



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Pharmaceutical Research & Manufacturers of America Better Government 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="2012"/>	<input type="text" value="66602.69"/>	<input type="text" value="66602.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="66602.69"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="32220.21"/>	<input type="text" value="32220.21"/>
(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="98822.90"/>	<input type="text" value="98822.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17584.48"/>	<input type="text" value="17584.48"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="81238.42"/>	<input type="text" value="81238.42"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

Write or Type Committee Name

**Pharmaceutical Research & Manufacturers of America Better Government 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).....	20241.57	20241.57
(ii) Unitemized .....	1978.64	1978.64
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22220.21	22220.21
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	32220.21	32220.21
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))..... ▶	32220.21	32220.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	32220.21	32220.21

**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 .....	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.....	17500.00	17500.00
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 .....	84.48	84.48
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)) ..	17584.48	17584.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17584.48	17584.48

**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) .....	32220.21	32220.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32220.21	32220.21
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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Full Name (Last, First, Middle Initial)  
**A. Tara Ryan**

Mailing Address 950 F Street, NW  
 Suite 300

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 ▼  
 259.98

Date of Receipt  
 03 / 31 / 2012  
**Transaction ID : PR1338084323888**

Amount of Each Receipt this Period  
 259.98

P/R Deduction (\$43.33 Semi-Monthly)

Full Name (Last, First, Middle Initial)  
**B. Jennifer Page Wall**

Mailing Address 950 F Street, NW  
 Suite 300

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 ▼  
 325.02

Date of Receipt  
 03 / 31 / 2012  
**Transaction ID : PR1338085623888**

Amount of Each Receipt this Period  
 325.02

P/R Deduction (\$54.17 Semi-Monthly)

Full Name (Last, First, Middle Initial)  
**C. Clement Cypra**

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1438

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

Name of Employer PhRMA Occupation Deputy VP

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 569.83

Date of Receipt  
 03 / 31 / 2012  
**Transaction ID : PR1342353723888**

Amount of Each Receipt this Period  
 569.83

P/R Deduction (\$104.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1154.83

**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 23
	<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) <b>A. Matthew Sulkala</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR138714243888</b>
Mailing Address 950 F Street, NW Suite 300		Amount of Each Receipt this Period 1249.50
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1249.50	P/R Deduction (\$208.25 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Valerie Jewett</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1416900923888</b>
Mailing Address 950 F Street, NW Suite 300		Amount of Each Receipt this Period 423.48
City Washington	State DC	Zip Code 20004-1438
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 ▼ 423.48	P/R Deduction (\$70.58 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Jeff Woodhouse</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1521550923888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 300.00
City Washington	State DC	Zip Code 20004-1438
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 ▼ 300.00	P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1972.98
<b>TOTAL</b> 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 23
<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**

**A. Lea Fisher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation Director, Federal Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1698847623888**  
Amount of Each Receipt this Period 450.00  
P/R Deduction (\$75.00 Semi-Monthly)

**B. Jeffrey A. Bond**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation SVP, State Govt Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1759644923888**  
Amount of Each Receipt this Period 450.00  
P/R Deduction (\$75.00 Semi-Monthly)

**C. Andrew Corsig**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PHRMA Occupation Deputy VP, State Govt Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR180532523888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 1200.00  
**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 23
<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) <b>A. Anne Holmes</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address 950 F Street, NW		<b>Transaction ID : PR180533623888</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer PHRMA	Occupation Sr. Manager	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Merrill Jacobs</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address 950 F Street, NW		<b>Transaction ID : PR180533823888</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 649.98	
Name of Employer PHRMA	Occupation Regional Director	P/R Deduction (\$108.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 649.98	

Full Name (Last, First, Middle Initial) <b>C. Richard Smith</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address 950 F Street, NW		<b>Transaction ID : PR180535923888</b>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 624.00	
Name of Employer PHRMA	Occupation Director	P/R Deduction (\$104.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1573.98
<b>TOTAL</b> 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 23
	<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. John J. Castellani**  
Full Name (Last, First, Middle Initial)

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1438

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

Name of Employer PhRMA Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1249.50

Date of Receipt  
03 / 31 / 2012  
Transaction ID : PR1828048023888

Amount of Each Receipt this Period  
1249.50

P/R Deduction (\$208.25 Semi-Monthly)

**B. Chip Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1438

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

Name of Employer PhRMA Occupation EVP, Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1249.50

