PAGE 1 / 13

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

| I ONIVI 3X | For Other Than An Aut | horized Committee | 9 | | Office Use Only |
|--|--|------------------------------------|--------------------------|--------------|--|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If typing over the lines. | g, type | 12FE4M: | |
| Health Industry Distr | ibutors Association Po | litical Action Com | nmittee | 1 1 1 1 | |
| | | | | | |
| ADDRESS (number and street) ▼ | 310 Montgomery Street | | | | |
| Check if different than previously reported. (ACC) | Alexandria | | | VA L | 22314 |
| 2. FEC IDENTIFICATION | NUMBER ▼ CIT | ГУ▲ | ST | ATE 🛦 | ZIP CODE ▲ |
| C C00486498 | | S THIS NE | EW) OR | AM (A) | ENDED |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: | Report Due On: | | ay 20 (M5) ın 20 (M6) | = | 20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election |
| April 15 | | 20 (M4) Ju | Il 20 (M7) | Oct 2 | Year Only) 70 (M10) Jan 31 (YE) |
| Quarterly Report July 15 Quarterly Report | (C) 12-Day PRE-Election | Primary (12P) | | General (| 12G) Runoff (12R) |
| October 15 Quarterly Report | Report for the: | Convention (12 | | Special (1 | |
| January 31 Year-End Report | | on on | D D / Y | Y | in the State of |
| July 31 Mid-Yea Report (Non-eler Year Only) (MY) | ction (d) 30-Day | General (30G) | | Runoff (30 | DR) Special (30S) |
| Termination Rep (TER) | ort Election | on on | D D / Y | YYYY | in the State of |
| 5. Covering Period | 04 01 / 2018 | through | M M / | 30/ | 2018 |
| I certify that I have examined | I this Report and to the best of Tallman, Vincent, , , | my knowledge and be | elief it is true, | correct and | complete. |
| Type or Print Name of Treas | | | | | |
| Signature of Treasurer | allman, Vincent, , , | [Electronically l | Filed] Dat | e 07 | 09 / 2018 |
| NOTE: Submission of false, en | roneous, or incomplete informatio | n may subject the perso | on signing this | Report to th | e penalties of 52 U.S.C. § 30109 |
| Office Use Only | | | | | FEC FORM 3X Rev. 05/2016 |

| FEC Form 3X (Rev. 05/2016) | SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS | Page 2 |
|--|--|---|
| Write or Type Committee Name | tion Delitical Action Committee | |
| Health Industry Distributors Associa | ition Political Action Committee | |
| Report Covering the Period: From: 04 | | 06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
| 6. (a) Cash on Hand January 1, 2018 | | 25067.94 |
| (b) Cash on Hand at Beginning of Reporting Period | 27067.94 | |
| (c) Total Receipts (from Line 19) | 14500.00 | 19500.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 41567.94 | 44567.94 |
| 7. Total Disbursements (from Line 31) | 18705.40 | 21705.40 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 22862.54 | 22862.54 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| This committee has qualified as a multican | ndidate committee. (see FEC FORM 1M) | |
| F | or further information contact: | |
| | Federal Election Commission | |

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. 05/2016)

