| Image# 201601199004521363                                   |  |                              | PAGE 1 / 13   |
|---|--|------------------------------|---|
|   | EPORT OF REC<br>ND DISBURSEN<br>Other Than An Authorized | IENTS                        |   |
| 1. NAME OF TY   | PE OR PRINT ▼ Fxar                                       | nple: If typing, type        | Office Use Only   |
| COMMITTEE (in full)   |  | the lines.                   | 12FE4M5   |
| Consumer Healthcare Pr                                      | oducts Association PAC                                   |                              |   |
|   |  |                              |   |
| ADDRESS (number and street)                                 | 625 Eye Street NW  |                              |   |
| Check if different  | Suite 600  |                              |   |
| then providually  | Washington   |                              | DC  |
| 2. FEC IDENTIFICATION NUME                                  | BER V CITY   | S                            | STATE ZIP CODE  |
| C C00040584   | 3. IS THIS<br>REPORT                                     | NEW<br>(N) OR                | X AMENDED<br>(A)  |
| (Choose One)  | (b) Monthly<br>Report<br>Due On:<br>Mar 20 (M3)          | May 20 (M5)                  | Aug 20 (M8)         Nov 20 (M1<br>(Non-Election<br>Year Only)           X         Sep 20 (M9)         Dec 20 (M1<br>(Non-Election |
| (a) Quarterly Reports:                                      | Apr 20 (M4)  | Jul 20 (M7)                  | Oct 20 (M10) Jan 31 (YE)  |
| April 15<br>Quarterly Report (Q1)<br>July 15                |  | Primary (12P)                | General (12G) Runoff (12R)  |
| Quarterly Report (Q2)                                       | PRE-Election<br>Report for the:                          | Convention (12C)             | Special (12S)   |
| Quarterly Report (Q3)<br>January 31<br>Year-End Report (YE) | Election on  | M M / D D /                  | y y y y y in the State of   |
| July 31 Mid-Year<br>Report (Non-election<br>Year Only) (MY) |  | General (30G)                | Runoff (30R) Special (30S   |
| Termination Report<br>(TER)                                 | Report for the:<br>Election on                           | M = M / D = D /              | in the State of   |
| 5. Covering Period 08                                       | / D D / Y Y Y Y<br>01 2015                               | through                      | / D D / Y Y Y Y<br>31 2015  |
| I certify that I have examined this F                       | Report and to the best of my know                        | vledge and belief it is true | e, correct and complete.  |
| Type or Print Name of Treasurer                             | Brian Green  |                              |   |
| Signature of Treasurer                                      | zen l  | [Electronically Filed]       | ate 01 / 19 / Y Y Y Y   |
| NOTE: Submission of false, erroneous                        | s, or incomplete information may sul                     | pject the person signing thi | is Report to the penalties of 2 U.S.C. §437g.   |
| Office<br>Use   |  |                              | FEC FORM 3X<br>Rev. 12/2004   |
| Only  |  |                              |   |

01/19/2016 14 : 59

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

|       |    |      |           |      | ì |
|-------|----|------|-----------|------|---|
| Write | or | Tvpe | Committee | Name |   |

FEC Form 3X (Rev. 02/2003)

## Consumer Healthcare Products Association PAC (CHPA/PAC)

| R   | eport Covering the Period: From: 08  | M / D D / Y Y Y Y<br>01 2015 To: | M         /         D         D         /         Y |
|-----|--|----------------------------------|---|
|     |  | COLUMN A<br>This Period          | COLUMN B<br>Calendar Year-to-Date   |
| 6.  | (a) Cash on Hand<br>January 1, 2015  |                                  | 15617.07  |
|     | (b) Cash on Hand at<br>Beginning of Reporting Period   | 12026.80                         |   |
|     | (c) Total Receipts (from Line 19)  | 1663.44                          | 23314.30  |
|     | <ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul> | 13690.24                         | 38931.37  |
| 7.  | Total Disbursements (from Line 31)   | 57.02                            | 25298.15  |
| 8.  | Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d))   | 13633.22                         | 13633.22  |
| 9.  | Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)                         | 0.00                             |   |
| 10. | Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

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### **DETAILED SUMMARY PAGE**

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

## Consumer Healthcare Products Association PAC (CHPA/PAC)

| Report Covering the Period: From: 08  | 3 01 2015 To:                 | 08 / D D / Y Y Y<br>2015          |
|---|-------------------------------|-----------------------------------|
| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
| . Contributions (other than loans) From:  | <u> </u>                      |                                   |
| (a) Individuals/Persons Other   |                               |                                   |
| Than Political Committees   | 1583.44                       | 15000.43                          |
| (i) Itemized (use Schedule A)   |                               |                                   |
| (ii) Unitemized   | 80.00                         | 2668.74                           |
| (iii) TOTAL (add  | 7 7 00.00                     |                                   |
| Lines 11(a)(i) and (ii)   | 1663.44                       | 17669.17                          |
|   |                               | 0.00                              |
| (b) Political Party Committees  | 0.00                          | 0.00                              |
| (c) Other Political Committees  | 0.00                          | 5000.00                           |
| (such as PACs)  | 7 7 7 7                       | 3000.00                           |
| (d) Total Contributions (add Lines  |                               |                                   |
| 11(a)(iii), (b), and (c)) (Carry<br>Totals to Line 33, page 5)                          | 1663.44                       | 22669.17                          |
| . Transfers From Affiliated/Other   | 7 7 7                         | 7 7                               |
| Party Committees  | 0.00                          | 0.00                              |
| ,   |                               |                                   |
| . All Loans Received  | 0.00                          | 0.00                              |
| Lean Danaymente Dessived  | 0.00                          | 0.00                              |
| <ul> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ul> | 7 7 7                         | 0.00                              |
| (Refunds, Rebates, etc.)  |                               |                                   |
| (Carry Totals to Line 37, page 5)   | 0.00                          | 645.13                            |
| 6. Refunds of Contributions Made  |                               | 7 7                               |
| to Federal Candidates and Other   |                               |                                   |
| Political Committees  | 0.00                          | 0.00                              |
| . Other Federal Receipts  |                               |                                   |
| (Dividends, Interest, etc.)   | 0.00                          | 0.00                              |
| 8. Transfers from Non-Federal and Levin Funds   | ,,                            | ,,,                               |
| (a) Non-Federal Account   |                               |                                   |
| (from Schedule H3)  | 0.00                          | 0.00                              |
|   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5)  | 7 7 7                         | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))   | 0.00                          | 0.00                              |
| . Total Receipts (add Lines 11(d),  |                               |                                   |
| 12, 13, 14, 15, 16, 17, and 18(c))▶   | 1663.44                       | 23314.30                          |
|   |                               |                                   |
| . Total Federal Receipts  |                               |                                   |
| (subtract Line 18(c) from Line 19)►   | 1663.44                       | 23314.30                          |

