Image# 13960811314 PAGE 1 / 20

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other	Than An Au	tnorized	Committ	ee		Office Us	e Only	
NAME OF COMMITTEE (in full)	TYPE OR I	PRINT ▼		ımple: If typi r the lines.	ing, type	12FE4M5	5		
Consumer Healthcare	Product	s Associatio	n PAC	(CHPA/	PAC)				
ADDDECC (seemless and street)	900 19th	Street, NW	1 1 1					1 1 1	1
ADDRESS (number and street)	Suite 700)							
Check if different than previously	Washing	ıton				DC I	20006		
reported. (ACC)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
2. FEC IDENTIFICATION NU	JMBER ▼	C	ITY 🛦		S	STATE 🛦		ZIP CODE	A
C C00040584			IS THIS REPORT		NEW (N) OR	× AI	MENDED .)		
4. TYPE OF REPORT (Choose One)	(b) Mor Rep		b 20 (M2)		May 20 (M5)	Aug	20 (M8)	(No Yea	ov 20 (M11) n-Election ur Only)
(a) Quarterly Reports:		Ma	ar 20 (M3)	Ш	Jun 20 (M6)	Sep	20 (M9)	(No	ec 20 (M12) n-Election rr Only)
April 15		Ap	or 20 (M4)		Jul 20 (M7)	Oct	20 (M10)	Jai	n 31 (YE)
Quarterly Report (Q July 15	(c)	12-Day		Primary (12F	P)	General	(12G)	Rui	noff (12R)
Quarterly Report (Q	(2)	PRE-Election Report for the:	П	Convention	(12C)	Special	(12S)		
October 15 Quarterly Report (Q	(3)				_				
January 31 Year-End Report (Y	E)	Elect	ion on	M M /	D D /	Y		in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d)	30-Day POST-Election		General (30	G)	Runoff (30R)	Spe	ecial (30S)
Termination Report (TER)		Report for the:		M = M /	D D /	Y = Y = Y = Y	-	in the	
(TEH)		Elect	ion on					State of	
5. Covering Period 01	M / D 01		Y	through	M M	30	201	1 Y	
I certify that I have examined th	is Report a	nd to the best of	of my kno	wledge and	belief it is true	e, correct ar	d complet	e.	
Type or Print Name of Treasure	r Roman (G. Blazauskas							
Signature of Treasurer Roma	ın G. Blazaus	kas		[Electronicall	ly Filed] D	ate 02	M / D 07		013
NOTE: Submission of false, errone	eous orino	omplete informati	on mav ei	ibject the ner	rson sianina th	is Report to t	he penaltic	es of 2 IIS	C. 8437a
Office Office	300, 07 1110		III III St	,001 110 POI				FORM	
Use Only							1	ev. 12/2004	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Consumer Healthcare Products Association PAC (CHPA/PAC)

Report Covering the Period: From: 01 01 2011 To: 06 30 2011

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2011		6729.91
	(b) Cash on Hand at Beginning of Reporting Period	6729.91	
	(c) Total Receipts (from Line 19)	21269.33	21269.33
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27999.24	27999.24
7.	Total Disbursements (from Line 31)	12969.86	12969.86
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15029.38	15029.38
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY 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:

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

Consumer Healthcare Products Association PAC (CHPA/PAC)