Write or Type Committee Name

Health Industry Distributors Association Political Action Committee

01 2018 06 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 9500.00 9500.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 9500.00 9500.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 5000.00 10000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 19500.00 14500.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 14500.00 19500.00 20. Total Federal Receipts 14500.00 19500.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | Calcination for to but |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share | 0.00 | 0.00 |
| (b) Other Federal Operating | 7 | 205.46 |
| Expenditures(c) Total Operating Expenditures | 305.40 | 305.40 |
| (add 21(a)(i), (a)(ii), and (b))▶ | 305.40 | 305.40 |
| Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| Contributions to Federal Candidates/Committees and Other Political Committees | 18400.00 | 21400.00 |
| Independent Expenditures | | 4 4 |
| (use Schedule E) | 0.00 | 0.00 |
| (use Schedule F) | 0.00 | 0.00 |
| Loan Repayments Made | 0.00 | 0.00 |
| Loans MadeRefunds of Contributions To: | 0.00 | 0.00 |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| Other Disbursements (Including | | |
| Non-Federal Donations) | 0.00 | 0.00 |
| Federal Election Activity (52 U.S.C. § 30101(20) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share | 0.00 | 0.00 |
| · · | 0.00 | 0.00 |
| (ii) "Levin" Share(b) Federal Election Activity Paid | 0.00 | 0.00 |
| Entirely With Federal Funds | 0.00 | 0.00 |
| Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | | |
| | 18705.40 | 21705.40 |
| Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) | | |
| from Line 31) | 18705.40 | 21705.40 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contribut Operating Expend | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other (from Line 11(d), page 3) | ′ | 14500.00 | 19500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | | 0.00 | 0.00 |
| 35. Net Contributions (other the (subtract Line 34 from Line) | ′ | 14500.00 | 19500.00 |
| 36. Total Federal Operating E (add Line 21(a)(i) and Lin | ' | 305.40 | 305.40 |
| 37. Offsets to Operating Experiment (from Line 15, page 3) | | 0.00 | 0.00 |
| 38. Net Operating Expenditure (subtract Line 37 from Line) | | 305.40 | 305.40 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

| | FOR LINE NUMBER: | | | | | PAGE | 6 | OF | 1: | 3 | |
|------------------|------------------|---|-----|--|-----|------|-----|----|----|---|---|
| (check only one) | | | | | | | | | | | |
| | [| X | 11a | | 11b | | 11c | 12 | 2 | | |
| | | | 13 | | 14 | | 15 | 16 | 6 | 1 | 7 |

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) Health Industry Distributors Association Political Action Committee Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Agrawal, Akhil, , , Date of Receipt Mailing Address 10425 Canterbury Ct 2018 City State Zip Code Transaction ID: A2018-1079014 FL Davie 33328 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President American Medical Depot Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lollis, Larry, , Mr., Date of Receipt Mailing Address 103 Rockport Ave. 2018 City State Zip Code Transaction ID: A2018-1079015 SC Greer 29650 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Grove Medical Inc. **Business Owner** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ross, Todd, , , Date of Receipt Mailing Address 605 Huntington Ln 2018 City State Zip Code Transaction ID: A2018-1079013 AR Conway 72034 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Preferred Medical President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 8500.00 SUBTOTAL of Receipts This Page (optional)..... 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

| ı | FO | R LINE | NUMBER | : PAGE | E 7 OF | - 13 | | | | |
|---|------------------|-------------|--------|----------|--------|------|--|--|--|--|
| ı | (check only one) | | | | | | | | | |
| | > | 1 1a | 11b | 11c | 12 | | | | | |
| ı | | 13 | 14 | 15 | 16 | 17 | | | | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full)

| | Full Name of Individual (Last, First, Middle Seitz, Mark, , Mr., Mailing Address 420 Whistler Cove | Date of Receipt 05 21 2018 | | | | |
|-----------------|---|-----------------------------|-------------------------|------------------------------------|--|--|
| | City | State | Zip Code | Transaction ID : A2018-1079016 | | |
| | Franklin | TN | 37067 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | 1000.00 | | |
| | Name of Employer (for Individual) | | pation (for Individual) | Memo Item | | |
| | National Distribution & Contracting I | Presi | ident & CEO | | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate \ | Year-to-Date ▼ |] | | |
| | Full Name of Individual (Last, First, Middle | Initial) or Full Or | ganization Name | Date of Receipt | | |
| Mailing Address | | | | M = M / D = D / Y = Y = Y | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | | | |
| | Name of Employer (for Individual) | Occu | pation (for Individual) | Memo Item | | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate \ | Year-to-Date ▼ |] | | |
| | Full Name of Individual (Last, First, Middle | Initial) or Full Or | ganization Name | Date of Receipt | | |
| | Mailing Address | | | Mam / Dab / Yayayay | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | | | |
| | Name of Employer (for Individual) | Memo Item | | | | |
| | Receipt For: Primary General Other (specify) | Aggregate \ | Year-to-Date ▼ |] | | |
| | IDTOTAL (D Ti. D (| | | 1000.00 | | |
| Į | IRI()IAI Of Receipts This Page (Optional |) | | | | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Other (specify) ▼