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## DETAILED SUMMARY PAGE

| FEC Form 3X  | (Rev. 02/2003)                                     |                        |       |                      | Page 4   |
|--|--|------------------------|-------|----------------------|----------|
| II. Disbu  |  | COLUMN<br>Total This P |       | COLUN<br>Calendar Ye |          |
| Operating Expenditu<br>(a) Allocated Feder<br>Activity (from S | al/Non-Federal                                     |                        |       |                      |          |
|  | are  | 7 7                    | 0.00  | 7                    | 0.00     |
| ( )  | al Share   |                        | 0.00  |                      | 0.00     |
| (b) Other Federal (<br>Expenditures                            | Operating  |                        | 57.02 |                      | 395.55   |
| (c) Total Operating<br>(add 21(a)(i), (a                       | Expenditures<br>a)(ii), and (b)) ►                 |                        | 57.02 |                      | 395.5    |
| Transfers to Affiliate<br>Committees                           | d/Other Party                                      |                        | 0.00  |                      | 0.00     |
| Contributions to   | Committees   |                        |       |                      | 7        |
| and Other Political (<br>Independent Expendent                 |  |                        | 0.00  |                      | 24902.60 |
| Coordinated Party E  | xpenditures  |                        | 0.00  |                      | 0.00     |
| (2 U.S.C. §441a(d))<br>(use Schedule F)                        | ·····  |                        | 0.00  |                      | 0.00     |
| Loan Repayments M  | Nade   |                        | 0.00  |                      | 0.00     |
|  | <u>.</u>   |                        | 0.00  |                      | 0.00     |
| (a) Individuals/Pers<br>Than Political C                       |  |                        | 0.00  |                      | 0.00     |
| (b) Political Party (  | Committees   |                        | 0.00  |                      | 0.00     |
| (c) Other Political  | Committees   |                        |       |                      | 0.00     |
| (such as PACs)   | )  |                        | 0.00  | 7                    | 0.00     |
| (d) Total Contribution<br>(add Lines 28(a)                     | on Refunds<br>a), (b), and (c))▶                   |                        | 0.00  |                      | 0.00     |
|  | s  |                        | 0.00  |                      | 0.00     |
|  |  | 7 7 7                  |       |                      | 7        |
| (a) Allocated Feder  | ivity (2 U.S.C. §431(20))<br>ral Election Activity |                        |       |                      |          |
| (from Schedule<br>(i) Federal Sha                              | H6)<br>re  |                        | 0.00  |                      | 0.00     |
| (ii) "Levin" Sha   | re   |                        | 0.00  |                      | 0.00     |
| (b) Federal Election   | n Activity Paid Entirely                           |                        | 0.00  |                      | 0.00     |
| (c) Total Federal E  | lection Activity (add                              | 7 7                    | 0.00  |                      | 7        |
| Lines 30(a)(i),  | 30(a)(ii) and 30(b))►                              | 7 7                    | 0.00  |                      | 0.00     |
|  | add Lines 21(c), 22,<br>28(d), 29 and 30(c))       |                        | 57.02 |                      | 25298.1  |
| Total Federal Disbu  |  | 7 7                    |       |                      | 7        |
| (subtract Line 21(a)   | (ii) and Line 30(a)(ii)                            |                        | 57.00 |                      | 05000.45 |
| trom Line 31)  | ····· ►  |                        | 57.02 | 7                    | 25298.15 |

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### DETAILED SUMMARY PAGE

of Disbursements

| II. Net Contributions/Operating Ex-<br>penditures                         | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| . Total Contributions (other than loans)<br>(from Line 11(d), page 3)     | 1663.44                       | 22669.17                          |
| . Total Contribution Refunds<br>(from Line 28(d))                         | 0.00                          | 0.00                              |
| . Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) | 1663.44                       | 22669.17                          |
| Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►  | 57.02                         | 395.55                            |
| Offsets to Operating Expenditures (from Line 15, page 3)                  | 0.00                          | 645.13                            |
| Net Operating Expenditures (subtract Line 37 from Line 36)                | 57.02                         | -249.58                           |

FE6AN026

| SCHEDULE A   | (FEC  | Form | 3X) |
|--------------|-------|------|-----|
| ITEMIZED REC | EIPTS | ;    |     |

(check only one)

