

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines
Pharmaceutical Research & Manufacturers of America Better Government Committee

ADDRESS (number and street) 950 F Street, NW Suite 300 Washington DC 20004
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00021972
3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff
(d) 30-Day Post-Election Report for the: General, Runoff, Special
Election on 11 07 2006 in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Anne Holmes
Signature of Treasurer Electronically Filed by Anne Holmes Date 10 26 2006

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**

Write or Type Committee Name
Pharmaceutical Research & Manufacturers of America Better Government Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		6721.11
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	3941.59									
(c) Total Receipts (from Line 19)	5420.54	73652.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9362.13	80374.05								
7. Total Disbursements (from Line 31)	0.00	71011.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9362.13	9362.13								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Pharmaceutical Research & Manufacturers of America Better Government Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	5293.54	54853.33
(i) Itemized (use Schedule A)	127.00	2799.61
(ii) Unitemized	5420.54	57652.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	16000.00
(c) Other Political Committees (such as PACs)	5420.54	73652.94
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5420.54	73652.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5420.54	73652.94

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	71000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	11.92
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election 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))..	0.00	71011.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	0.00	71011.92

DETAILED SUMMARY PAGE
of Disbursements

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)	5420.54	73652.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5420.54	73652.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 17
	<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	

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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

A. Full Name (Last, First, Middle Initial)
Mimi Simoneaux

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

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

Name of Employer PhRMA Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3076.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: 17380990

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Daniel Durham

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

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

Name of Employer PhRMA Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1114.44

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR110033468720

Amount of Each Receipt this Period
96.00

P/R Deduction (\$96.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Hallie Maranchick

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

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

Name of Employer PhRMA Occupation Sr. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR127576008720

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Weekly)

SUBTOTAL of Receipts This Page (optional)	2696.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. Alan Goldhammer		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 950 F Street, NW Suite 300		Transaction ID: PR133808338720
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer PhRMA	Occupation Associate VP	P/R Deduction (\$60.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Tara Ryan		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 950 F Street, NW Suite 300		Transaction ID: PR133808438720
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer PhRMA	Occupation Director	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) C. Christopher Singer		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 950 F Street, NW Suite 300		Transaction ID: PR133808458720
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer PhRMA	Occupation Exec VP & COO	P/R Deduction (\$192.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00	

SUBTOTAL of Receipts This Page (optional)	292.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. Jennifer Page		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 950 F Street, NW Suite 300		Transaction ID: PR133808568720
City Washington State DC Zip Code 20004-1404	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)	
Name of Employer PhRMA Occupation Director	Aggregate Year-to-Date ▼ _____ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Chris Badgley		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 950 F Street, NW		Transaction ID: PR18053208720
City Washington State DC Zip Code 20004-1404	Amount of Each Receipt this Period _____ 35.58	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$46.00 Bi-Weekly)	
Name of Employer PhRMA Occupation VP	Aggregate Year-to-Date ▼ _____ 711.60	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Anne Berry		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 950 F Street, NW		Transaction ID: PR18053238720
City Washington State DC Zip Code 20004-1404	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)	
Name of Employer PhRMA Occupation Director	Aggregate Year-to-Date ▼ _____ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 110.58
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. Janice Faiks		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 950 F Street, NW		Transaction ID: PR18053308720
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer PHRMA	Occupation VP, Govt Affairs & Law	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 698.70	

Full Name (Last, First, Middle Initial) B. Anne Holmes		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 950 F Street, NW		Transaction ID: PR18053368720
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer PHRMA	Occupation Sr. Manager	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Merrill Jacobs		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 950 F Street, NW		Transaction ID: PR18053388720
City Washington	State DC	Zip Code 20004-1404
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer PHRMA	Occupation Regional Director	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	175.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. Kurt Malmgren Mailing Address 950 F Street, NW City State Zip Code Washington DC 20004-1404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR18053448720 Amount of Each Receipt this Period 100.00 P/R Deduction (\$100.00 Bi-Weekly)
Name of Employer PHRMA Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Kimberly Martin Mailing Address 950 F Street, NW City State Zip Code Washington DC 20004-1404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR18053458720 Amount of Each Receipt this Period 11.54 P/R Deduction (\$11.54 Bi-Weekly)
Name of Employer PHRMA Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.80	

Full Name (Last, First, Middle Initial) C. Hugh Metheny Mailing Address 950 F Street, NW City State Zip Code Washington DC 20004-1404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR18053468720 Amount of Each Receipt this Period 192.00 P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer PHRMA Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1669.00	

SUBTOTAL of Receipts This Page (optional)	303.54
TOTAL This Period (last page this line number only)	