I. Receipts Is (other than loans) From: als/Persons Other colitical Committees ized (use Schedule A) Party Committees In It (a)(i) and (ii)	COLUMN A Total This Period 12762.58 1006.75 13769.33 0.00 7500.00	COLUMN B Calendar Year-to-Date 12762.58 1006.75 13769.33
als/Persons Other colitical Committees ized (use Schedule A)	1006.75 13769.33 0.00	1006.75 13769.33
emized Party Committees Party Committees pilitical Committees	1006.75 13769.33 0.00	1006.75 13769.33
emized emized AL (add s 11(a)(i) and (ii) Party Committees olitical Committees s PACs)	1006.75 13769.33 0.00	1006.75 13769.33
emized AL (add s 11(a)(i) and (ii)	1006.75 13769.33 0.00	1006.75
Party Committeesolitical Committees s PACs)	13769.33 0.00	13769.33
Party Committees Party Committees S PACs)	0.00	
olitical Committees s PACs)		0.00
s PACs)	7500.00	
		7500.00
	7	
, (b), and (c)) (Carry		
	21269.33	21269.33
	7	
	0.00	0.00
_		
eceived	0.00	0.00
marks Described	0.00	0.00
	0.00	0.00
· ·	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
		0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	0.00	0.00
chedule H3)	0.00	0.00
	0.00	
nds (from Schedule H5)	0.00	0.00
nsfers (add 18(a) and 18(b))	0.00	0.00
	contributions Made and dates and Other mittees	om Affiliated/Other ittees

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Gliou	Calelidal Teat-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(i) N 5 1 101	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
(b) Other Federal Operating Expenditures	139.73	139.73
(c) Total Operating Expenditures	7	
(add 21(a)(i), (a)(ii), and (b))▶	139.73	139.73
Transfers to Affiliated/Other Party		
ConmitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	12330.13	12330.13
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Zoan riopaymonio madominimimimi		
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
4	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(00011 00 17100)		
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	500.00	500.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
		0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Emics 66(a)(i), 66(a)(ii) and 66(b))	7	7
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	12969.86	12969.86
	7	7
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	10000 00	40000 00
from Line 31)	12969.86	12969.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures						
3. Total Contributions (other than loans) (from Line 11(d), page 3)	21269.33	21269.33				
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21269.33	21269.33				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	139.73	139.73				
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
Net Operating Expenditures (subtract Line 37 from Line 36)	139.73	139.73				

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

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	and Statements may not be sold or used by any pering the name and address of any political committee	
NAME OF COMMITTEE (In Full)	usts Association BAC (CUBA/DAC)	
/ Consumer Healthcare Prod	ucts Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial) Mr. J.P. Borneman		Date of Receipt
Mailing Address 722 Harriton Road		03 06 2011
City	State Zip Code	Transaction ID : SA11AI.6001
Bryn Mawr	PA 19010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	†
Hylands	Chairman & CEO	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Chris Combe	•	Date of Receipt
Mailing Address 1 Spring Road		05 18 _2011 _
City	State Zip Code	Transaction ID : SA11AI.5995
Greenwich	CT 06830	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	1000.00
Name of Employer	Occupation	
Combe Incorporated	Chairman	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Chris DeWolf		Date of Receipt
Mailing Address 2320 Linden Dr SE		06 15 2011
City	State Zip Code	Transaction ID : SA11AI.6005
Cedar Rapids	IA 52403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	-
Lil' Drug Store Products, Inc	President and CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2000.00	
Other (specify) ▼	2000.00	
SURTOTAL of Receipts This Page (antion	al)	4000.00
SOBIOTAL of necespts This Page (option	ها/	
TOTAL This Period (last page this line nul	mber only)	

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

FO	R LINE	NU	MBER	PAGE	7	OF	20	
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Consumer Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) Scott Emerson Date of Receipt Mailing Address 407 East Lancaster Ave. 2011 24 City State Zip Code Transaction ID: SA11AI.6008 PΑ Wayne 19087 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Name of Employer Occupation The Emerson Group President Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Vera L. Grill Date of Receipt Mailing Address 1924 North Woodley Street 30 04 2011 City State Zip Code Transaction ID: SA11AI.6092 VA Arlington 22207 Amount of Each Receipt this Period FEC ID number of contributing 62.50 federal political committee. Name of Employer Occupation **CHPA** Director, Federal Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Vera L. Grill Date of Receipt Mailing Address 1924 North Woodley Street 05 15 2011 Zip Code City State Transaction ID: SA11AI.6093 Arlington VA 22207 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)		Ī	7	_		7	2	125	5.00	
TOTAL This Period (last page this line number only)			7		_	7	 _			

312.50

С

Occupation

Director, Federal Affairs

Aggregate Year-to-Date ▼

62.50

FEC ID number of contributing

General

federal political committee.