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|   |             |                                      |  | Detailed Summary Page |     |                 |       | 11b    | 1b 11c 12  |       |        |     |  |  |  |
|---|-------------|--------------------------------------|--|-----------------------|-----|-----------------|-------|--------|------------|-------|--------|-----|--|--|--|
| ar for commercial puppess, 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)         A. John Cay       Date of Receipt         Mailing Address 3180 N. Quincy St.       Date of Receipt         City       State       Zip Code         Arington       VA       22207         FEC ID number of contributing tederal political committee.       Other (specify)         Consumer Healthcare Products       Vice President. Government Alfairs         Receipt Time       General       1662.55         Full Name (Last, First, Middle Initial)       Aggregate Vera-to-Date ▼       Date of Receipt         Date of Contributing tederal political committee.       Vice President. Government Alfairs       Aggregate Vera-to-Date ▼         Primary       General       Cocupation       Vice President. Government Affairs         Raceipt Firet       Aggregate Vera-to-Date ▼       Transaction D: SA11Al8095         Anount of Each Receipt this Proid       104.17         Name of Employer       Cocupation       Vice President. Government Alfairs         Receipt Firet       Aggregate Vera-to-Date ▼       106.17         City       Aggregate Vera-to-Date ▼       106.17         Receipt Firet       Aggregate Vera-to-Date ▼   |             |                                      |  |                       |     | 13              |       | 14     | 15         |       | 16     | 17  |  |  |  |
| Consumer Healthcare Products Association PAC (CHPA/PAC)         A. John Gay         Mailing Address 3160 N. Quincy St.         City       State         Z2207         FEC to number of contributing<br>federal political committee.         Consumer Healthcare Products         Primary         General         Other (specify) ▼         Full Name (Last, First, Middle Initial)         B. John Gay         Mailing Address 3180 N. Quincy St.         City         City         Mailing Address 310 N. Quincy St.         City         City         City         Mailing Address 310 N. Quincy St.         City   |             |                                      |  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| ✓       Full Name (Last, First, Middle Initial)         A. John Gay       State       Zip Code         Mailing Address 3180 N. Quincy St.       City       VA       2207         City       VA       2207       Transaction ID : SA11AL8094         Amount of Each Receipt for:       Occupation       158.255         Primary       General       Other (specify) ▼       1582.55         Full Name (Last, First, Middle Initial)       B. John Gay       Date of Receipt         B. John Gay       Mailing Address 3180 N. Quincy St.       City       1582.255         Full Name (Last, First, Middle Initial)       Date of Receipt       08       31       2015         B. John Gay       Mailing Address 3180 N. Quincy St.       City       Transaction ID : SA11AL8095       Amount of Each Receipt         City       State       Zip Code       Transaction ID : SA11AL805       Amount of Each Receipt His Period         Receipt For:       Primary       General       Occupation       Vice President, Government Atfairs         Receipt For:       Occupation       Vice President, Government Atfairs       Amount of Each Receipt His Period         City       Aggregate Vear-to-Date V       General       Occupation         City       State       Zip Code       Amount of Each  | $\setminus$ | NAME OF COMMITTEE (In Full)          |  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| A. John Gay       Date of Receipt         Mailing Address 3180 N. Quincy St.       City       State       Zip Code         City       VA       22207       Transaction ID : SA11A.8094         FEC ID number of contributing       C       104.17         Name of Employer       Occupation       Vice President; Government Affairs         Receipt For:       Aggregate Year-to-Date ▼       Date of Receipt         B. John Gay       Mailing Address 3180 N. Quincy St.       Date of Receipt         City       State       Zip Code         Arrington       Vice President; Government Affairs       Aggregate Year-to-Date ▼         Pull Name (Last, First, Middle Initia)       Date of Receipt       Transaction ID : SA11AL8095         Anington       VA       22207       Fee ID number of contributing federal political committee.         City       State       Zip Code       Transaction ID : SA11AL8095         Anington       Vice President; Government Affairs       Aggregate Year-to-Date ▼       Tota 10 ± 17         Name of Employer       Occupation       Occupation       Yice President; Government Affairs       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation       Yice President; Government Affairs       Amount of Each Receipt <tr< td=""><td></td><td>Consumer Healthcare Products</td><td>tion PAC (CHPA/PAC)</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr<>  |             | Consumer Healthcare Products         | tion PAC (CHPA/PAC)  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| City       State       Zip Code         Arlington       VA       22207         FEC 1D number of contributing<br>federal political committee.       C       Transaction ID: SA11Al8094         Name of Employer       Occupation       104.17         Consumer Healthcare Products       Vice President, Government Affairs       Date of Receipt         Receipt For:       Aggregate Vear-to-Date ▼       104.17         Primary       General       0ther (specify) √       Date of Receipt         Mailing Address 3180 N. Quincy St.       C       Transaction ID: SA11Al8095         Anount of Each Receipt this Period       06       31       2015         Mailing Address 3180 N. Quincy St.       C       Transaction ID: SA11Al8095       Anount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation       You 22207       Test Receipt Receipt Receipt Receipt Receipt Receipt Receipt | Α.          |                                      |  |                       |     | Date of Receipt |       |        |            |       |        |     |  |  |  |
| Atlington       VA       22207         FEC. ID number of contributing tedral political committee.       C       104.17         Name of Employer       Occupation       104.17         Consumer Healthcare Products       Vice President, Government Affairs       104.17         Receipt FOR       Aggregate Year-to-Date ▼       0         B. John Gay       1562.55       Date of Receipt Mailing Address 3180 N. Quincy St.       0         City       State       Zip Code       31       2015         Mailing Address 3180 N. Quincy St.       C       104.17       0       0       31       2015         City       State       Zip Code       7  |             | Mailing Address 3180 N. Quincy St.   |  |                       |     |                 | /     |        |            |       |        | Y   |  |  |  |
| FEC ID number of contributing<br>federal political committee.       C       Andoh of Each Receipt Inter Period         Name of Employer<br>Consumer Healthcare Products       Occupation<br>Vice President, Government Atfairs       Date of Receipt         B. John Gay<br>Mailing Address 3180 N. Quincy St.       Date of Receipt       Date of Receipt         City<br>Anigon       Vice President, Government Atfairs       Date of Receipt         FEC ID number of contributing<br>federal political committee.       C       08       31       2015         City<br>Consumer Healthcare Products       C       08       31       2015         Receipt For:<br>Primary<br>Consumer Healthcare Products       C       08       31       2015         City<br>Consumer Healthcare Products       Name of Employer<br>Vice President, Government Atfairs       Date of Receipt       104.17         Receipt For:<br>Primary<br>General       Aggregate Year-to-Date ▼       Occupation       08       15       2015         City<br>Alling Address 340 Cloudes Mill Ct.       C       06       15       2015       15       2015         City<br>Alling Address 340 Cloudes Mill Ct.       C       0       105       2014       1066.72       10       10       20.84         Mailing Address 340 Cloudes Mill Ct.       C       0       15       2015       15       2015 <td< td=""><td></td><td>City</td><td>State</td><td>Zip Code</td><td></td><td>Trans</td><td>sact</td><td>ion ID</td><td>: SA11AI</td><td></td><td></td><td></td></td<>                                |             | City                                 | State  | Zip Code              |     | Trans           | sact  | ion ID | : SA11AI   |       |        |     |  |  |  |
| rederal political committee.       U       104.17         Name of Employer       Occupation       Vice President, Government Affairs         Receipt For:       Aggregate Year-to-Date ▼       Date of Receipt         B. John Gay       1562.55       Date of Receipt         Mailing Address 3180 N. Quincy St.       0.8       31       2015         Transaction ID: SA11A 1805       Anount of Each Receipt For:       104.17       0.8       31       2015         Arington       VA       22207       22207       Feb Ontributing Federal political committee.       0.6       31       2015         Name of Employer       Occupation       Vice President, Government Affairs       Aggregate Year-to-Date ▼       104.17         Name of Employer       Occupation       Vice President, Government Affairs       Receipt For:       104.17         Pirimary       General       Otter (specify) ▼       1665.72       Date of Receipt         City       Name of Employer       Occupation       Vice President, Government Affairs       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       0.8       15       2015       Transaction D: SA114.18096         Alexandria       VA       22304       FEC ID number of contributing federal political cormmittee.       Occupation       20.84  |             | Arlington                            | VA   | 22207                 |     |                 |       |        |            |       |        |     |  |  |  |
| Consumer Healthcare Products       Vice President, Government Affairs         Receipt For:       Aggregate Year-to-Date ▼         B. John Gay       1562.55         B. John Gay       Date of Receipt         Mailing Address 3180 N. Quincy St.       0         City       State       Zip Code         Affairs       Aggregate Year-to-Date ▼       0         PEC ID number of contributing tederal political committee.       C       104.17.         Name of Employer       Occupation       Vice President, Government Affairs         Receipt For:       0       0       1565.72         Primary       General       0       104.17.         Mailing Address 340 Cloudes Mill Ct.       0       15       2015         City       State       Zip Code       Amount of Each Receipt       1665.72         Mailing Address 340 Cloudes Mill Ct.       0       15       2015       15         City       State       Zip Code       Amount of Each Receipt       1685.72         Mailing Address 340 Cloudes Mill Ct.       0       15       2015       15         City       State       Zip Code       Amount of Each Receipt Mis Period       20.84         FEC ID number of contributing tederal political committee. <t< td=""><td></td><td>8</td><td>С</td><td></td><td></td><td></td><td></td><td>7</td><td></td><td>_</td><td>104.</td><td>17</td></t<>  |             | 8                                    | С  |                       |     |                 |       | 7      |            | _     | 104.   | 17  |  |  |  |
| Receipt For:       Aggregate Year-to-Date ▼         B. John Gay       1552.55         B. John Gay       Date of Receipt         Mailing Address 3180 N. Quincy St.       City         City       State       Zip Code         Artington       VA       22207         FEC ID number of contributing tederal political committee.       C       104.17         Name of Employer       Occupation       Vice President, Government Affairs         Receipt For:       General       1666,72         City       State       Zip Code         Aggregate Year-to-Date ▼       104.17         Date of Receipt for:       Aggregate Year-to-Date ▼         City       State       Zip Code         Address 340 Cloudes Mill Ct.       C       0         City       State       Zip Code         Mailing Address 340 Cloudes Mill Ct.       C       0         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing federal political committee.       C         Name of Employer       Cocupation         Cocupation       Assoc. Director, Federal Affairs         Receipt For:       Aggregate Year-to-Date ▼         Other (s  |             |                                      |  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| Primary       General         Other (specify) ▼       1562.55         B. John Gay       Date of Receipt         Mailing Address 3180 N. Quincy St.       Date of Receipt         City       State       Zip Code         Arlington       VA       Z2207         FEC ID number of contributing<br>federal political committee.       Occupation         Consumer Healthcare Products       Occupation         Receipt For:       Other (specify) ▼         Primary       General         Other (specify) ▼       State         Zip Code       Adgregate Year-to-Date ▼         Consumer Healthcare Products       Aggregate Year-to-Date ▼         Mailing Address 340 Cloudes Mill Ct.       Date of Receipt         City       State       Zip Code         Alexandria       VA       Z2304         FEC ID number of contributing<br>federal political committee.       Occupation         Consumer Healthcare Products       Assoc. Director, Federal Affairs         Receipt For:       Aggregate Year-to-Date ▼         Occupation       Assoc. Director, Federal Affairs         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       312.60  |             |                                      |  |                       | _   |                 |       |        |            |       |        |     |  |  |  |
