

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Consumer Healthcare Products Association PAC (CHPAPAC)

ADDRESS (number and street)

1150 Connecticut Avenue, N.W.

12th Floor

Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00040584

3. IS THIS REPORT

x

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

X January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2003

through

12

31

2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Kevin Kraushaar

Signature of Treasurer

Electronically Filed by Mr. Kevin Kraushaar

Date

01

30

2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Consumer Healthcare Products Association PAC (CHPA/PAC)

Report Covering the Period: From: ^M07 ^D01 ^Y2003 To: ^M12 ^D31 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^Y		10319.03
(b) Cash on Hand at Beginning of Reporting Period	15392.45	
(c) Total Receipts (from Line 19)	5729.64	21854.64
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	21122.09	32173.67
<hr/>		
7. Total Disbursements (from Line 31)	11558.93	22610.51
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9563.16	9563.16
<hr/>		
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. 02/2003)

Page 3

Write or Type Committee Name

Consumer Healthcare Products Association PAC (CHPA/PAC)

Report Covering the Period: From: ^M07 ^D01 ^Y2003 To: ^M12 ^D31 ^Y2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	3550.00	
(ii) Unitemized	1100.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	4650.00	18775.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1000.00	3000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5650.00	21775.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	79.64	79.64
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	5729.64	21854.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5729.64	21854.64

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
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	58.93	110.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	58.93	110.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	22500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11558.93	22610.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	11558.93	22610.51

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5650.00	21775.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5650.00	21775.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	58.93	110.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	79.64	79.64
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-20.71	30.87

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

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

FOR LINE NUMBER: PAGE 6 / 15

(check only one)
 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.

NAME OF COMMITTEE (In Full)
 Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial) A. Douglas Bierer		Date of Receipt M / D / Y Y Y Y 07 / 16 / 2003	
Mailing Address 7415 Graves Road		Transaction ID: SA11A1.4691	
City Cincinnati	State OH	Zip Code 45243	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer CHPA	Occupation Vice President, Regulatory & Scientific		500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) B. Mrs. Virginia A Cox		Date of Receipt M / D / Y Y Y Y 12 / 23 / 2003	
Mailing Address 11045 Seven Hill Lane		Transaction ID: SA11A1.4717	
City Potomac	State MD	Zip Code 20854	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer CHPA	Occupation Vice President for Communications and		250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C. Mr. Zen Query		Date of Receipt M / D / Y Y Y Y 12 / 02 / 2003	
Mailing Address 1715 West 38th Street		Transaction ID: SA11A1.4710	
City Chattanooga	State TN	Zip Code 37409	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Chatham, Inc.	Occupation Chairman & CEO		500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts TN's Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial) A. Mr. Thomas L. Long		Date of Receipt M / D / Y 08 / 18 / 2003
Mailing Address P.O. Box 109		Transaction ID: SA11A1.4698
City Orchard Park	State NY	Zip Code 14127
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Mentholatum	Occupation Vice President, Operations	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Max C. Martin		Date of Receipt M / D / Y 12 / 02 / 2003
Mailing Address 27115 Ranchland View		Transaction ID: SA11A1.4708
City Boerne	State TX	Zip Code 78006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Mission Pharmacal, Co.	Occupation Chief Operating Officer	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mrs. Mary Lynn McHugh		Date of Receipt M / D / Y 07 / 16 / 2003
Mailing Address 328B Twin Bridges Rd.		Transaction ID: SA11A1.4692
City Williamsburg	State OH	Zip Code 45178
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Procter & Gamble	Occupation Vice President, Global Personal Health	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	17
	13		14		15		16		

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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial) A. Mr. Theodore L. Peterson		Date of Receipt M / D / Y 12 / 02 / 2003	
Mailing Address 252D Maryland Ave.		Transaction ID: SA11A1.4707	
City Bexley	State OH	Zip Code 43209	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer CHPA	Occupation Vice President for Corporate Development		Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. Mr. Tyler F. Young		Date of Receipt M / D / Y 07 / 18 / 2003	
Mailing Address 192 North Rd.		Transaction ID: SA11A1.4690	
City Hampden	State MA	Zip Code 01036	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer W.F. Young, Inc.	Occupation President & Chief Executive Officer		Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	3550.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial) A. BAYPAC		Date of Receipt M / D / Y 10 / 01 / 2003
Mailing Address Bayer Road		Transaction ID: SA11C.4703
City Pittsburgh	State PA	Zip Code 15205
FEC ID number of contributing federal political committee. C C00155713		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	PAC-PAC Transfer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 15

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial)
A. AMERICA'S FOUNDATION FKA FIGHT - PAC

Mailing Address 1155 21st Street NW
Suite 30D

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution Leadership PAC

Candidate Name
AMERICA'S FOUNDATION FKA FIGHT - PAC

Office Sought: House Disbursement For: 2004
Senate Primary X General
President Other (specify) ▼

State: District

Transaction ID: SB23.4680
Date of Disbursement
10 / 22 / 2003

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. BENNETT ELECTION COMMITTEE INC

Mailing Address 175 SOUTH WEST TEMPLE SUITE 650

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement
Contribution

Candidate Name
BENNETT ELECTION COMMITTEE INC

Office Sought: House Disbursement For: 2004
X Senate Primary X General
President Other (specify) ▼

State: UT District 00

Transaction ID: SB23.4681
Date of Disbursement
07 / 21 / 2003

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
C. CONGRESSMAN BART GORDON COMMITTEE