Other (specify)

Name of Employer

Primary

CHPA Receipt For:

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

FOF	R LINE	NU	MBER	PAGE		8	OF		20			
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	and Statements may not be sold or used by any per ag the name and address of any political committee	
NAME OF COMMITTEE (In Full)	Lote Accopiation BAC (CUBA/DAC)	
/ Consumer nearmeare Produ	ucts Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1924 North Woodley Str	eet	05 31 2011
City	State Zip Code	Transaction ID : SA11AI.6094
Arlington	VA 22207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.50
Name of Employer	Occupation	-
СНРА	Director, Federal Affairs	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) 3. Vera L. Grill		Date of Receipt
Mailing Address 1924 North Woodley Stre	eet	06 15 2011
City	State Zip Code	Transaction ID : SA11AI.6095
Arlington	VA 22207	Amount of Each Receipt this Period
FEC ID number of contributing	0	
federal political committee.	C	62.50
Name of Employer	Occupation	-
CHPA	Director, Federal Affairs	
Receipt For:		+
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	437.50	
Full Name (Last, First, Middle Initial)	-	Date of Receipt
Mailing Address 1924 North Woodley Str	eet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6096
Arlington	VA 22207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	62.50
Name of Employer	Occupation	+
CHPA	Director, Federal Affairs	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	al)	187.50
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
TOTAL This Period (last page this line nur	mber only)	

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

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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
igr > Consumer Healthcare Products	Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial) A. Bill Head		Date of Receipt
Mailing Address 501 Slaters Lane		M = M / D = D / Y = Y = Y
Apt. 816	State 7's Code	06 15 2011
City Alexandria	State Zip Code VA 22314	Transaction ID : SA11AI.6039
	ELUIT	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Consumer Healthcare Products	Vice President, Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	30 0	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Bill Head		Date of Receipt
Mailing Address 501 Slaters Lane		M = M / D = D / Y = Y = Y
Apt. 816	State 7in Code	06 30 2011
City Alexandria	State Zip Code VA 22314	Transaction ID : SA11AI.6040
	22314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Consumer Healthcare Products	Vice President, Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) C. Patrick Lonergan		Date of Receipt
Mailing Address 165 Northfield Avenue		06 21 2011
City	State Zip Code	Transaction ID : SA11AI.6007
Edison	NJ 08837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
NUMARK Labs	Partner, President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1150.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Consumer Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) James L. Medford Date of Receipt Mailing Address 107 Outrigger 2011 28 City Zip Code State Transaction ID: SA11AI.6011 SC Greenwood 29649 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation President and CEO Aaron Industries, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 01 15 2011 City State Zip Code Transaction ID: SA11AI.6060 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation Consumer Healthcare Products President and CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 208.34 Other (specify) Full Name (Last, First, Middle Initial) c. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 01 31 2011 City Zip Code State Transaction ID: SA11AI.6062 Vienna VA 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 С federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 416.68 Other (specify) 1416.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Consumer Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 2011 City Zip Code State Transaction ID: SA11AI.6063 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 625.02 Other (specify) Full Name (Last, First, Middle Initial) B. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 02 28 2011 City State Zip Code Transaction ID: SA11AI.6064 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation Consumer Healthcare Products President and CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 833.36 Other (specify) Full Name (Last, First, Middle Initial) c. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 03 15 2011 City Zip Code State Transaction ID: SA11AI.6065 Vienna VA 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 С federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 1041.70 Other (specify) 625.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Consumer Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 2011 03 31 City Zip Code State Transaction ID: SA11AI.6066 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.04 Other (specify) Full Name (Last, First, Middle Initial) B. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 04 15 2011 City State Zip Code Transaction ID: SA11AI.6067 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation Consumer Healthcare Products President and CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1458.38 Other (specify) Full Name (Last, First, Middle Initial) c. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 30 04 2011 City Zip Code State Transaction ID: SA11AI.6068 Vienna VA 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 С federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 1666.72 Other (specify) 625.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Consumer Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 2011 City Zip Code State Transaction ID: SA11AI.6069 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 1875.06 Other (specify) Full Name (Last, First, Middle Initial) B. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 05 31 2011 City State Zip Code Transaction ID: SA11AI.6070 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 federal political committee. Name of Employer Occupation Consumer Healthcare Products President and CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 2083.40 Other (specify) Full Name (Last, First, Middle Initial) c. Scott M. Melville Date of Receipt Mailing Address 1596 Lupine Den Court 06 15 2011 City Zip Code State Transaction ID: SA11AI.6071 Vienna VA 22182 Amount of Each Receipt this Period FEC ID number of contributing 208.34 С federal political committee. Name of Employer Occupation President and CEO Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 2291.74 Other (specify) 625.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOF	LINE	NU	UMBER: PAGE 1					OF		20
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Any information copied from such Reports and or for commercial purposes, other than using to	d Statements may not be sold or used by any per the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Consumer Healthcare Produc	ts Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial) Scott M. Melville Mailing Address 1596 Lupine Den Court		Date of Receipt
		06 30 2011
City	State Zip Code	Transaction ID : SA11AI.6072
Vienna	VA 22182	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.34
Name of Employer	Occupation	7
Consumer Healthcare Products	President and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.08	
	2500.00	
Full Name (Last, First, Middle Initial) 3. Adam Raczkowski		Date of Receipt
Mailing Address 37 Timber Drive		03 06 2011
City East Longmeadow	State Zip Code MA 01028	Transaction ID : SA11AI.6000
	0.020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer	Occupation	1
W. F. Young, Inc.	Exec. VP & COO	4
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	, , , , 800.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2113 12th Street NW		06 28 2011
City	State Zip Code DC 20009	Transaction ID : SA11AI.6009
Washington	DC 20009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	1
Consumer Healthcare Products	Vice President, Communications	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).		1508.34
TOTAL This Period (last page this line numb		