| Other (specify)       1562.55         Full Name (Last, First, Middle Initial)       Date of Receipt         B. John Gay       Date of Receipt         Mailing Address 3180 N. Quincy St.       Oile 3 / 31 / 2015         City       State       Zip Code         Artington       VA       22207         FEC ID number of contributing       C       Transaction ID: SA11AL8095         Arount of Employer       Occupation       Vice President, Government Affairs         Receipt For:       Aggregate Year-to-Date ▼       1666.72         Full Name (Last, First, Middle Initial)       C       Transaction ID: SA11AL8096         C. Travis Gibbons       Date of Receipt       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       Occupation       Vice President, Government Affairs         Receipt For:       Aggregate Year-to-Date ▼       08 / 91 / 2015       Transaction ID: SA11AL8096         Mailing Address 340 Cloudes Mill Ct.       C       Transaction ID: SA11AL8096       Amount of Each Receipt this Period         City       State       Zip Code       Amount of Each Receipt this Period       2015         FEC ID number of contributing federal political committee.       Occupation       Assoc. Director, Federal Affairs       Aggregate Year-to-Date ▼       20.84         Subtrotal of  |             |                                      | Aggregate  | Year-to-Date ▼        |     |                 |       |        |            |       |        |     |  |  |  |
| B. John Gay       Mailing Address 3180 N. Quincy St.       Date of Receipt         City       State       Zip Code         Arlington       VA       22207         FEC ID number of contributing       C       Transaction ID : SA11AL8095         Amount of Each Receipt this Period       C         Primary       General       Occupation         Ctiv       Aggregate Year-to-Date ▼       Date of Receipt         Primary       General       1566.72         City       State       Zip Code         Alling Address 340 Cloudes Mill Ct.       C       Transaction ID : SA11AL8095         City       Aggregate Year-to-Date ▼       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       C       Transaction ID : SA11AL8096         City       State       Zip Code       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       Transaction ID : SA11AL8096         Name of Employer       Occupation       Aggregate Year-to-Date ▼       Aggregate Year-to-Date ▼         Name of Employer       Occupation       Aggregate Year-to-Date ▼       20.84         SUBTOTAL of Receipts This Page (optional)       Aggregate Year-to-Date ▼       229.18   |             |                                      |  | 1562.55               |     |                 |       |        |            |       |        |     |  |  |  |
| Mailing Address 3180 N. Quincy St.       2015         City       State       Zip Code         Artington       VA       22207         FEC ID number of contributing<br>federal political committee.       C       Transaction ID : SA11AL8095         Name of Employer       Occupation       104.17         Consumer Healthcare Products       Vice President, Government Affairs       Primary         Receipt For:       Aggregate Year-to-Date ▼       1666.72         Primary       General       1666.72         Other (specify) ▼       State       Zip Code         VA       22304       Transaction ID : SA11AL8096         Amount of Each Receipt this Period       104.17         City       Aggregate Year-to-Date ▼         City       State       Zip Code         Mailing Address 340 Cloudes Mill Ct.       08       15         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing<br>federal political committee.       C         Name of Employer       Occupation         Consumer Healthcare Products       Aggregate Year-to-Date ▼         Primary       General       General         Other (specify) ▼       312.60       312.60  | В.          |                                      |  |                       |     |                 | of Re | eceipt |            |       |        |     |  |  |  |
| City       State       Zip Code         Arlington       VA       22207         FEC ID number of contributing<br>federal political committee.       C         Name of Employer<br>Consumer Healthcare Products       Occupation<br>Vice President, Government Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       1666,72         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing<br>federal political committee.       Date of Receipt         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing<br>federal political committee.       C         Name of Employer<br>Consumer Healthcare Products       Aggregate Year-to-Date ▼       Date of Receipt in Period         FEC ID number of contributing<br>federal political committee.       C       20.84         Name of Employer<br>Consumer Healthcare Products       Aggregate Year-to-Date ▼       312.80         SUBTOTAL of Receipts This Page (optional)       312.80       229.18   |             | Mailing Address 3180 N. Quincy St.   |  |                       |     |                 | /     | D      | D / Y      | Y     | Y      | Y   |  |  |  |
| Artington       VA       22207         Artington       VA       22207         FEC ID number of contributing<br>federal political committee.       C       Amount of Each Receipt this Period         Name of Employer<br>Consumer Healthcare Products       Occupation<br>Vice President, Government Affairs       Image: Comment Affairs         Receipt For:       Origonal Committee.       Aggregate Year-to-Date ▼       Image: Comment Affairs         Primary       General<br>Other (specify) ▼       Image: Comment Affairs       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       Image: Comment Affairs       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       Image: Comment Affairs       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       Image: Comment Affairs       Transaction ID : SA11AL8096         Amount of Each Receipt this Period       Image: Comment Affairs       Amount of Each Receipt this Period         FEC ID number of contributing<br>federal political committee.       Cocupation       Assoc. Director, Federal Affairs         Receipt For:       Occupation       Aggregate Year-to-Date ▼       Image: Comment Affairs         Receipt For:       Aggregate Year-to-Date ▼       Image: Comment Affairs       Image: Comment Affairs         Receipt For:       Aggregate Year-to-Date ▼       Image: Comment Affairs       Image: Comment Affair  |             |                                      |  |                       |     |                 |       | 3′     | 1          | 20    | )15    |     |  |  |  |
| FEC ID number of contributing federal political committee.       C       104.17         Name of Employer Consumer Healthcare Products       Occupation Vice President, Government Affairs       104.17         Receipt For:       Occupation Vice President, Government Affairs       1666.72       104.17         Full Name (Last, First, Middle Initial)       Aggregate Year-to-Date ▼       0       0         City       State       Zip Code       15       2015         Alexandria       VA       22304       Period       15       2015         FEC ID number of contributing federal political committee.       Occupation       Assoc. Director, Federal Affairs       Amount of Each Receipt this Period         Receipt For:       Primary       General       Occupation       312.60       20.84         SUBTOTAL of Receipts This Page (optional)   |             |                                      |  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| federal political committee.       104.17         Name of Employer<br>Consumer Healthcare Products       Occupation<br>Vice President, Government Affairs         Receipt For:<br>Primary General<br>Other (specify) ♥       Aggregate Year-to-Date ♥         Full Name (Last, First, Middle Initial)       Date of Receipt         City<br>Alexandria       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing<br>federal political committee.       Occupation<br>Vice President, For:<br>Assoc. Director, Federal Affairs         Receipt For:<br>Primary General<br>Other (specify) ♥       Occupation<br>Assoc. Director, Federal Affairs         Receipt For:<br>Primary General<br>Other (specify) ♥       Occupation<br>Assoc. Director, Federal Affairs         Receipt For:<br>Primary General<br>Other (specify) ♥       Aggregate Year-to-Date ♥         SUBTOTAL of Receipts This Page (optional)  |             |                                      |  |                       |     |                 |       | Each   | Receipt th | nis P | 'eriod |     |  |  |  |
| Consumer Healthcare Products       Vice President, Government Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       1666.72         Full Name (Last, First, Middle Initial)       Date of Receipt         C. Travis Gibbons       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       Transaction ID : SA11AL.8096         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         Consumer Healthcare Products       Assoc. Director, Federal Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       312.60   |             | •                                    |  |                       |     |                 | 9     |        | _          | 104.  | 17     |     |  |  |  |
| Primary       General         Other (specify)       1666.72         Full Name (Last, First, Middle Initial)       Date of Receipt         C. Travis Gibbons       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       15         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing federal political committee.       C       20.84         Name of Employer       Occupation       20.84         Consumer Healthcare Products       Assoc. Director, Federal Affairs       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼       312.60         SUBTOTAL of Receipts This Page (optional)  |             |                                      |  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| C. Travis Gibbons       Date of Receipt         Mailing Address 340 Cloudes Mill Ct.       08         City       State       Zip Code         Alexandria       VA       22304         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer       Occupation       Assoc. Director, Federal Affairs       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼       312.60       229.18   |             | Primary General                      | Aggregate  |                       |     |                 |       |        |            |       |        |     |  |  |  |
| City       State       Zip Code       Image: Code       Image   | <u> </u>    |                                      |  |                       |     | Date o          | of Re | eceipt |            |       |        |     |  |  |  |
| Alexandria       VA       22304         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer       Occupation       20.84         Consumer Healthcare Products       Assoc. Director, Federal Affairs       Aggregate Year-to-Date ▼         Primary       General       312.60       312.60         SUBTOTAL of Receipts This Page (optional)       229.18       229.18  |             | Mailing Address 340 Cloudes Mill Ct. |  |                       |     |                 | /     |        |            |       |        | Y   |  |  |  |
| FEC ID number of contributing federal political committee.       C       20.84         Name of Employer       Occupation       20.84         Consumer Healthcare Products       Assoc. Director, Federal Affairs       20.84         Receipt For:       Aggregate Year-to-Date ▼       312.60         SUBTOTAL of Receipts This Page (optional)   |             | -                                    |  | •                     |     |                 |       |        |            |       |        |     |  |  |  |
| federal political committee.       20.84         Name of Employer       Occupation         Consumer Healthcare Products       Assoc. Director, Federal Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       312.60         SUBTOTAL of Receipts This Page (optional)   |             | Alexandria                           | VA   | 22304                 | _   | Amoun           | t of  | Each   | Receipt th | nis P | 'eriod |     |  |  |  |
| Consumer Healthcare Products       Assoc. Director, Federal Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       312.60         SUBTOTAL of Receipts This Page (optional)  |             | 8                                    | С  |                       |     |                 |       | 7      |            | _     | 20.    | .84 |  |  |  |
| Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼         SUBTOTAL of Receipts This Page (optional)  |             | Name of Employer                     | Occupation   |                       |     |                 |       |        |            |       |        |     |  |  |  |
| Primary       General         Other (specify)       ✓         SUBTOTAL of Receipts This Page (optional)   |             | Consumer Healthcare Products         | onsumer Healthcare Products Assoc. Director, Federal Affairs |                       |     |                 |       |        |            |       |        |     |  |  |  |
| Primary       General         Other (specify)       ✓         SUBTOTAL of Receipts This Page (optional)   |             | Receipt For:                         | Aggregate  | Year-to-Date ▼        |     |                 |       |        |            |       |        |     |  |  |  |
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|   |             | Other (specify)                      |  | 312.60                |     |                 |       |        |            |       |        |     |  |  |  |
|   | ⊢           |                                      |  |                       | ► _ | [.              | -     | 7      |            | -     | 229.   | 18  |  |  |  |