Primary

Mailing Address

В.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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

Not Applicable

| lmage# 201807099115258522 | | | |
|---|--------------------|---|--|
| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 OF 13 (check only one) 11a 11b 11c 12 13 14 15 16 17 |
| Any information copied from such Reports and or for commercial purposes, other than using t | | | person for the purpose of soliciting contributions e to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Health Industry Distributors As | ssociation F | Political Action Commi | ttee |
| Full Name of Individual (Last, First, Middle Cardinal Health Inc. PAC | Initial) or Full O | rganization Name | Date of Receipt |
| Mailing Address 7000 Cardinal Place | | | 05 23 2018 |
| City | State | Zip Code | Transaction ID: A2018-16437 |
| Dublin | ОН | 43017 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C cod | 0332833 | 5000.00 |
| Name of Employer (for Individual) | Оссі | upation (for Individual) | Memo Item Federal PAC |
| Receipt For: 2018 Primary General | Aggregate | Year-to-Date ▼ | |

Date of Receipt

| City | State | Zip Code | |
|--|-----------------------|-----------------------|------------------------------------|
| | | | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | |
| Name of Employer (for Individual) | Occupa | tion (for Individual) | Memo Item |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Yea | ar-to-Date ▼ | |
| Full Name of Individual (Last, First, Middle C. | Initial) or Full Orga | nization Name | Date of Receipt |
| Mailing Address | | | M = M / D = D / Y = Y = Y |
| City | State | Zip Code | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | |
| Name of Employer (for Individual) | Occupat | tion (for Individual) | Memo Item |
| Receipt For: Primary General Other (specify) | Aggregate Yea | ar-to-Date ▼ | |
| SUBTOTAL of Receipts This Page (optional). | | ···· | 5000.00 |