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

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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	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Consumer Healthcare Product	s Association PAC (CHPA/PAC)				
Full Name (Last, First, Middle Initial) A. David Spangler		Date of Receipt			
Mailing Address 1449 N Street, NW Apartment 3	Obelo Ti O i	05 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Washington	State Zip Code DC 20005	Transaction ID : SA11AI.6002 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer CHPA	Occupation Senior VP., Policy & Int'l Affairs				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	7			
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		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.	C				
Name of Employer	Occupation				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional)		500.00			
TOTAL This Period (last page this line number	r only)	12762.58			

S 17

S	CHEDULE A (FEC Form 3X)		Harris and a sale abelia (a)	FOR LINE NUMBER: PAGE 16 OF 20
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b X 11c 12 13 14 15 16 17
	ny information copied from such Reports and Si for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Consumer Healthcare Products	Associat	tion PAC (CHPA/PAC)	
Α.	Full Name (Last, First, Middle Initial) MERCK & CO., INC., EMPLOYEES POLIT	ICAL ACTIO	ON COMMITTEE (MERCK PAC) Date of Receipt
	Mailing Address 601 PENNSYLVANIA AVE., N NORTH BUILDING, SUITE 120			02 17 2011
	City	State	Zip Code	Transaction ID : SA11C.5997
	WASHINGTON	DC	20004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0097485	2500.00
	Name of Employer	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	Aggregate	Teal-to-Date ▼	
	Other (specify) ▼		2500.00	
D	Full Name (Last, First, Middle Initial) PFIZER INC. PAC			Data of Resoirt
О.	Mailing Address 235 EAST 42ND STREET			Date of Receipt
	Mailing Address 235 EAST 42ND STREET			02 28 _2011 _
	City	State	Zip Code	Transaction ID : SA11C.5999
	NEW YORK	NY	10017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C cod	0016683	5000.00
	Name of Employer	Occupation	1	
	Receipt For:	Aggragata	Veer to Date W	
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		5000.00	
<u> </u>	Full Name (Last, First, Middle Initial)			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	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			
	Other (specify) ▼		7 7	
	IIRTOTAL of Receipts This Page (optional)			7500.00