| SCHEDULE A   | (FEC  | Form | 3X) |
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| ITEMIZED REC | EIPTS | ;    |     |

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|          |  | Use separate schedule(s)                          |                                   |        | (check only one) |       |         |                           |           |           |     |
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|          | EMIZED RECEIPTS  | for each category of the<br>Detailed Summary Page |                                   |        | <b>K</b> 11a     |       | 11b     | 11c                       |           | 12        |     |
|          | ny information copied from such Reports and S<br>for commercial purposes, other than using the |   |                                   |        |                  |       |         |                           |           |           |     |
|          | NAME OF COMMITTEE (In Full)  |   | duress of any political committee | ; 10 3 |                  |       | ulions  | nom su                    |           | Jiiiiiiii |     |
|          | Consumer Healthcare Products   | s Associat  | ion PAC (CHPA/PAC)                |        |                  |       |         |                           |           |           |     |
| Α.       | Full Name (Last, First, Middle Initial)<br>Travis Gibbons                                      |   |                                   |        | Date o           | of Re | ceipt   |                           |           |           |     |
|          | Mailing Address 340 Cloudes Mill Ct.   |   |                                   |        | M N<br>08        | /     | 31      | D /                       |           | 2015      | Y   |
|          | City<br>Alexandria   | State<br>VA                                       | Zip Code<br>22304                 |        |                  |       |         | <b>: SA11A</b><br>Receipt |           |           |     |
|          | FEC ID number of contributing federal political committee.                                     | С   |                                   |        |                  |       | ,       |                           |           | 20.       | 84  |
|          | Name of Employer<br>Consumer Healthcare Products   | Occupation<br>Assoc. Dire                         | ctor, Federal Affairs             |        |                  |       |         |                           |           |           |     |
|          | Receipt For:   |   | Year-to-Date ▼                    |        |                  |       |         |                           |           |           |     |
|          | Primary General<br>Other (specify) ▼   |   | 333.44                            |        |                  |       |         |                           |           |           |     |
| в.       | Full Name (Last, First, Middle Initial)<br>Brian Green   |   |                                   |        | Date c           | of Re | ceipt   |                           |           |           |     |
|          | Mailing Address 19110 Mateny Hill Road   |   |                                   |        | M N<br>08        | /     | D<br>15 | D /                       | ү ү<br>2( | 015       | Y   |
|          | City   | State   | Zip Code                          |        | Trans            | sacti | on ID : | SA11A                     | 1.809     | 8         |     |
|          | Germantown   | MD  | 20874                             | _      | Amour            | nt of | Each    | Receipt                   | this F    | Period    |     |
|          | FEC ID number of contributing federal political committee.                                     | С   |                                   | 20.8   |                  |       |         | 84                        |           |           |     |
|          | Name of Employer   | Occupation  | 1                                 |        |                  |       |         |                           |           |           |     |
|          | Consumer Healthcare Prod. Assn   | Vice Presid                                       | ent, Finance & Ops. (CFO)         |        |                  |       |         |                           |           |           |     |
|          | Receipt For:<br>Primary General<br>Other (specify) ▼   | Aggregate   | Year-to-Date ▼<br>312.60          |        |                  |       |         |                           |           |           |     |
| <u> </u> | Full Name (Last, First, Middle Initial)<br>Brian Green   |   |                                   |        | Date c           | of Re | ceipt   |                           |           |           |     |
|          | Mailing Address 19110 Mateny Hill Road   |   |                                   |        | M N<br>08        | /     | D<br>31 |                           |           | 015       | Y   |
|          | City   | State   | Zip Code                          |        | Tran             | sact  | ion ID  | : SA11A                   | 1.809     | 99        |     |
|          | Germantown   | MD  | 20874                             | _      | Amour            | nt of | Each    | Receipt                   | this F    | Period    |     |
|          | FEC ID number of contributing federal political committee.                                     | С   |                                   |        |                  |       | ,       |                           |           | 20        | .84 |
|          | Name of Employer   | Occupation  | 1                                 |        |                  |       |         |                           |           |           |     |
|          | Consumer Healthcare Prod. Assn   | Vice Presic                                       | lent, Finance & Ops. (CFO)        |        |                  |       |         |                           |           |           |     |
|          | Receipt For:   | Aggregate   | Year-to-Date ▼                    |        |                  |       |         |                           |           |           |     |
|          | Other (specify)  |   | 333.44                            |        |                  |       |         |                           |           |           |     |
| s        | UBTOTAL of Receipts This Page (optional)   |   |                                   |        | <u> </u>         |       | 7       |                           | -         | 62.       | 52  |

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

| SCHEDULE A   | (FEC  | Form | 3X) |
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| ITEMIZED REC | EIPTS | 5    |     |

