMITTEE (PCMA PAC)
Full Name (Last, First, Middle Initial)  A. Kristin Bass		Date of Receipt
Mailing Address 812 N. Jackson Street		12 08 2011
City	State Zip Code	Transaction ID : SA11AI.4970
Arlington	VA 22201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1730.73
Name of Employer	Occupation	
Pharmaceutical Care Mgmt Assoc	Senior VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial)  3. Tim Brogan	<u>'</u>	Date of Receipt
Mailing Address 2301 Columbia Pike		M M / D D / Y Y Y Y
Apt 628		12 08 2011
City	State Zip Code	Transaction ID : SA11AI.4973
Arlington	VA 22204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	360.00
Name of Employer	Occupation	
PCMA	Assist VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial)  Jonathan Heafitz		Date of Receipt
Mailing Address 2704 Emmet Road		12 08 2011
City	State Zip Code	Transaction ID : SA11AI.4975
Silver Spring	MD 20902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	135.00
Name of Employer	Occupation	
PCMA	Director, Federal Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggregate roal to bate v	
Other (specify) ▼	390.00	
SUBTOTAL of Receipts This Page (optional)		2225.73
TOTAL This Period (last page this line numb	per only)	

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

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

FOR LINE	NUMBER	: PAGE	7 OF	11
(check onl	y one)			
<b>X</b> 11a	11b	11c	12	
13	14	15	16	17

NAME OF COMMITTEE (In Full)	g the name and address of any political committee  NAGEMENT ASSOCIATION POLITICAL	
Full Name (Last, First, Middle Initial)  A. Barbara Levy	WAS ENTERED ASSOCIATION FOR TOTAL	
Mailing Address 522 N.Alfred Street		Date of Receipt  12 08 2011
City	State Zip Code	Transaction ID : SA11AI.4976
Alexandria	VA 22314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	180.00
Name of Employer	Occupation	7
PCMA	Assist VP State Affairs and GC	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General  Other (specify) ▼	520.00	
Full Name (Last, First, Middle Initial)  Brian McCarthy	•	Date of Receipt
Mailing Address 1922 37th Street		M M / D D / Y Y Y Y
City	State Zip Code	12 08 2011 Transaction ID - SA44A1 4077
Washington	DC 20007	Transaction ID : SA11AI.4977  Amount of Each Receipt this Period
		Amount of Each neceipt this Period
FEC ID number of contributing federal political committee.	C	135.00
Name of Employer	Occupation	7
PCMA	Assist VP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		
Jerry Steffl		Date of Receipt
Mailing Address 1220 N Nash Street #1142		12 08 2011
City	State Zip Code	Transaction ID : SA11AI.4978
Arlington	VA 22209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	865.35
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2499.90	
SUBTOTAL of Receipts This Page (optional	al)	1180.35
TOTAL This Period (last page this line num	nber only)	3406.08

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

	F	OR	LINE	NU	MBER	:	PAGE	8	OF	11
Use separate schedule(s) for each category of the	(0	che	ck only	or	, ′			,		
Detailed Summary Page			11a		11b	X	11c	12	!	
, 3			13		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

	sing the name and address of any political committee to			
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE M	ANAGEMENT ASSOCIATION POLITICAL A	CTION COMMITTEE (PCMA PAC)		
Full Name (Last, First, Middle Initial) UNITEDHEALTH GROUP INCO Mailing Address 9900 BREN ROAD EA	Date of Receipt			
City	State Zip Code	11 01 2011 Transaction ID : SA11C.4968		
MINNETONKA	MN 55343	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C C00274431	5000.00		
Name of Employer	Occupation			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00			
Full Name (Last, First, Middle Initial)  3.		Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С			
Name of Employer	Occupation			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name (Last, First, Middle Initial)	•	Date of Receipt		
Mailing Address	Mailing Address			
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С			
Name of Employer	Occupation			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (opti-	onal)	5000.00		
	<u> </u>	5000.00		
<b>TOTAL</b> This Period (last page this line r	numper only)	3330.00		