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

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

7500.00

S	CHEDULE B (FEC Form 3X)			FOR LINE N	IUMBER: PAGE 17 OF 2	20
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	ny information copied from such Reports and Staten					
or	for commercial purposes, other than using the name	ne and address of	any political	committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)					
	Consumer Healthcare Products As	sociation PA	C (CHP.	A/PAC)		
<u>/</u>			`			
_	Full Name (Last, First, Middle Initial)					
Α.	Blackburn for Congress				Date of Disbursement	
	Mailing Address D.O. D. 19750				M M / D D / Y Y Y Y Y	
	Mailing Address P.O. Box 3750				06 13 2011	
	City	State Zip C	ode			
	Brentwood	TN 37024			Transaction ID : SB23.6056	
	Purpose of Disbursement					
					Amount of Each Disbursement this Period	t
	Candidate Name			Category/		т
	MARSHA MRS. BLACKBURN			Type	1000.00	
	Office Sought: House Disbursen	nent For: 2012	'			
	Senate	Primary X	General			
		Other (specify) ▼				
	State: TN District: 07					
_	Full Name (Last, First, Middle Initial)					
В.	BOB CASEY FOR SENATE INC				Date of Disbursement	
	M. W. A.L.				M M / D D / Y Y Y Y	
	Mailing Address 700 13TH STREET NW				06 24 2011	
	SUITE 600	State Zip C	nde			
			ouc		Transaction ID : SB23.6103	
	WASHINGTON	DC 2000	5			
			5			
	WASHINGTON		5		Amount of Each Disbursement this Period	t
	WASHINGTON Purpose of Disbursement Candidate Name			Category/	Amount of Each Disbursement this Period	t
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	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Disbursen Senate	nent For: 2012 Primary			Amount of Each Disbursement this Period	d
	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Disbursen Senate President	DC 20009			Amount of Each Disbursement this Period	d
	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00	nent For: 2012 Primary			Amount of Each Disbursement this Period	d
_	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial)	nent For: 2012 Primary Other (specify)			Amount of Each Disbursement this Period 3500.00	d
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— С.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial)	nent For: 2012 Primary Other (specify)			Amount of Each Disbursement this Period 3500.00 Date of Disbursement	d
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С.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congridation Address P.O. Box 137 City	nent For: 2012 Primary Other (specify)	General		Amount of Each Disbursement this Period 3500.00 Date of Disbursement	
<u> </u>	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congramaling Address P.O. Box 137	nent For: 2012 Primary X C Other (specify) Tess	General		Amount of Each Disbursement this Period 3500.00 Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	d
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c.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congression Mailing Address P.O. Box 137 City Spokane Purpose of Disbursement Candidate Name CATHY MCMORRIS RODGERS	nent For: 2012 Primary Other (specify) Cess State Zip C WA 99210	General ode)		Amount of Each Disbursement this Period 3500.00 Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
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C.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congresidate President Mailing Address P.O. Box 137 City Spokane Purpose of Disbursement Candidate Name CATHY MCMORRIS RODGERS Office Sought: House Senate	nent For: 2012 Primary \(\subseteq 0 \) Other (specify) \(\psi \)	General ode)	Type Category/	Amount of Each Disbursement this Period 3500.00 Date of Disbursement 05	
C.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congresident Mailing Address P.O. Box 137 City Spokane Purpose of Disbursement Candidate Name CATHY MCMORRIS RODGERS Office Sought: House Senate President	nent For: 2012 Primary \(\subseteq 0 \) Other (specify) \(\subseteq 0 \) Tess State \(\subseteq 2 \text{ip C} \text{WA} \) nent For: 2012	General ode	Type Category/	Amount of Each Disbursement this Period 3500.00 Date of Disbursement 05	
c .	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congresidate President Mailing Address P.O. Box 137 City Spokane Purpose of Disbursement Candidate Name CATHY MCMORRIS RODGERS Office Sought: House Senate	nent For: 2012 Primary \(\subseteq 0 \) Other (specify) \(\psi \)	General ode	Type Category/	Amount of Each Disbursement this Period 3500.00 Date of Disbursement 05	