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| 17       |  |                            | Use separate schedule(s)                          |        | (check only one)             |            |              |           |       |    |  |  |
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|          | EMIZED RECEIPTS  |                            | for each category of the<br>Detailed Summary Page |        | < 11a<br>13                  | 11b        | 11c          | 12        | г     | 17 |  |  |
|          | ny information copied from such Reports and S<br>for commercial purposes, other than using the |                            |   |        | for the                      | purpose    | of solicitir | ng contri | butio | ns |  |  |
|          | NAME OF COMMITTEE (In Full)  |                            |   |        |                              |            |              |           |       |    |  |  |
|          | Consumer Healthcare Products   | Associat                   | ion PAC (CHPA/PAC)                                | )      |                              |            |              |           |       |    |  |  |
| Α.       | Full Name (Last, First, Middle Initial)<br>Carlos Gutierrez                                    |                            |   |        | Date of                      | Receipt    |              |           |       |    |  |  |
|          | Mailing Address 926 North Barton Street  |                            |   |        | м м<br>08                    | / D<br>1   | D /          | 2015      |       | 1  |  |  |
|          | City   | State                      | Zip Code  |        | Trans                        | action ID  | : SA11A      | 1.8100    |       |    |  |  |
|          | Arlington  | VA                         | 22201   | _      | Amount                       | of Each    | Receipt 1    | his Peri  | od    |    |  |  |
|          | FEC ID number of contributing federal political committee.                                     | С                          |   |        |                              | - 7        |              |           | 20.8  | 4  |  |  |
|          | Name of Employer   | Occupation                 |   |        |                              |            |              |           |       |    |  |  |
|          | Consumer Healthcare Products   | Director, Sta              | ate Affairs                                       |        |                              |            |              |           |       |    |  |  |
|          | Receipt For:<br>Primary General  | Aggregate                  | Year-to-Date ▼                                    |        |                              |            |              |           |       |    |  |  |
|          | Other (specify)  |                            | 312.60  |        |                              |            |              |           |       |    |  |  |
|          |  |                            | gg  |        |                              |            |              |           |       |    |  |  |
| в.       | Full Name (Last, First, Middle Initial)<br>Carlos Gutierrez                                    |                            |   |        | Date of                      | Receipt    |              |           |       |    |  |  |
|          | Mailing Address 926 North Barton Street  | State Zip Code<br>VA 22201 |   |        | м м<br>08                    | / D        | 1            | _2015     | Y Y   | 1  |  |  |
|          | City   |                            |   |        | Transaction ID : SA11AI.8101 |            |              |           |       |    |  |  |
|          | Arlington  |                            |   |        | Amount                       | of Each    | Receipt 1    | his Peri  | od    |    |  |  |
|          | FEC ID number of contributing federal political committee.                                     |                            |   |        |                              |            |              |           | 20.8  | 4  |  |  |
|          | Name of Employer   | Occupation                 |   |        |                              |            |              |           |       |    |  |  |
|          | Consumer Healthcare Products   | Director, State Affairs    |   |        |                              |            |              |           |       |    |  |  |
|          | Receipt For:   | Aggregate                  | Year-to-Date <b>V</b>                             |        |                              |            |              |           |       |    |  |  |
|          | Primary General<br>Other (specify) ▼   |                            | 333.44  |        |                              |            |              |           |       |    |  |  |
| с.       | Full Name (Last, First, Middle Initial)<br>Kaelan Hollon                                       |                            |   |        | Date of                      | Receipt    |              |           |       |    |  |  |
|          | Mailing Address 100 I Street SE<br>Apt. 214  |                            |   |        | м м<br>08                    | / D        | 5            | 2015      |       | 1  |  |  |
|          | City   | State                      | Zip Code  |        | Trans                        | action ID  | : SA11A      | I.8102    |       |    |  |  |
|          | Washington   | DC                         | 20003   |        | Amount                       | of Each    | Receipt 1    | his Peri  | od    |    |  |  |
|          | FEC ID number of contributing federal political committee.                                     | С                          |   |        |                              | - 7 -      |              |           | 20.8  | 4  |  |  |
|          | Name of Employer   | Occupation                 |   |        |                              |            |              |           |       |    |  |  |
|          | Consumer Healthcare Prod. Assn   | Director, Co               | ommunications                                     |        |                              |            |              |           |       |    |  |  |
|          | Receipt For:<br>Primary General  | Aggregate                  | Year-to-Date ▼                                    |        |                              |            |              |           |       |    |  |  |
|          | Other (specify)  |                            | 312.60  |        |                              |            |              |           |       |    |  |  |
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# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

FOR LINE NUMBER:

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| ITEMIZED RECEIPTS   |                                | for each category of the<br>Detailed Summary Page                         |   | 11a   |  | 11b<br>14 |   | 11c<br>15 | 12       |       | 17   |  |  |
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| NAME OF COMMITTEE (In Full)<br>Consumer Healthcare Produc   | ;)                             |   |   |   |  |           |   |           |          |       |      |  |  |
| Full Name (Last, First, Middle Initial)<br>A. Kaelan Hollon<br>Mailing Address 100 I Street SE<br>Apt. 214<br>City<br>Washington<br>FEC ID number of contributing<br>federal political committee.<br>Name of Employer | State<br>DC<br>C<br>Occupation |   | Date of Receipt   |   |  |           |   |           |          |       |      |  |  |
| Consumer Healthcare Prod. Assn<br>Receipt For:<br>Primary General<br>Other (specify) ▼  |                                | ommunications<br>Year-to-Date ▼<br>333.44                                 | ]   |   |  |           |   |           |          |       |      |  |  |
| Full Name (Last, First, Middle Initial)<br><b>B.</b> Dr. Barbara A. Kochanowski<br>Mailing Address 951 Hidden Park Place  |                                |   |   | Date of Receipt   |  |           |   |           |          |       | Ŷ    |  |  |
| City<br>Herndon<br>FEC ID number of contributing<br>federal political committee.  | State<br>VA                    | Zip Code<br>20170   |   | Transaction ID : SA11AI.8104<br>Amount of Each Receipt this Period<br>20.84 |  |           |   |           |          |       |      |  |  |
| Name of Employer<br>CHPA<br>Receipt For:<br>Primary General<br>Other (specify)  |                                | ent, Regulatory Affairs<br>Year-to-Date ▼<br>312.60                       | ]   |   |  |           |   |           |          |       |      |  |  |
| C. Full Name (Last, First, Middle Initial)<br>Dr. Barbara A. Kochanowski<br>Mailing Address 951 Hidden Park Place   |                                |   | _   | Date o  |  | eceipt    |   | / Y       | _ 2015   |       | Y    |  |  |
| City<br>Herndon<br>FEC ID number of contributing<br>federal political committee.<br>Name of Employer<br>CHPA<br>Receipt For:<br>☐ Primary ☐ General<br>☐ Other (specify) ▼  |                                | Zip Code<br>20170<br>lent, Regulatory Affairs<br>Year-to-Date ▼<br>333.44 | Image: Construction of the co |   |  |           |   |           |          |       |      |  |  |
| SUBTOTAL of Receipts This Page (optional)<br>TOTAL This Period (last page this line numb  |                                |   | =  <br>►<br>►   |   |  | 7         | - | 7         |          | 62.5  | 52   |  |  |

# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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| Any information copied from such Reports and<br>or for commercial purposes, other than using the |                                 |                              | erson for the purpose of soliciting contributions   |  |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)<br>Consumer Healthcare Product                                       | )                               |                              |   |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br><b>A.</b> Scott M. Melville                           | Scott M. Melville               |                              |   |  |  |  |  |  |  |  |  |  |
| Mailing Address 1596 Lupine Den Court  | 08 15 2015                      |                              |   |  |  |  |  |  |  |  |  |  |
| City<br>Vienna   | State Zip Co<br>VA 22182        |                              | Transaction ID : SA11AI.8108 Amount of Each Receipt this Period   |  |  |  |  |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                       | C                               |                              | Amount of Each Receipt this Period  |  |  |  |  |  |  |  |  |  |
| Name of Employer<br>Consumer Healthcare Products   | Occupation<br>President and CEO |                              |   |  |  |  |  |  |  |  |  |  |
| Receipt For:<br>Primary General<br>Other (specify) ▼   | Aggregate Year-to-Dat           | e ▼<br>3124.96               |   |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br>B. Scott M. Melville                                  |                                 |                              | Date of Receipt   |  |  |  |  |  |  |  |  |  |
| Mailing Address 1596 Lupine Den Court  | 08 31 2015                      |                              |   |  |  |  |  |  |  |  |  |  |
| City<br>Vienna   | State Zip Co<br>VA 22182        | de                           | Transaction ID : SA11AI.8109<br>Amount of Each Receipt this Period  |  |  |  |  |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                       | C                               |                              | 208.33  |  |  |  |  |  |  |  |  |  |
| Name of Employer<br>Consumer Healthcare Products   | Occupation<br>President and CEO |                              |   |  |  |  |  |  |  |  |  |  |
| Receipt For:<br>Primary General<br>Other (specify) ▼   | Aggregate Year-to-Dat           | e ▼<br>3333.29               |   |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)<br>C. Lindsay Morris                                     |                                 |                              | Date of Receipt   |  |  |  |  |  |  |  |  |  |
| Mailing Address 7605 Trail Run Rd.   |                                 |                              | M = M         /         D = D         /         Y = Y = Y = Y         Y         O |  |  |  |  |  |  |  |  |  |
| City<br>Falls Church   | State Zip Co<br>VA 22042        |                              | Transaction ID : SA11AI.8112<br>Amount of Each Receipt this Period  |  |  |  |  |  |  |  |  |  |
| FEC ID number of contributing federal political committee.                                       | C                               | 62.51                        |   |  |  |  |  |  |  |  |  |  |
| Name of Employer   | —                               |                              |   |  |  |  |  |  |  |  |  |  |
| Consumer Healthcare Products   |                                 |                              |   |  |  |  |  |  |  |  |  |  |
| Receipt For:<br>Primary General<br>Other (specify) ▼   | Aggregate Year-to-Dat           | e ▼<br>937.65                | ]   |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)  |                                 |                              | 479.17  |  |  |  |  |  |  |  |  |  |

| SCHEDULE A   | (FEC Form 3X) |
|--------------|---------------|
| ITEMIZED REC | EIPTS         |

(check only one)

