

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
Professional Compounding Centers of America Political Action Committee

ADDRESS (number and street) 9901 South Wilcrest Dr
Houston TX 77099
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00558452 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End 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 [04] / [01] / [2014] through [06] / [30] / [2014]

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 Mary Hogan

Signature of Treasurer Mary Hogan [Electronically Filed] Date [07] / [10] / [2014]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Professional Compounding Centers of America Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="45700.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="30125.00"/>	<input type="text" value="76325.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="75825.00"/>	<input type="text" value="76325.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12560.00"/>	<input type="text" value="13060.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="63265.00"/>	<input type="text" value="63265.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Professional Compounding Centers of America Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	29300.00	75300.00
(ii) Unitemized	825.00	1025.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	30125.00	76325.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	30125.00	76325.00
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).....	0.00	0.00
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 Transfers (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))..... ▶	30125.00	76325.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	30125.00	76325.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	60.00	60.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	60.00	60.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	13000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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 Activity (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)) ..	12560.00	13060.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12560.00	13060.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	30125.00	76325.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30125.00	76325.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	60.00	60.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	60.00	60.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<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

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)
Professional Compounding Centers of America Political Action Committee

A. Daynce Ashton
Full Name (Last, First, Middle Initial)
Mailing Address 9901 South Wilcrest Dr
City Houston State TX Zip Code 77099
FEC ID number of contributing federal political committee. **C**
Name of Employer PCCA Occupation Sales Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt 05 / 27 / 2014
Transaction ID : SA11AI.4205
Amount of Each Receipt this Period 800.00
Check Contribution

B. Arjun Day
Full Name (Last, First, Middle Initial)
Mailing Address 12719 Broken Bough Dr
City Houston State TX Zip Code 77024
FEC ID number of contributing federal political committee. **C**
Name of Employer PCCA Occupation Pharmacist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 05 / 2014
Transaction ID : SA11AI.4210
Amount of Each Receipt this Period 5000.00
Check Contribution

C. W Benjamin Fry
Full Name (Last, First, Middle Initial)
Mailing Address 311 N Sam Houston Blvd
City San Benito State TX Zip Code 78586
FEC ID number of contributing federal political committee. **C**
Name of Employer Fry's Prescription Pharmacy Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 11 / 2014
Transaction ID : SA11AI.4217
Amount of Each Receipt this Period 500.00
Check Contribution

SUBTOTAL of Receipts This Page (optional).....▶	6300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America Political Action Committee

A. Andrew Glasnapp
Full Name (Last, First, Middle Initial)

Mailing Address 1514 Rosehill Ct

City Sugar Land State TX Zip Code 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer PCCA Occupation Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11AI.4208

Amount of Each Receipt this Period
 1000.00

Check Contribution

B. Linda King
Full Name (Last, First, Middle Initial)

Mailing Address 1850 Havenman Rd

City Lynden State WA Zip Code 98264

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2014

Transaction ID : SA11AI.4140

Amount of Each Receipt this Period
 1000.00

Check Contribution

C. Sally Kvam
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 38

City Poulsbo State WA Zip Code 98370

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : SA11AI.4192

Amount of Each Receipt this Period
 500.00

Check Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<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)
Professional Compounding Centers of America Political Action Committee

A. Deril Lees
Full Name (Last, First, Middle Initial)
Mailing Address 1223 E 21st PI
City Tulsa State OK Zip Code 74114
FEC ID number of contributing federal political committee. **C**
Name of Employer The Apothecary Shoppe Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 11 / 2014
Transaction ID : SA11AI.4142
Amount of Each Receipt this Period 5000.00
Check Contribution

B. Robbin Lees
Full Name (Last, First, Middle Initial)
Mailing Address 1223 E 21st PI
City Tulsa State OK Zip Code 74114
FEC ID number of contributing federal political committee. **C**
Name of Employer The Apothecary Shoppe Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 11 / 2014
Transaction ID : SA11AI.4146
Amount of Each Receipt this Period 5000.00
Check Contribution

C. Arthur Matthys
Full Name (Last, First, Middle Initial)
Mailing Address 521 Co Rd 226
City Wharton State TX Zip Code 77488
FEC ID number of contributing federal political committee. **C**
Name of Employer PCCA Occupation Pharmacist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 03 / 2014
Transaction ID : SA11AI.4158
Amount of Each Receipt this Period 1500.00
Check Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 11500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America Political Action Committee

A. John Preckshot
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3882

City Peoria State IL Zip Code 61612

FEC ID number of contributing federal political committee. **C**

Name of Employer PCCA Occupation Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : SA11AI.4194

Amount of Each Receipt this Period
 2000.00

Check Contribution

B. Bryan Prescott
Full Name (Last, First, Middle Initial)

Mailing Address 3619 Apple Grove Dr

City Manvel State TX Zip Code 77578

FEC ID number of contributing federal political committee. **C**

Name of Employer PCCA Occupation Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2014
Transaction ID : SA11AI.4211