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

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

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NAME OF COMMITTEE (In Full)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. John O'Connor		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 950 F Street, NW		Transaction ID: PR18053508720	
City Washington	State DC	Zip Code 20004-1404	Amount of Each Receipt this Period 23.07
FEC ID number of contributing federal political committee. C			
Name of Employer PHRMA	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.40		
		P/R Deduction (\$23.07 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Richard Smith		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 950 F Street, NW		Transaction ID: PR18053598720	
City Washington	State DC	Zip Code 20004-1404	Amount of Each Receipt this Period 96.00
FEC ID number of contributing federal political committee. C			
Name of Employer PHRMA	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1648.00		
		P/R Deduction (\$80.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Nico Stemple		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 950 F Street, NW		Transaction ID: PR18053618720	
City Washington	State DC	Zip Code 20004-1404	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer PHRMA	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		
		P/R Deduction (\$20.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	139.07
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. Jeffrey Trehwitt		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 950 F Street, NW		Transaction ID: PR18053638720	
City Washington	State DC	Amount of Each Receipt this Period _____ 12.50	
Zip Code 20004-1404		P/R Deduction (\$12.50 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____			
Name of Employer PHRMA	Occupation Asst. VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 250.00		

Full Name (Last, First, Middle Initial) B. Derrick White		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 950 F Street, NW		Transaction ID: PR18053678720	
City Washington	State DC	Amount of Each Receipt this Period _____ 160.00	
Zip Code 20004-1404		P/R Deduction (\$160.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____			
Name of Employer PHRMA	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3200.00		

Full Name (Last, First, Middle Initial) C. Edward Belkin		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 950 F Street, N.W.		Transaction ID: PR26731028720	
City Washington	State DC	Amount of Each Receipt this Period _____ 38.46	
Zip Code 20004-1404		P/R Deduction (\$38.46 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____			
Name of Employer PhRMA	Occupation Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 769.20		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 210.96
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 17
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pharmaceutical Research & Manufacturers of America Better Government Committee

A. Full Name (Last, First, Middle Initial) Bryant Hall Mailing Address 950 F Street, N.W. City Washington State DC Zip Code 20004-1404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR37748058720 Amount of Each Receipt this Period 200.00 P/R Deduction (\$100.00 Bi-Weekly)
Name of Employer PhRMA Occupation Sr. Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3900.00		

B. Full Name (Last, First, Middle Initial) Robert Filippone Mailing Address 950 F Street, NW City Washington State DC Zip Code 20004-1404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR53305118720 Amount of Each Receipt this Period 78.85 P/R Deduction (\$78.85 Bi-Weekly)
Name of Employer PhRMA Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1577.00		

C. Full Name (Last, First, Middle Initial) Patrick Stone Mailing Address 950 F Street, NW City Washington State DC Zip Code 20004-1404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR53305128720 Amount of Each Receipt this Period 11.54 P/R Deduction (\$11.54 Bi-Weekly)
Name of Employer PhRMA Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.80		

SUBTOTAL of Receipts This Page (optional)	290.39
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

A. Full Name (Last, First, Middle Initial)
Steven Tilton

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

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

Name of Employer PhRMA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 / /

Transaction ID: PR53305158720

Amount of Each Receipt this Period
 150.00

P/R Deduction (\$150.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Byron Patterson

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

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

Name of Employer PhRMA Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 / /

Transaction ID: PR66186048720

Amount of Each Receipt this Period
 25.00

P/R Deduction (\$25.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Heather Keiser Strawn

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1404

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

Name of Employer PhRMA Occupation Sr. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
 / /

Transaction ID: PR73780498720

Amount of Each Receipt this Period
 75.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 17
	<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)
Pharmaceutical Research & Manufacturers of America Better Government Committee

Full Name (Last, First, Middle Initial) A. Brian Nagle		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR74303008720
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 100.00
City Washington State DC Zip Code 20004-1404	FEC ID number of contributing federal political committee. C	
Name of Employer PhRMA Occupation Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2000.00		P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Lori Reilly		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR91737498720
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 75.00
City Washington State DC Zip Code 20004-1404	FEC ID number of contributing federal political committee. C	
Name of Employer PhRMA Occupation Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 1500.00		P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Mimi Simoneaux		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR91737518720
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 96.00
City Washington State DC Zip Code 20004-1404	FEC ID number of contributing federal political committee. C	
Name of Employer PhRMA Occupation Vice President	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 3172.00		P/R Deduction (\$96.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	271.00
TOTAL This Period (last page this line number only) ▶	5293.54