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| Mailing Address 7605 Trail Run Rd.       08         City       State       Zip Code         Falls Church       VA       22042         Amoun       FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation       Amoun         Consumer Healthcare Products       Government Affairs       Aggregate Year-to-Date ▼         Primary       General       1000.16       Date o         B.       Ted Peterson       Date o       08         Mailing Address 8417 Weller Avenue       V/A       Zip Code       Trans   | purpose of soliciting contributions  |  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|--|--|
| Consumer Healthcare Products Association PAC (CHPA/PAC)         Full Name (Last, First, Middle Initial)         A. Lindsay Morris         Mailing Address 7605 Trail Run Rd.         City       State         Falls Church       VA         FEC ID number of contributing federal political committee.       C         Name of Employer       Occupation         Consumer Healthcare Products       Government Affairs         Receipt For:       Primary         Primary       General         Other (specify) ▼       1000.16         B. Ted Peterson       Date o         Mailing Address 8417 Weller Avenue       Trans         City       State       Zip Code         Ted Peterson       Mailing Address 8417 Weller Avenue       Moun         FEC ID number of contributing federal political committee.       C       Moun                         |  |  |  |  |  |  |  |  |  |  |  |
| A. Lindsay Morris       Date o         Mailing Address 7605 Trail Run Rd.       08         City       State       Zip Code         Falls Church       VA       22042         Falls Church       VA       22042         Amoun       FEC ID number of contributing federal political committee.       C       Amoun         Name of Employer       Occupation       Government Affairs       Aggregate Year-to-Date ▼         Primary       General       1000.16       Date o         Other (specify) ▼       1000.16       Trans         Full Name (Last, First, Middle Initial)       Date o       08         B. Ted Peterson       VA       22102       Amoun         Gity       State       Zip Code       Trans         McLean       VA       22102       Amoun         FEC ID number of contributing federal political committee.       C       Trans |  |  |  |  |  |  |  |  |  |  |  |
| City       State       Zip Code       Trans         Falls Church       VA       22042       Amoun         FEC ID number of contributing federal political committee.       C       Amoun         Name of Employer       Occupation       Government Affairs         Receipt For:       Other (specify)       Aggregate Year-to-Date ▼       1000.16         Primary       General       1000.16       Date o         Full Name (Last, First, Middle Initial)       Date o       108         Ted Peterson       VA       22102       Amoun         City       State       Zip Code       Trans         Mailing Address 8417 Weller Avenue       VA       22102       Amoun         FEC ID number of contributing federal political committee.       C       Image: Code       Image: Code   | f Receipt  |  |  |  |  |  |  |  |  |  |  |
| federal political committee.       U         Name of Employer       Occupation         Consumer Healthcare Products       Government Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       1000.16         B. Ted Peterson       Date o         Mailing Address 8417 Weller Avenue       08         City       State       Zip Code         McLean       VA       22102         FEC ID number of contributing federal political committee.       C   | 08     31     2015       Transaction ID : SA11AI.8113       Amount of Each Receipt this Period |  |  |  |  |  |  |  |  |  |  |
| Consumer Healthcare Products       Government Affairs         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       1000.16         B.       Ted Peterson         Mailing Address 8417 Weller Avenue       Date o         City       State       Zip Code         McLean       VA       22102         FEC ID number of contributing federal political committee.       C   | 62.51  |  |  |  |  |  |  |  |  |  |  |
| B. Ted Peterson       Date of         Mailing Address 8417 Weller Avenue       08         City       State       Zip Code       Trans         McLean       VA       22102       Amoun         FEC ID number of contributing federal political committee.       C       C       C   |  |  |  |  |  |  |  |  |  |  |  |
| City     State     Zip Code     Trans       McLean     VA     22102     Amount       FEC ID number of contributing federal political committee.     C     Image: Contributing federal political committee  | f Receipt  |  |  |  |  |  |  |  |  |  |  |
|  | 15     2015       saction ID : SA11AI.8114       this Period       41.67                       |  |  |  |  |  |  |  |  |  |  |
| CHPA VP  |  |  |  |  |  |  |  |  |  |  |  |
| Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       625.05   |  |  |  |  |  |  |  |  |  |  |  |
| C. Ted Peterson Date of Mailing Address 8417 Weller Avenue   | f Receipt  |  |  |  |  |  |  |  |  |  |  |
| City State Zip Code Trans  | 31 2015<br>saction ID : SA11AI.8115<br>It of Each Receipt this Period                          |  |  |  |  |  |  |  |  |  |  |
| FEC ID number of contributing federal political committee.   | 41.67  |  |  |  |  |  |  |  |  |  |  |
| Name of Employer     Occupation       CHPA     VP  |  |  |  |  |  |  |  |  |  |  |  |
| Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       666.72   |  |  |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Receipts This Page (optional)  | 145.85   |  |  |  |  |  |  |  |  |  |  |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

(check only one)