C.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congress Mailing Address P.O. Box 137 City Spokane Purpose of Disbursement Candidate Name CATHY MCMORRIS RODGERS Office Sought: House Senate President State: WA District: 05	nent For: 2012 Primary Other (specify) Pess State Zip Company WA 99210 nent For: 2012 Primary Other (specify)	General General	Category/ Type	Amount of Each Disbursement this Period 3500.00 Date of Disbursement M M J 24 2011 Transaction ID: SB23.6050 Amount of Each Disbursement this Period 1000.00	
C.	WASHINGTON Purpose of Disbursement Candidate Name ROBERT P JR CASEY Office Sought: House Senate President State: PA District: 00 Full Name (Last, First, Middle Initial) Cathy McMorris Rodgers for Congresident Mailing Address P.O. Box 137 City Spokane Purpose of Disbursement Candidate Name CATHY MCMORRIS RODGERS Office Sought: House Senate President	nent For: 2012 Primary Other (specify) Pess State Zip Company WA 99210 nent For: 2012 Primary Other (specify)	General General	Category/ Type	Amount of Each Disbursement this Period 3500.00 Date of Disbursement 05	
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$ \setminus $	NAME OF COMMITTEE (In Full)	!	DAG (011	ID A /E										
//	Consumer Healthcare Products As	sociation	PAC (CH	IPA/F	AC))								
_	Full Name (Last, First, Middle Initial)													
Α.	Consumer Healthcare Products As	sociation					Date of	f Disb	ursen	nent				
	Mailing Address 900 19th Street, NW					-	06	/	30			011	Y	
	Suite 700						00		50			311		
	City	State	Zip Code				Trans	notio	~ ID .	SB23.	6120			
	Washington	DC	20006				ITAIIS	actio	. טו וו	3623.	5130			
	Purpose of Disbursement In-Kind Payment to Senator Robert Casey, Jr. (reim	bursement)				11	Amoun	+ of E	ach F)ichure.	omont	t thic	Dorio	4
	Candidate Name					ч	Amoun	I OI L	acii L)ISDUI S	SILIGIL	. 11115	renoc	,
	BOB CASEY FOR SENATE INC				egory/ /pe		L					330	0.13	
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	Senate	Primary	X General											
		Other (specif	fy) 🔻											
_	State: PA District: 00													
В.	Full Name (Last, First, Middle Initial)						Date of	f Dieh	urean	nant				
٥.	Erik Paulsen for Congress						M = M	0130	D I	_	V	Y	V	
	Mailing Address P.O. BOX 44369						02		15			011		
	,		Zip Code				Trans	sactio	n ID :	SB23.	6045			
	EDEN PRAIRIE Purpose of Disbursement	MN	55347			_								
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	Candidate Name			Cate	gory/	1		-		-		400	2.00	П
	ERIK PAULSEN				/pe			7		7		1000	0.00	4
		nent For: 20	-											
		Primary	General											
	State: MN District: 03	Other (specif	iy) \											
_	Full Name (Last, First, Middle Initial)													_
C.	FRIENDS OF JOE PITTS						Date of	f Disb	ursen	nent				
							M = M	/	D [) /	YY	Υ	Υ	
	Mailing Address PO BOX 775						05	J I	11		20	011		
	City S	State	Zip Code			_								
	Unionville	PA	19375				Trans	sactio	n ID :	SB23.	6043			
	Purpose of Disbursement				_	1								
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	Candidate Name JOSEPH R. PITTS				gory/							1000	0.00	7
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SCHEDULE B (FEC Form 3X)	Lico congreto cohodula/a	FOR LINE		PAGE 19 OF 20
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NAME OF COMMITTEE (In Full) Consumer Healthcare Products As	•			
Full Name (Last, First, Middle Initial)				
Nelson 2012			Date of Disburseme	
Mailing Address P.O. Box 8666			06 23	2011
,	State Zip Code		Transaction ID : S	B23.6100
Omaha	NE 68108		Transaction ib . C	B23.0100
Purpose of Disbursement			Amount of Each Dis	bursement this Period
Candidate Name		Category/		2500.00
E BENJAMIN NELSON Office Sought: House Disbursen	ment For: 2012	Туре		2000.00
Senate President	Primary General Other (specify)			
State: NE District: 00				
Full Name (Last, First, Middle Initial)			Data of Dishursoma	nt
B. Roberts for Senate			Date of Disburseme	
Mailing Address P.O. Box 433			06 09	2011
City S Great Bend	State Zip Code KS 67530		Transaction ID : S	B23.6053
Purpose of Disbursement			Amount of Each Dis	bursement this Period
Candidate Name		Category/		
PAT ROBERTS		Type		1000.00
X Senate	nent For: 2012 Primary			
Full Name (Last, First, Middle Initial) C. The Freedom Project/Friends of John Bo	oobnor (TED FO ID) O	ommittee	Date of Disburseme	nt
5. The Freedom Froject/Friends of John Bo	Defilier (TFF-FOJB) C	ommittee	M M / D D	/ Y Y Y Y
Mailing Address 7908 Cincinnatti-Dayton Rd. Suite I-2			06 13	2011
,	State Zip Code		Transaction ID : S	B23.6097
West Chester Purpose of Disbursement	OH 45069			
,			Amount of Each Dis	bursement this Period
Candidate Name		Category/	J. 243 Die	
John Boehner		Type		1000.00
Senate President	nent For: 2012 Primary General Other (specify)			
State: OH District: 08				
SUBTOTAL of Disbursements This Page (optional)		·····•	7	4500.00
TOTAL This Period (last page this line number only)				12330.13