Mailing Address P O BOX 2008

City MURFREESBORO State TN Zip Code 37133

Purpose of Disbursement
contribution

Candidate Name
CONGRESSMAN BART GORDON COMMITTEE

Office Sought: X House Disbursement For: 2004
Senate Primary X General
President Other (specify) ▼

State: TN District 06

Transaction ID: SB23.4655
Date of Disbursement
07 / 07 / 2003

Amount of Each Disbursement this Period
500.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶ **2500.00**

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial)
A. DAVE CAMP FOR CONGRESS 2004

Mailing Address 5915 EASTMAN AVE. SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement
Contribution

Candidate Name
DAVE CAMP FOR CONGRESS 2004

Office Sought: House
Senate
President
State: MI District: D4

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4670

Date of Disbursement
09 / 16 / 2003

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. DEMINT FOR SENATE COMMITTEE INC

Mailing Address 701 GERVAIS STREET SUITE 150-178

City COLUMBIA State SC Zip Code 29201

Purpose of Disbursement
Contribution

Candidate Name
DEMINT FOR SENATE COMMITTEE INC

Office Sought: House
Senate
President
State: SC District: D0

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4674

Date of Disbursement
09 / 23 / 2003

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. FRIENDS FOR CLIFF STEARNS

Mailing Address PO BOX 308

City SILVER SPRINGS State FL Zip Code 32688

Purpose of Disbursement
Contribution

Candidate Name
FRIENDS FOR CLIFF STEARNS

Office Sought: House
Senate
President
State: FL District: D6

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4673

Date of Disbursement
09 / 23 / 2003

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 15

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial)
A. FRIENDS OF ROY BLUNT

Mailing Address PO Box 50100

City Springfield State MO Zip Code 65805

Purpose of Disbursement
Contribution

Candidate Name
FRIENDS OF ROY BLUNT

Office Sought: House
Senate
President

State: MO District: D7

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4658

Date of Disbursement

07 / 08 / 2003

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. GENE GREEN CONGRESSIONAL CAMPAIGN

Mailing Address PO BOX 16128

City HOUSTON State TX Zip Code 77222

Purpose of Disbursement
Contribution

Candidate Name
GENE GREEN CONGRESSIONAL CAMPAIGN

Office Sought: House
Senate
President

State: TX District: 28

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4676

Date of Disbursement

10 / 01 / 2003

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)
C. HELP AMERICA'S LEADERS P.A.C.

Mailing Address 1155 21st Street NW
Suite 300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution/Leadership PAC

Candidate Name
HELP AMERICA'S LEADERS P.A.C.

Office Sought: House
Senate
President

State: District

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: SB23.4727

Date of Disbursement

10 / 07 / 2003

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial)
A. JOHN D DINGELL FOR CONGRESS COMMITTEE

Mailing Address 607 FOURTEENTH STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name
JOHN D DINGELL FOR CONGRESS COMMITTEE

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: MI District 16

011
Category/
Type

Transaction ID: SB23.4671

Date of Disbursement

09 / 23 / 2003

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. JUDY BIGGERT FOR CONGRESS

Mailing Address P.O. Box 637

City Hinsdale State IL Zip Code 60522

Purpose of Disbursement
Contribution

Candidate Name
JUDY BIGGERT FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: IL District 13

011
Category/
Type

Transaction ID: SB23.4683

Date of Disbursement

11 / 25 / 2003

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)
C. LATHAM FOR CONGRESS

Mailing Address PO Box 71

City Clarion State IA Zip Code 50525

Purpose of Disbursement
Contribution

Candidate Name
LATHAM FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2004
Primary General
Other (specify) ▼

State: IA District 04

011
Category/
Type

Transaction ID: SB23.4684

Date of Disbursement

12 / 22 / 2003

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
A. NATHAN DEAL FOR CONGRESS

Mailing Address P O BOX 902

City Gainesville State GA Zip Code 30503

Purpose of Disbursement
Contribution

Candidate Name
NATHAN DEAL FOR CONGRESS

Office Sought: House
Senate
President

State: GA District D9

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4677

Date of Disbursement

10 / 01 / 2003

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)
B. TEXANS FOR HENRY BONILLA

Mailing Address PO BOX 17202

City SAN ANTONIO State TX Zip Code 78217

Purpose of Disbursement
Contribution

Candidate Name
TEXANS FOR HENRY BONILLA

Office Sought: House
Senate
President

State: TX District 23

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4675

Date of Disbursement

10 / 01 / 2003

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)
C. TOM FEENEY FOR CONGRESS

Mailing Address 1420 Alafaya Trail #103

City Oviedo State FL Zip Code 32765

Purpose of Disbursement
Contribution

Candidate Name
TOM FEENEY FOR CONGRESS

Office Sought: House
Senate
President

State: FL District 24

Disbursement For: 2004
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4682

Date of Disbursement

10 / 22 / 2003

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association PAC (CHPA/PAC)

Full Name (Last, First, Middle Initial)

A. VOLUNTEER PAC

Mailing Address P.O. Box 158552

City Nashville State TN Zip Code 37215

Purpose of Disbursement
Contribution/Learship PAC

Candidate Name
VOLUNTEER PAC

Office Sought: House
Senate
President

State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.4679

Date of Disbursement

10 / 16 / 2003

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

11500.00