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| ••           |  |   | Detailed Summary Page                    |        | <b>1</b> 1a |       | 11b      | 11c       |       | 12     | <u> </u> |  |  |  |
|--------------|--|---|--|--------|-------------|-------|----------|-----------|-------|--------|----------|--|--|--|
|              |  |   |  |        |             |       |          |           |       |        |          |  |  |  |
| or           |  | name and a  | ddress of any political committee        | e to s | olicit cor  | ntrib | utions f | from suc  | h co  | mmitte | e.       |  |  |  |
| $\backslash$ | NAME OF COMMITTEE (In Full)                                |   |  |        |             |       |          |           |       |        |          |  |  |  |
|              | Consumer Healthcare Products                               | ION PAC (CHPA/PAC)  |  |        |             |       |          |           |       |        |          |  |  |  |
| Α.           | Full Name (Last, First, Middle Initial)<br>Marc L. Rovner  |   |  |        |             |       |          |           |       |        |          |  |  |  |
|              | Mailing Address 5 Persimmon Ln.                            |   | м м<br>08                                | /      | 24          | ) / Y | 2(       | у<br>015  | Y     |        |          |  |  |  |
|              | City   | State   | Zip Code                                 |        | Trans       | acti  | ion ID : | SA11AI    | .809  | 1      |          |  |  |  |
|              | White Plains   | NY  | 10605                                    |        | Amount      | of    | Each F   | Receipt t | nis P | 'eriod |          |  |  |  |
|              | FEC ID number of contributing federal political committee. | С   |  | 500.00 |             |       |          |           |       |        |          |  |  |  |
|              | Name of Employer   | Occupation  | l  |        |             |       |          |           |       |        |          |  |  |  |
|              | Boehringer Ingelheim                                       | Vice Presid   | ent & General Manager                    |        |             |       |          |           |       |        |          |  |  |  |
|              | Receipt For:   | Aggregate   | Year-to-Date ▼                           |        |             |       |          |           |       |        |          |  |  |  |
|              |  |   | E00.00                                   |        |             |       |          |           |       |        |          |  |  |  |
|              | Other (specify)  | L   | 500.00                                   |        |             |       |          |           |       |        |          |  |  |  |
| в.           | Full Name (Last, First, Middle Initial)<br>Emily Skor      |   |  |        | Date of     | Re    | ceipt    |           |       |        |          |  |  |  |
|              | Mailing Address 2113 12th Street NW                        |   | 08 15 _2015 _                            |        |             |       |          |           |       |        |          |  |  |  |
|              | City   |   | Instant Instant Instantion               |        |             |       |          |           |       |        |          |  |  |  |
|              | Washington   | Washington DC 20009   |  |        |             |       |          |           |       |        |          |  |  |  |
|              | FEC ID number of contributing                              |   |  |        |             |       |          | -         |       |        |          |  |  |  |
|              | federal political committee.                               |   |  |        | 7           |       | _        | 20.       | 84    |        |          |  |  |  |
|              | Name of Employer   | Occupation  | 1  | _      |             |       |          |           |       |        |          |  |  |  |
|              | Consumer Healthcare Products                               | Vice Presid   | ent, Communications                      |        |             |       |          |           |       |        |          |  |  |  |
|              | Receipt For:   | Aggregate   | Year-to-Date ▼                           |        |             |       |          |           |       |        |          |  |  |  |
|              | Primary General  |   |  |        |             |       |          |           |       |        |          |  |  |  |
|              | Other (specify)  |   | , 229.24                                 |        |             |       |          |           |       |        |          |  |  |  |
| _            | Full Name (Last, First, Middle Initial)                    |   |  |        |             |       |          |           |       |        |          |  |  |  |
| C.           | Emily Skor   |   |  | _      | Date of     | Re    | ceipt    |           |       |        |          |  |  |  |
|              | Mailing Address 2113 12th Street NW                        |   |  |        |             | 1     |          | р / Ч     |       |        | Y        |  |  |  |
|              | City   | State   | Zip Code                                 |        |             | act   |          | SA11A     |       |        |          |  |  |  |
|              | Washington   | DC  | 20009                                    |        |             |       |          |           |       |        |          |  |  |  |
|              | FEC ID number of contributing                              | С   |  |        | <u> </u>    | 1     |          |           |       | 20     | .84      |  |  |  |
|              | federal political committee.                               |   |  |        | 7           | 7     |          |           |       |        |          |  |  |  |
|              | Name of Employer   |   |  |        |             |       |          |           |       |        |          |  |  |  |
|              | Consumer Healthcare Products                               |   | · ·                                      | _      |             |       |          |           |       |        |          |  |  |  |
|              | Receipt For:   | Aggregate   | Year-to-Date ▼                           |        |             |       |          |           |       |        |          |  |  |  |
|              | Other (specify)  |   | 250.08                                   |        |             |       |          |           |       |        |          |  |  |  |
|              |  |   | A) (A) (A) (A) (A) (A) (A) (A) (A) (A) ( |        |             |       |          |           |       |        |          |  |  |  |
| s            | UBTOTAL of Receipts This Page (optional)                   |   |  |        |             |       |          |           |       | 541.   | 68       |  |  |  |
| -<br>-       | OTAL This Period (last name this line number o             | nlv)  |  | -      |             |       |          |           |       | 1583.  | 44       |  |  |  |
| L '          | The most chou has page this line number of                 | copied from such Reports and Statements may not be sold or used by any perion for the purpose of soliciting contributions from such committee.         committee to solicit contributions from such committee.         committee. |  |        |             |       |          |           |       |        |          |  |  |  |

| S         | CHEDULE B (FEC Form 3X)   | [   |         | EC        | י סר         |           | UMBER                                   |                 |             |                             | PAG       | F ′ | 13 0         | F 13      |  |
|-----------|---|---|---------|-----------|--------------|-----------|---|-----------------|-------------|-----------------------------|-----------|-----|--------------|-----------|--|
|           | EMIZED DISBURSEMENTS  | Use separate schedul for each category of t             |         |           | neck         | only o    | one)                                    |                 |             |                             |           |     |              | 0         |  |
| -         |   | Detailed Summary Pa                                     |         |           |              | 21b<br>27 | 22<br>28a                               |                 | 23<br>28b   |                             | 24<br>28c |     | 25<br>29     | 26<br>30b |  |
| Ar<br>or  | ny information copied from such Reports and Statem<br>for commercial purposes, other than using the nam | I<br>nents may not be sold c<br>ne and address of any p | or used | by<br>com | any          | persor    | n for the                               | purp<br>pontrib | oose (      | of soli                     | citing    | con | tributi      | ons       |  |
| $\square$ | NAME OF COMMITTEE (In Full)   |   |         |           |              |           |   |                 |             |                             |           |     |              |           |  |
|           | Consumer Healthcare Products As   | sociation PAC (   | CHP     | A/F       | PAC          | C)        |   |                 |             |                             |           |     |              |           |  |
| Α.        | Full Name (Last, First, Middle Initial)<br>Wells Fargo Bank   |   |         |           |              |           | Date o                                  | of Dis          | burse       | ement                       |           |     |              |           |  |
|           | Mailing Address 1510 K Street NW  |   |         |           |              |           | 08                                      | 1               | D<br>1      | D /                         | Y         | 201 | 15           | Y         |  |
|           | 5   | State Zip Code<br>DC 20005                              |         |           |              |           | Tran                                    | sacti           | on ID       | : SB2                       | 21B.8     | 090 |              |           |  |
|           | Purpose of Disbursement   | 20003   |         | -         | _            |           |   |                 |             |                             |           |     |              |           |  |
|           |   |   |         | 0         | 01           |           | Amount of Each Disbursement this Period |                 |             |                             |           |     |              | eriod     |  |
|           | Candidate Name  |   |         |           | egory<br>/pe | //        | 57.02                                   |                 |             |                             |           |     |              |           |  |
|           |   | nent For:<br>Primary Gener<br>Other (specify) ▼         | ral     |           |              |           |   |                 |             |                             |           |     |              |           |  |
|           | State: District:  |   |         |           |              |           |   |                 |             |                             |           |     |              |           |  |
| В.        | Full Name (Last, First, Middle Initial)   |   |         |           |              |           | Date o                                  | of Dis          | burse       | ement                       |           |     |              |           |  |
|           | Mailing Address   |   |         |           |              |           | M - N                                   | /               | D           | D /                         | Y         | Υ   | Y            | Y         |  |
|           | City S  | State Zip Code  |         |           |              |           |   |                 |             |                             |           |     |              |           |  |
|           | Purpose of Disbursement   |   |         | -         | -            |           | •                                       |                 | <b>-</b>    | Dista                       |           |     |              | e of e of |  |
|           | Candidate Name  |   | - 4     |           | ategory/     |           |   |                 |             | ch Disbursement this Period |           |     |              |           |  |
|           |   |   |         |           | egory<br>/pe | ″         |   |                 |             |                             |           |     |              |           |  |
|           |   | nent For:<br>Primary Gener<br>Other (specify) ▼         | ral     |           |              |           |   |                 |             |                             |           |     |              |           |  |
|           | State: District:  |   |         |           |              |           |   |                 |             |                             |           |     |              |           |  |
| C.        | Full Name (Last, First, Middle Initial)   |   |         |           |              |           | Date o                                  | of Dis          | burse       | ement                       |           |     |              |           |  |
|           | Mailing Address   |   |         |           |              |           | M N                                     | 1               | D           | D /                         | Y         | Y   | Y            | Y         |  |
|           | City S  | State Zip Code  |         |           |              |           |   |                 |             |                             |           |     |              |           |  |
|           | Purpose of Disbursement Candidate Name  |   |         |           |              | ٦         | •                                       |                 | <b>-</b>  - | Disk                        |           |     |              | - de d    |  |
|           |   |   |         |           |              | //        | Amount of Each Disbursement this Peri   |                 |             |                             |           |     |              | eriod     |  |
|           | President   | nent For:<br>Primary Gener<br>Other (specify) <b>v</b>  | ral     |           |              |           |   |                 |             |                             |           |     |              |           |  |
| _         | State: District:  |   |         |           |              |           |   |                 |             |                             |           |     |              |           |  |
| ⊢         | UBTOTAL of Disbursements This Page (optional)   |   |         |           |              |           | E                                       |                 | ,           |                             | 7         |     | 57.0<br>57.0 | +         |  |
| ΙT        | <b>OTAL</b> This Period (last page this line number only)   |   |         | •••••     |              |           | 1                                       | _               | 7           |                             | 7         | -   | 57.0         | ~         |  |