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 20 OF 20					
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NAME OF COMMITTEE (In Full)								
Consumer Healthcare Products As	ssociation PAC (CH	PA/PAC)						
Full Name (Last, First, Middle Initial)								
A. Committee to Elect Earl Ray Tomb	olin		Date of Disbursement					
Mailing Address B.O.B. 44500			M M / D D / Y Y Y Y					
Mailing Address P.O. Box 11530			04 06 2011					
City	State Zip Code		Transaction ID - SP20 6700					
Charleston	WV 25339		Transaction ID : SB29.6700					
Purpose of Disbursement Non-Federal Election - Governor			Amount of Each Disbursement this Period					
Candidate Name		Ontar and	Amount of Each Dispulsement this Fellou					
Earl Ray Tomblin		Category/ Type	500.00					
,	ment For: 2011							
Senate	Primary General							
State: WV District:	Other (specify) ▼ Special-Prima	m.						
Full Name (Last, First, Middle Initial)	- Special-Fillia	ıy						
B.			Date of Disbursement					
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Mailing Address								
0								
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		L	Amount of Each Disbursement this Period					
Candidate Name		Category/						
Office Sought: House Disburse	ment For:	Type	7					
Senate	Primary General							
President	Other (specify) ▼							
State: District:								
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								
	1 11	Amount of Each Disbursement this Period						
Candidate Name		Category/						
Office Sought: House Disburse	ment For:	Туре	7 7 7 7					
Senate	ment For: Primary General							
President	Other (specify)							
State: District:	· · · · · · · · · · · · · · · · · · ·							
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