Date of Receipt  
03 / 31 / 2012  
Transaction ID : PR1849830223888

Amount of Each Receipt this Period  
1249.50

P/R Deduction (\$208.25 Semi-Monthly)

**C. Jenny Wolff Cline**  
Full Name (Last, First, Middle Initial)

Mailing Address 950 F Street, NW

City Washington State DC Zip Code 20004-1438

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 ▼  
300.00

Date of Receipt  
03 / 31 / 2012  
Transaction ID : PR1856317223888

Amount of Each Receipt this Period  
300.00

P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2799.00

**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 11 OF 23
	<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) <b>A. Brian Smith</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address 950 F Street, NW			<b>Transaction ID : PR1856318123888</b>
City Washington	State DC	Zip Code 20004-1438	Amount of Each Receipt this Period 624.00
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA		P/R Deduction (\$104.00 Semi-Monthly)
	Occupation Deputy VP	Aggregate Year-to-Date ▼ 624.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Naomi Morales</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address 950 F Street, NW			<b>Transaction ID : PR1856318423888</b>
City Washington	State DC	Zip Code 20004-1438	Amount of Each Receipt this Period 1200.00
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA		P/R Deduction (\$200.00 Semi-Monthly)
	Occupation VP, HR & Admin	Aggregate Year-to-Date ▼ 1200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Michael Anway</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address 950 F Street, NW			<b>Transaction ID : PR1872436523888</b>
City Washington	State DC	Zip Code 20004-1438	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA		P/R Deduction (\$50.00 Semi-Monthly)
	Occupation Director	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2124.00
<b>TOTAL</b> 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 12 OF 23
<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) <b>A. Josephine Martin</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1872660823888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 1350.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA	Occupation EVP, Public Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	P/R Deduction (\$225.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Kimberly Love</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1884612423888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 624.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	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 ▼ 624.00	P/R Deduction (\$104.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Jennifer Romans</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1902212723888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 624.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	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 ▼ 624.00	P/R Deduction (\$104.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2598.00
<b>TOTAL</b> 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 13 OF 23
	<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) <b>A. Cara Moon</b>		Date of Receipt
Mailing Address 950 F Street, NW Suite 300		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20004-1440
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : PR1923874723888</b>
Name of Employer PhRMA	Occupation Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
	<input type="text" value="300.00"/>	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Matthew Bennett</b>		Date of Receipt
Mailing Address 950 F Street, NW Suite 300		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20004-1440
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : PR1932280123888</b>
Name of Employer PhRMA	Occupation Sr. VP, Communications	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1249.50"/>
	<input type="text" value="1249.50"/>	P/R Deduction (\$208.25 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Scott LaGanga</b>		Date of Receipt
Mailing Address 950 F Street, NW		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : PR1942076623888</b>
Name of Employer PhRMA	Occupation Deputy VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
	<input type="text" value="300.00"/>	P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1849.50"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 14 OF 23
	<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. Jay Taylor**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
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 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1952911323888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**B. Lucia Cretella Lynch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation Deputy VP  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1965270623888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**C. Jill Kronisch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation Sr. Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1965270723888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 900.00  
**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 15 OF 23
	<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. Christian Clymer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation Deputy VP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1965270823888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**B. Karl Uhlendorf**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation VP-Communications  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1966405923888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**C. Andrea Jean Douglas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street, NW  
City Washington State DC Zip Code 20004-1438  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PhRMA Occupation Sr. Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1976885223888**  
Amount of Each Receipt this Period 300.00  
P/R Deduction (\$50.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 16 OF 23
<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) <b>A. Elizabeth A. Lane</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1978739423888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 300.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA	Occupation HR Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>B. Colleen Maloney</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1980251523888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA	Occupation Director, Federal Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. James 'Mit' Spears</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2012 <b>Transaction ID : PR1983731823888</b>
Mailing Address 950 F Street, NW		Amount of Each Receipt this Period 624.78
City Washington	State DC	Zip Code 20004-1438
FEC ID number of contributing federal political committee. C	Name of Employer PhRMA	Occupation General Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.78	P/R Deduction (\$208.25 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1174.78
<b>TOTAL</b> 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 17 OF 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Shannon Graham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 950 F Street, NW  
 City Washington State DC Zip Code 20004-1438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PhRMA Occupation Deputy VP-Federal Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR1985816123888**  
 Amount of Each Receipt this Period 208.00  
 P/R Deduction (\$104.00 Semi-Monthly)