5000.00

5000.00

S П

| SCHEDULE B (FEC Form 3X) | | | | NUMBER | : | | | PAGE | 9 | OF 13 | | | |
|--------------------------|--------------------------------|----------------------------------|--------------|-----------------------------------|---------------------|-------|---|---------|-----------|-------|---------------------------|---------|--------|
| ΙT | EMIZED DIS | SBURSEMENTS | | arate schedule(s) category of the | s) (check only one) | | | | 707 | | | | |
| | | | | Summary Page | | | | L | 27 30b | | | | |
| Ar | v information cop | ied from such Reports and Stat | ements may i | not be sold or use | ed by an | | | | | | | | tions |
| | | urposes, other than using the na | | | | | | | | | | | |
| \setminus | NAME OF COMM | , , | | | _ | | | | | | | | |
| | Health Indu | stry Distributors Asso | ciation Po | olitical Action | Com | mitte | е | | | | | | |
| _ | | First, Middle Initial) | | | | | _ | | | | | | |
| Α. | ^{A.} PayPal Inc. | | | | | | Date o | f Disl | | | | | _ |
| | Mailing Address | P.O. Box 7022 | | | | | 05 | ′ | 21 | _ | Y | 2018 | Y |
| | City | | State | Zip Code | | | FEC Id | lentifi | cation | Nun | nber | | |
| | Mountain View Purpose of Disbu | irsement | CA | 94039 | | | | - | _ | _ | - | | |
| | Credit Card Proc | | | | 001 | п. | C | | . 17 | | | | |
| | Candidate Name | | | | Catego | ory/ | | | | | 8 6920 8 Irseme | nt this | Period |
| | Office Sought: | House Disburs | ement For: 2 | 2010 | Тур | € | | _ | - | _ | - | 305.4 | 10 |
| | Onice Sought. | Senate | Primary | General | | | | | | | 7 | 000. | |
| | | President | Other (spec | | | | Me | emo I | Item | | | | |
| | State: | District: | | Not Applicable |) | | | | | | | | |
| В. | Full Name (Last, | First, Middle Initial) | | | | | Date o | f Disl | hurser | ment | | | |
| | | | | | | | M = M | , | D | | Υ | YIY | Υ |
| | Mailing Address | | | | | | | | | _ | L | | |
| | City | | State | Zip Code | | | FEC Id | lantifi | cation | Num | nher | | |
| | Purpose of Disbu | ircamant | | | | | _ | | oation | Itali | 1001 | - | |
| | Turpose of Disbu | ii Sement | | | | П | С | _ | | | | | |
| | Candidate Name | | | Category/ | | | Amount of Each Disbursement this Period | | | | Period | | |
| | Office Sought: | House Disburs | ement For: | | Тур | • | _ | | | | - | | - |
| | Office Sought. | Senate | Primary | General | | | | | | - | , | 1 4 | |
| | | President | Other (spec | | | | Me | emo I | ltom | | | | |
| | State: | District: | | | | | IVIE | 1110 1 | item | | | | |
| C. | Full Name (Last, | First, Middle Initial) | | | | | Date o | f Diel | hurear | ment | | | |
| ٥. | | | | | | | M M | | D | | Υ | Y | Υ |
| | Mailing Address | | | | | | | | L. | | L. | | |
| | City | | State | Zip Code | | | FEC Id | lentifi | cation | Num | nber | | |
| | Purpose of Disbu | ırsement | | | | | | | | | | - | |
| Candidate Name | | in demone | | | | п. | C | - | | _ | | | |
| | | | | | Catego | | Amount of Each Disbursement this Period | | | | Period | | |
| | Office Sought: | House Disburs | ement For: | | Тур | = | | | | | - | | |
| | | Senate | Primary | General | | | | | | | | | |
| | | President | Other (spec | cify) ▼ | | | Me | emo I | ltem | | | | |
| _ | State: | District: | | | | | П | | | | | | |
| s | UBTOTAL of Disk | oursements This Page (optional) |) | | | ▶ | | | | | - | 305. | 40 |
| H | | | | | | | <u> </u> | | , | ÷ | 7 | 205 | 40 |
| T | OTAL This Period | I (last page this line number on | ly) | | | ▶ | | | , | | , | 305. | 40 |