Amount of Each Receipt this Period
 250.00

Check Contribution

C. Renee Prescott
Full Name (Last, First, Middle Initial)

Mailing Address 3619 Apple Grove Dr

City Manvel State TX Zip Code 77578

FEC ID number of contributing federal political committee. **C**

Name of Employer PCCA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2014
Transaction ID : SA11AI.4216

Amount of Each Receipt this Period
 250.00

Check Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<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)
Professional Compounding Centers of America Political Action Committee

A. Jimmy Smith
Full Name (Last, First, Middle Initial)

Mailing Address 16414 Mellow Oaks Lane

City Sugar Land State TX Zip Code 77478

FEC ID number of contributing federal political committee. **C**

Name of Employer PCCA Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
 2500.00

Check Contribution

B. Macquel Smith
Full Name (Last, First, Middle Initial)

Mailing Address 16414 Mellow Oaks Lane

City Sugar Land State TX Zip Code 77478

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed Occupation Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2014

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
 2500.00

Check Contribution

C. John Voliva
Full Name (Last, First, Middle Initial)

Mailing Address 3106 Purple Finch

City Missouri City State TX Zip Code 77459

FEC ID number of contributing federal political committee. **C**

Name of Employer PCCA Occupation Pharmacist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period
 500.00

Check Contribution

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America Political Action Committee

A. Tsu-I Wang
Full Name (Last, First, Middle Initial)
Mailing Address 3518 Lakefield Blvd
City Sugar Land State TX Zip Code 77479
FEC ID number of contributing federal political committee. **C**
Name of Employer PCCA Occupation Senior Formulation Chemist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 03 / 2014
Transaction ID : SA11AI.4160
Amount of Each Receipt this Period 1000.00
Check Contribution

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	29300.00

**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)

<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)

Professional Compounding Centers of America Political Action Committee

Full Name (Last, First, Middle Initial)

A. BILIRAKIS FOR CONGRESS

Mailing Address PO BOX 606

City TARPON SPRINGS State FL Zip Code 34688

Purpose of Disbursement
Political Contribution

Candidate Name

GUS M BILIRAKIS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Transaction ID : SB23.4168

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BOEHNER FOR SPEAKER

Mailing Address 320 FIRST ST., SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Political Contribution

Candidate Name

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Other

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2014

Transaction ID : SB23.4184

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. BUDDY CARTER FOR CONGRESS

Mailing Address 200 E ST JULIAN ST SUITE 603

City SAVANNAH State GA Zip Code 31401

Purpose of Disbursement
Political Contribution

Candidate Name

EARL LEROY CARTER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 01 Runoff

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2014

Transaction ID : SB23.4233

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5500.00

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)

<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)

Professional Compounding Centers of America Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF FARR

Mailing Address PO BOX 122

City: MONTEREY State: CA Zip Code: 93942

Purpose of Disbursement
Political Contribution

Candidate Name
SAM FARR

Office Sought: House
 Senate
 President
State: CA District: 20

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : **SB23.4182**

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
Political Contribution

Candidate Name
RAYMOND E. 'GENE' GREEN

Office Sought: House
 Senate
 President
State: TX District: 29

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : **SB23.4183**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MICHAEL BURGESS FOR CONGRESS

Mailing Address PO BOX 2334

City: DENTON State: TX Zip Code: 76202

Purpose of Disbursement
Political Contribution

Candidate Name
MICHAEL C. DR. BURGESS

Office Sought: House
 Senate
 President
State: TX District: 26

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Transaction ID : **SB23.4162**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3000.00

**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)

<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)

Professional Compounding Centers of America Political Action Committee

Full Name (Last, First, Middle Initial)

A. MORGAN GRIFFITH FOR CONGRESS

Mailing Address PO BOX 361

City State Zip Code
CHRISTIANSBURG VA 24068

Purpose of Disbursement
Political Contribution

Candidate Name

H MORGAN GRIFFITH

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	4

Transaction ID : SB23.4237

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. RAND PAUL VICTORY COMMITTEE

Mailing Address PO BOX 72190

City State Zip Code
NEWPORT KY 41072

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : SB23.4171

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. RENEE ELLMERS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 99567

City State Zip Code
RALEIGH NC 27624

Purpose of Disbursement
Political Contribution

Candidate Name

RENEE JACISIN ELLMERS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	4

Transaction ID : SB23.4165

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

3	0	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

3	0	0	0	0	0	0	0	0	0
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**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)

<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)

Professional Compounding Centers of America Political Action Committee

Full Name (Last, First, Middle Initial)

A. VOLUNTEERS FOR SHIMKUS

Mailing Address PO BOX 661

City State Zip Code
COLLINSVILLE IL 62234

Purpose of Disbursement
Political Contribution

Candidate Name

JOHN M SHIMKUS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 15

Date of Disbursement

/ /
05 / 06 / 2014

Transaction ID : SB23.4174

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1000.00

12500.00