## ľ

SC	HEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 9 OF 11
ITE	MIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
		Detailed Summary Page	21b	22 X 23 24 25 26
			27	28a 28b 28c 29 30b
	information copied from such Reports and Staten or commercial purposes, other than using the name			
I \	NAME OF COMMITTEE (In Full)			
/	PHARMACEUTICAL CARE MANAGEM	ENT ASSOCIATION F	POLITICAL A	CTION COMMITTEE (PCMA PAC)
<u></u>	Full Name (Last, First, Middle Initial)			
	BASS VICTORY COMMITTEE			Date of Disbursement
	BAGG VIGTORT GOWWITTEE			M M / D D / Y Y Y Y
N	Mailing Address PO BOX 3451			11 29 2011
-	24.	75. O. d.		
	CONCORD	State Zip Code NH 03302		Transaction ID : SB23.4962
	Purpose of Disbursement	03302		
				Amount of Each Disbursement this Period
(	Candidate Name		Category/	1000.00
			Type	1000.00
(		nent For: 2012		
		Primary General		
	President  State: NH District: 02	Other (specify) ▼		
	Full Name (Last, First, Middle Initial)			
	BILL NELSON FOR U S SENATE			Date of Disbursement
	BILL NELSON FOR 0.3 SENATE			M = M / D = D / Y = Y = Y
ľ	Mailing Address 972 W WHITMIRE DRIVE			11 09 2011
		State Zip Code		Transaction ID : SB23.4949
	MELBOURNE Purpose of Disbursement	FL 32935		
	a.pece of Dissarcoment			Amount of Each Disbursement this Period
7	Candidate Name		Category/	
			Type	2500.00
(		nent For: 2012		
		Primary General		
	President State: FL District: 00	Other (specify) ▼		
	Full Name (Last, First, Middle Initial)			
_	BILL OWENS FOR CONGRESS			Date of Disbursement
	BILL OWENCE ON CONCRECO			M M / D D / Y Y Y Y
N	Mailing Address PO BOX 1575			10 24 2011
-	200	· · · · · · · · · · · · · · · · · · ·		
	City SPLATTSBURGH	State Zip Code NY 12901		Transaction ID: SB23.4943
	Purpose of Disbursement	12301		
				Amount of Each Disbursement this Period
(	Candidate Name		Category/	750.00
_			Type	750.00
(		nent For: 2012		
	Senate President	Primary General		
ç	State: NY District: 23	Other (specify) ▼		
$\overline{}$	141 5161161 20			
SI	BTOTAL of Disbursements This Page (optional)			4250.00
			<u>_</u>	

Use separate schect for each category or Detailed Summary II  Any information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any NAME OF COMMITTEE (In Full)  PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION  Full Name (Last, First, Middle Initial)  A. FRIENDS OF LOIS CAPPS  Mailling Address PO BOX 23940  City State Zip Code SANTA BARBARA CA 93121  Candidate Name  Office Sought: House Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  B. TREY GOWDY  Mailling Address PO BOX 3324  City State Zip Code SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Sc 29304  Full Name (Last, First, Middle Initial)  State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH	the age 21b 27 or used by any perspolitical committee to 21b 27  ON POLITICAL A  Category/ Type	22 X 23 24 25 26 28 28 28 29 30 30 30 30 30 30 30 30 30 30 30 30 30	
or for commercial purposes, other than using the name and address of any  NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION  Full Name (Last, First, Middle Initial)  A. FRIENDS OF LOIS CAPPS  Mailing Address PO BOX 23940  City State Zip Code SANTA BARBARA CA 93121  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  B. TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Senate President Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH	Category/	Date of Disbursement  Transaction ID: SB23.4965  Amount of Each Disbursement this Period  Date of Disbursement 1000.00  Date of Disbursement 1000.00	
NAME OF COMMITTEE (In Full) PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION Full Name (Last, First, Middle Initial)  A. FRIENDS OF LOIS CAPPS  Mailing Address PO BOX 23940  City State Zip Code SANTA BARBARA CA 93121  Candidate Name  Office Sought: House Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  B. TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH	Category/	Date of Disbursement  Transaction ID: SB23.4965  Amount of Each Disbursement this Period  Date of Disbursement  Transaction ID: SB23.4965  Transaction ID: SB23.4965	
Mailing Address PO BOX 23940  City State Zip Code SANTA BARBARA CA 93121  Candidate Name  Office Sought: House Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  Correct Congress	Type	Transaction ID: SB23.4965  Amount of Each Disbursement this Period  1000.00  Date of Disbursement  11 29 2011  Transaction ID: SB23.4982	
Tity State Zip Code SANTA BARBARA CA 93121  Candidate Name  Office Sought: House Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name  TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  Corrected to the Code State Sc Sc Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  Corrected to the Code State Sc Sc Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  Corrected to the Code State Sc Sc Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  Corrected to the Code State Sc	Type	Transaction ID: SB23.4965  Amount of Each Disbursement this Period  1000.00  Date of Disbursement  11 29 2011  Transaction ID: SB23.4982	
City State Zip Code SANTA BARBARA CA 93121  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  Corrected to the code of the code	Type	Transaction ID : SB23.4965  Amount of Each Disbursement this Period  1000.00  Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
SANTA BARBARA Purpose of Disbursement  Candidate Name  Office Sought:  Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  TREY GOWDY  Mailing Address PO BOX 3324  City SPARTANBURG SC SPARTANBURG Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought:  House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  CORRIN G HATCH	Type	Amount of Each Disbursement this Period  1000.00  Date of Disbursement  11 29 2011  Transaction ID: SB23.4982	
Purpose of Disbursement  Candidate Name  Office Sought:	Type	Amount of Each Disbursement this Period  1000.00  Date of Disbursement  11 29 2011  Transaction ID: SB23.4982	
Candidate Name  Office Sought:	Type	Date of Disbursement  11 29 2011  Transaction ID: SB23.4982	
Office Sought:	Type	Date of Disbursement  11 29 2011  Transaction ID: SB23.4982	
Senate President State: CA District: 23  Full Name (Last, First, Middle Initial)  B. TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought:  Senate President Senate President Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH	ral	11 29 2011  Transaction ID : SB23.4982	
Full Name (Last, First, Middle Initial)  B. TREY GOWDY  Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH		11 29 2011  Transaction ID : SB23.4982	
Mailing Address PO BOX 3324  City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH		11 29 2011  Transaction ID : SB23.4982	
City State Zip Code SPARTANBURG SC 29304  Purpose of Disbursement  Candidate Name  TREY GOWDY FOR CONGRESS  Office Sought: House Senate President President State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH		11 29 2011  Transaction ID : SB23.4982	
SPARTANBURG Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought:  Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C- ORRIN G HATCH		-	
SPARTANBURG Purpose of Disbursement  Candidate Name TREY GOWDY FOR CONGRESS  Office Sought:  Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  CORRIN G HATCH		-	
Candidate Name  TREY GOWDY FOR CONGRESS  Office Sought:    House   Senate   President   Other (specify)   ▼  State: SC District: 04  Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH	I	Amount of Each Disbursement this Period	
TREY GOWDY FOR CONGRESS  Office Sought: House Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  ORRIN G HATCH  TREY GOWDY FOR CONGRESS  Disbursement For: 2012  Primary Gen Other (specify) ▼			
Senate President State: SC District: 04  Full Name (Last, First, Middle Initial)  C- ORRIN G HATCH  Senate Primary Other (specify) ▼  ORRIN G HATCH	Category/ Type	1000.00	
Full Name (Last, First, Middle Initial)  C. ORRIN G HATCH	ral		
	Full Name (Last, First, Middle Initial)		
Mailing Address 175 SOUTH WEST TEMPLE SUITE 650		10 24 2011	
City State Zip Code			
SALT LAKE CITY UT 84101 Purpose of Disbursement		Transaction ID : SB23.4986	
•		Amount of Each Disbursement this Period	
Candidate Name HATCH ELECTION COMMITTEE INC	Category/ Type	2500.00	
Office Sought:  House Senate President  State: UT  Disbursement For: 2012  Primary Other (specify) ▼  Other (specify) ▼			
	ral		
SUBTOTAL of Disbursements This Page (optional)		4500.00	