| S | CHEDULE B (FEC Form 3X) | lles sons | | FOR LINE N | IUMBER: PAGE 1 | I0 OF 13 | | |
|-----------|---|---------------------|----------------------------------|-------------------|---|--------------|--|--|
| IT | EMIZED DISBURSEMENTS | | rate schedule(s) category of the | (check only | | 07 | | |
| | | | Summary Page | 21b 28a | | 27 30b | | |
| Δr | ny information copied from such Reports and Statem | nents may n | not he sold or used | | | | | |
| | for commercial purposes, other than using the name | | | | | | | |
| \rangle | NAME OF COMMITTEE (In Full) Health Industry Distributors Associa | ation Pol | litical Action | Committee |) | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | |
| Α. | Latta for Congress | | | | Date of Disbursement | | | |
| | Mailing Address 499 S. Capitol St. SW Suite 420 | | | | 05 03 201 | 8 | | |
| | City | State | Zip Code | | FEC Identification Number | | | |
| | · · · · · · · · · · · · · · · · · · · | DC | 20003 | | | _ | | |
| | Purpose of Disbursement Contribution | | | 011 | C C00438697 | | | |
| | Candidate Name | | | | Transaction ID: B686240 Amount of Each Disbursement t | his Pariod | | |
| | Latta, Bob, , , | | | Category/ Type | Amount of Each disbursement t | Tilo T ellou | | |
| | | nent For: 2 | 018 | | 10 | 00.00 | | |
| | | Primary | General | | Memo Item | | | |
| | State: OH District: 05 | Other (spec | irry) 🔻 | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | |
| В. | Marsha for Senate | | | | Date of Disbursement | | | |
| | | | | | | YYY | | |
| | Mailing Address 1010 Wisconsin Ave. NW Suite 570 | | 05 25 2018 | | | | | |
| | , | State DC | Zip Code 20007 | | FEC Identification Number | | | |
| | Purpose of Disbursement | | 20007 | | C C00376939 | | | |
| | Contribution | 011 Category/ | | | Transaction ID : B688468 Amount of Each Disbursement this Peric | | | |
| | Candidate Name | | | | | | | |
| | Blackburn, Marsha, , , Office Sought: House Disbursem | nent For: 2 | 1010 | Туре | 22 | 200.00 | | |
| | | Primary | General | | 7 7 | .00.00 | | |
| | | Other (spec | | | Mama Itam | | | |
| | State: TN District: | | | | Memo Item | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | |
| C. | Marsha for Senate | | | | Date of Disbursement | | | |
| | Mailing Address 1010 Wisconsin Ave. NW Suite 570 | າ | | | 05 25 201 | | | |
| | | | | | | | | |
| | , | State | Zip Code | | FEC Identification Number | | | |
| | Washington Purpose of Disbursement | DC | 20007 | | C C00376939 | \neg | | |
| | Contribution | | | 011 | Transaction ID : B688469 | | | |
| | Candidate Name | Category/ | Amount of Each Disbursement t | his Period | | | | |
| | Blackburn, Marsha, , , | | | Туре | 27 | 700.00 | | |
| | \vdash \circ \cdot \vdash \neg | nent For: 2 Primary | | | 21 | 700.00 | | |
| | <u>~</u> | Other (spec | • | | п., . | | | |
| | State: TN District: | | | | Memo Item | | | |
| | , | | | - | | | | |
| S | SUBTOTAL of Disbursements This Page (optional) | | | ·····• | 59 | 900.00 | | |
| 7 | OTAL This Period (last page this line number only). | | | | | | | |
| | The time to the clast page this line number only). | | | | | | | |

| SCHEDULE B (FEC Form 3X) | FOR LINE | | | | | |
|---|---|------------------|---|--|--|--|
| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | 7 one) | | | |
| | Detailed Summary Page | 28a | 28b 28c 29 30b | | | |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the name | | | | | | |
| NAME OF COMMITTEE (In Full) | ne and address of any point | car committee to | Solicit contributions from such committee. | | | |
| Health Industry Distributors Associ | ation Political Actior | n Committe | е | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Dishusansant | | | |
| A. Friends of John Barrasso | | | Date of Disbursement | | | |
| Mailing Address 1020 N. Fairfax St. Suite 201 | | | 06 19 2018 | | | |
| , | State Zip Code | | FEC Identification Number | | | |
| Alexandria Purpose of Disbursement | VA 22314 | | 0.000,400,000 | | | |
| Contribution | | 011 | C C00436386 | | | |
| Candidate Name | | Category/ | Transaction ID : B690634 Amount of Each Disbursement this Period | | | |
| Barrasso, John, , , | | Type | 0700.00 | | | |
| | ment For: 2018 | | 2500.00 | | | |
| Senate X President | Primary General Other (specify) ▼ | | I | | | |
| State: WY District: | | | Memo Item | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| B. George Holding for Congress | | | Date of Disbursement | | | |
| Mailing Address P.O. Box 15239 | | | 06 19 2018 | | | |
| Maining 7 (darese 1.0. Box 13239 | | | 20,0 | | | |
| , | State Zip Code | | FEC Identification Number | | | |
| Washington Purpose of Disbursement | DC 20003 | | C C00499236 | | | |
| Contribution | | 011 | | | | |
| Candidate Name | | Category/ | Transaction ID : B690632 Amount of Each Disbursement this Period | | | |
| Holding, George, , , | | Type | 1000.00 | | | |
| Office Sought: House Disburser Senate | ment For: 2018 Primary x General | | 1000.00 | | | |
| President | Other (specify) | | п., ., | | | |
| State: NC District: 02 | | | Memo Item | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| ^{C.} Hudson for Congress | | | Date of Disbursement | | | |
| Mailing Address 611 Pennsylvania Ave. SE #396 | | | 06 19 _2018 _ | | | |
| | | | | | | |
| City Washington | State Zip Code 20003 | | FEC Identification Number | | | |
| Purpose of Disbursement | 20000 | | C C00504522 | | | |
| Contribution | | 011 | Transaction ID : B690631 | | | |
| Candidate Name | Amount of Each Disbursement this Period | | | | | |
| Hudson, Richard, , , Office Sought: House Disburser | ment For: 2018 | Type | 1000.00 | | | |
| Senate | Primary General | | 4 4 4 | | | |
| President | Other (specify) ▼ | | Memo Item | | | |
| State: NC District: 08 | | | Н | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 4500.00 | | | |
| COLITICAL OF STOCKHOOL THIS T age (optional) | | | | | | |
| TOTAL This Period (last page this line number only) |) | | 1 | | | |