**B. Robert Filippone**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 512.52

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR533051123888**  
 Amount of Each Receipt this Period 512.52  
 P/R Deduction (\$85.42 Semi-Monthly)

**C. Brian Nagle**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 649.98

Date of Receipt 03 / 31 / 2012  
**Transaction ID : PR743030023888**  
 Amount of Each Receipt this Period 649.98  
 P/R Deduction (\$108.33 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 1370.50  
**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 18 OF 23  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Lori Reilly**

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 ▼ **624.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2012**

**Transaction ID : PR917374923888**

Amount of Each Receipt this Period  
**624.00**

P/R Deduction (\$104.00 Semi-Monthly)

**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  
 M M / D D / Y Y Y Y Y Y

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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>624.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>20241.57</b>

**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 19 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Merck Employees PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 Pennsylvania Avenue, NW  
 North Building-Suite 1200  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00097485  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 02 / 2012  
**Transaction ID : 44360643**  
 Amount of Each Receipt this Period  
 5000.00  
 Federal PAC Contribution

**B. Abbott Laboratories Employee PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Abbott Park Road  
 City Abbott Park State IL Zip Code 60064-6028  
 FEC ID number of contributing federal political committee. **C** C00040279  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2012  
**Transaction ID : 44969854**  
 Amount of Each Receipt this Period  
 5000.00  
 Contribution from Federal PAC

**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  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

**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)

**Pharmaceutical Research & Manufacturers of America Better Government Committee**

Full Name (Last, First, Middle Initial)

**A. McConnell Senate Committee '14**

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement

011

Candidate Name

**Sen. Mitch McConnell**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: KY District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2012

**Transaction ID : 44614558**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Scott Brown For US Senate Committee Inc**

Mailing Address 337 Summer Street

City Boston State MA Zip Code 02210

Purpose of Disbursement

011

Candidate Name

**Sen. Scott Brown**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2012

**Transaction ID : 44614561**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Bob Casey For Senate Inc**

Mailing Address 303 Massachusetts Ave., NE  
1st Floor

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

**Sen. Robert Casey Jr.**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2012

**Transaction ID : 44614615**

Amount of Each Disbursement this Period

1000.00

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

4500.00

**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)

**Pharmaceutical Research & Manufacturers of America Better Government Committee**

Full Name (Last, First, Middle Initial)

**A. Carper For Senate**

Mailing Address 19 East Commons Blvd Second Floor

City New Castle State DE Zip Code 19720

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Sen. Thomas R. Carper**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	2

**Transaction ID : 44614660**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Manchin For West Virginia**

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Sen. Joe Manchin III**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WV District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	2

**Transaction ID : 44614662**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Bennet For Colorado**

Mailing Address 2300 15th Street Suite 425

City Denver State CO Zip Code 80202

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Mr. Michael Bennet**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	2

**Transaction ID : 44614665**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)

**Pharmaceutical Research & Manufacturers of America Better Government Committee**

Full Name (Last, First, Middle Initial)

**A. Upton For All Of Us**

Mailing Address P.O. Box 490

City State Zip Code  
St. Joseph MI 49085

Purpose of Disbursement

011

Candidate Name

**Rep. Frederick Stephen Upton**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	2

**Transaction ID : 44614670**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Rogers For Congress**

Mailing Address PO Box 581  
Post Office Box 581

City State Zip Code  
Brighton MI 48116

Purpose of Disbursement

011

Candidate Name

**Rep. Michael J. Rogers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	2

**Transaction ID : 44614672**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Majority Committee**

Mailing Address 213 Ashby Street

City State Zip Code  
Alexandria VA 22305

Purpose of Disbursement  
Federal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	2

**Transaction ID : 44614674**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Federal Contribution

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

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

6	0	0	0	.	0	0
---	---	---	---	---	---	---

2	5	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)

**Pharmaceutical Research & Manufacturers of America Better Government Committee**

Full Name (Last, First, Middle Initial)

### A. Anna Eshoo For Congress

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

011

Candidate Name

**Rep. Anna G. Eshoo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 14

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2012

**Transaction ID : 44614676**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

### B. Committee To Re-Elect Linda Sanchez

Mailing Address P.O. Box 6162

City Lakewood State CA Zip Code 90714

Purpose of Disbursement

011

Candidate Name

**Rep. Linda Sanchez**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2012

**Transaction ID : 44614677**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

### C. Roskam For Congress Committee

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

011

Candidate Name

**Rep. Peter Roskam**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2012

**Transaction ID : 44614724**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

17500.00