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S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 11 C	OF 11			
ITEMIZED DISBURSEMENTS		Use separate schedule(s for each category of the	) (check only	(check only one)				
		Detailed Summary Page	21b	22 X 23 24 25 28a 28b 28c 29	26 30b			
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	ny information copied from such Reports and Statem for commercial purposes, other than using the name							
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	PHARMACEUTICAL CARE MANAGEM	ENT ASSOCIATION I	POLITICAL A	CTION COMMITTEE (PCMA P.	AC)			
$\angle$	Full Name (Lost First Middle Initial)							
Δ.	Full Name (Last, First, Middle Initial)  HORSFORD FOR CONGRESS			Date of Disbursement				
	HORSFORD FOR CONGRESS	M M / D D / Y Y Y	V					
	Mailing Address 6100 ELTON AVE SUITE 1000			11 17 2011				
		State Zip Code NV 89107		Transaction ID : SB23.4952				
	LAS VEGAS Purpose of Disbursement	NV 89107						
	Turpose of Biobarooment			Amount of Each Disbursement this F	Period			
	Candidate Name		Category/		-			
			Type	250	.00			
		nent For: 2012						
		Primary General						
	State: NV District: 04	Other (specify) ▼						
_	3							
В	Full Name (Last, First, Middle Initial)  KLINE FOR CONGRESS			Date of Disbursement				
Mailing Address 101 W BURNSVILLE PKWY SUITE 104				M M / D D / Y Y Y	V			
				11 17 2011				
	City	State Zip Code						
	•	MN 55337		Transaction ID : SB23.4955				
	Purpose of Disbursement							
				Amount of Each Disbursement this F	Period			
	Candidate Name		Category/	1000	0.00			
	Office Sought:	nent For: 2012	Туре					
		Primary General						
		Other (specify) ▼						
	State: MN District: 02							
	Full Name (Last, First, Middle Initial)							
C.	MANCHIN FOR WEST VIRGINIA	Date of Disbursement						
	Mailing Address PO BOX 5202			11 08 2011	Υ			
	Maining Address 1 0 BOX 3202			11 00 2011	_			
	City	State Zip Code		Transaction ID : SB23.4946				
		WV 25361	_	Transaction ID . 3B23.4340				
	Purpose of Disbursement							
	Candidate Name			Amount of Each Disbursement this F	Period			
	Canadate Hame		Category/ Type	1000	.00			
	Office Sought: House Disbursen	nent For: 2012	.,,,,					
	X Senate	Primary General						
	President	Other (specify) ▼						
	State: WV District: 00							
				2250	00			
Ľ	SUBTOTAL of Disbursements This Page (optional)		·····•	2230	.50			
١,	OTAL This Period (last nage this line number only)			11000	.00			
	TOTAL This Period (last page this line number only)							