17

| SCHE | DULE B (FEC Form 3X) | IIaa | | | NUMBER: | PAG | E 12 OI | F 13 | | | | | | | | |
|--------------------|--|-----------------|------------------|------------------|------------|-----------|---|----------------------|------------------------------|--------------------------|-------|--|--|--|--|--|
| ITEMIZ | ZED DISBURSEMENTS | Use sepa | (check only one) | | | |] 00 | | | | | | | | | |
| | | | Summary Page | | 21b 28a | 22 28b | X 2 | 13 18c | 26 29 | 27 30b | | | | | | |
| App. : f | rmotion conicd from outly Deposits and Otates | monto ===== | not be oclained | ad by are: | | | | | | | | | | | | |
| | mation copied from such Reports and Stater mmercial purposes, other than using the nar | | | | | | | | | | | | | | | |
| | E OF COMMITTEE (In Full) | | | | | | | | | | | | | | | |
| 1 \ | alth Industry Distributors Associ | ation Po | olitical Action | Comm | nitte | Э | | | | | | | | | | |
| | ame (Last, First, Middle Initial) | | | | | _ | | | | | | | | | | |
| A. Kaiı | Kaine for Virginia | | | | | | | Date of Disbursement | | | | | | | | |
| Mailin | g Address 1490-5A Quarterpath RD #272 | | | | 06 19 2018 | | | | | | | | | | | |
| City | [: | State | Zip Code | | | FEC Id | entific | ation N | Jumbar | | | | | | | |
| | msburg | VA | 23185 | | | | GIRIIIC | auon i | varribel | - | | | | | | |
| Purpo Cont | se of Disbursement ribution | | | 011 | 77 | C | C0049 | 95358 | | | | | | | | |
| | date Name | | | | _ | | | | : B6906 | | | | | | | |
| | ne, Tim, , , | | | Category Type | // | Amoun | t of Ea | ach Di | sburseme | ent this Pe | eriod | | | | | |
| | | ment For: 2 | nent For: 2018 | | | | | | | 2700.00 | | | | | | |
| | x Senate | Primary General | | | | 7 7 | | | | | | | | | | |
| -: | President | Other (spec | cify) ▼ | | | Me | mo Ite | em | | | | | | | | |
| State: | | | | | + | | | | | | | | | | | |
| _ | lame (Last, First, Middle Initial) | | | | | Data o | f Diehi | ursem | ant | | | | | | | |
| - vva | B. Walden for Congress | | | | | | | Date of Disbursement | | | | | | | | |
| Mailin | Mailing Address 439 New Jersey Ave SE | | | | | | 06 19 _ 2018 _ | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| City | | State | Zip Code | | | FEC Id | entifica | ation N | Number | | | | | | | |
| | Washington DC 20003 Purpose of Disbursement | | | | | | C 000000107 | | | | | | | | | |
| | Contribution 011 | | | | | | C C00333427 | | | | | | | | | |
| Candi | andidate Name | | | | | | | | : B6906 : sburseme | 30 ent this Pe | eriod | | | | | |
| | Walden, Gregory Paul, , , | | | | | | | 2011 01 | 2.50110 | | | | | | | |
| | Office Sought: House Disbursement For: 2018 | | | | | | | | | 2500.00 |) | | | | | |
| | Senate Primary 2 | | | | | | | | | | | | | | | |
| State: | OR District: 02 | Other (spec | CIIY) | | | Me | mo Ite | em | | | | | | | | |
| | lame (Last, First, Middle Initial) | | | | + | | | | | | | | | | | |
| _ | nmon Ground PAC | | | | | Date of | f Disbu | urseme | ent | | | | | | | |
| Common Ground 1710 | | | | | | | | M M / D D / Y Y Y Y | | | | | | | | |
| Mailin | g Address 1751 Potomac Greens Dr | | | | | 06 | 1 L | 20 | J L | 2018 | _ | | | | | |
| City | | State | Zip Code | | | FEC Id | entific | ation N | Jumbor | | | | | | | |
| Alexa | | VA | 22314 | | | | - | - | •umb c i | | | | | | | |
| | se of Disbursement ribution | | | 044 | \neg | C | C005 | 38835 | | | | | | | | |
| | Candidate Name | | | | | | Transaction ID : B690812 Amount of Each Disbursement this Period | | | | | | | | | |
| Cariui | date Hame | | | Category Type | // | Amoun | t of Ea | ach Di | sburseme | ent this Pe | eriod | | | | | |
| Office | Office Sought: House Disbursement For: 2018 | | | | | | | | | 2300.00 |) | | | | | |
| | Senate | Primary | | | | 7 7 | | | | | _ | | | | | |
| President | | | | | | Memo Item | | | | | | | | | | |
| State: | District: | | Not Applicable | ; | | <u> </u> | | | | | | | | | | |
| | | | | | | | - | | | 7500.00 | | | | | | |
| SUBTO | TAL of Disbursements This Page (optional) | | | | <u> </u> | | | | | 7500.00 | U | | | | | |
| TOTAL | This Period (last page this line number only) |) | | | | | | | | | | | | | | |
| | I office that page the file fluithor offly | , | | | | | 100 | | 1 1 1 | | | | | | | |

| SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS | for each | arate schedule(s) category of the Summary Page | FOR LINE NUMBER: (check only one) 21b 22 | | | | | | |
|--|---|--|---|---|--|--|--|--|--|
| Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) | | | ed by any perso | on for the purpose of soliciting contributions | | | | | |
| NAME OF COMMITTEE (In Full) Health Industry Distributors Assoc | iation Po | litical Action | Committe | e | | | | | |
| Full Name (Last, First, Middle Initial) A. Kurt Schrader for Congress Mailing Address 412 First St SE Suite 100 | Date of Disbursement 06 20 2018 | | | | | | | | |
| City | State | Zip Code | | FEC Identification Number | | | | | |
| Washington Purpose of Disbursement Contribution | DC | 20003 | 011 | C C00446906 | | | | | |
| Candidate Name Schrader, Kurt, , , Office Sought: House Disburse | ment For: 2 | 2018 | Category/ Type | Transaction ID : B690813 Amount of Each Disbursement this Period 500.00 | | | | | |
| Senate President | Primary Other (spec | ✗ General | | Memo Item | | | | | |
| State: OR District: 05 Full Name (Last, First, Middle Initial) 3. | | | | Date of Disbursement | | | | | |
| Mailing Address | | M = M / D = D / Y = Y = Y | | | | | | | |
| , | State | Zip Code | | FEC Identification Number | | | | | |
| Purpose of Disbursement Candidate Name | | | | C | | | | | |
| Office Sought: House Disburse | Category/ Type | Amount of Each Disbursement this Period | | | | | | | |
| Senate President State: District: | | Memo Item | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Date of Disbursement | | | | | |
| Mailing Address | | M M / D D / Y Y Y Y | | | | | | | |
| | State | Zip Code | | FEC Identification Number | | | | | |
| Purpose of Disbursement Candidate Name | Amount of Each Disbursement this Period | | | | | | | | |
| Office Sought: House Disburse Senate President | Туре | | | | | | | | |
| | Other (spec | → / ▼ | | Memo Item | | | | | |