

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Professional Compounding Centers of America PAC

ADDRESS (number and street) 9901 South Wilcrest Dr

Check if different than previously reported. (ACC) Houston TX 77099

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00558452

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |   |                                       |  |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6)            | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7)            | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2022 through M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Rogers, Emory, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Rogers, Emory, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 05 / 18 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Professional Compounding Centers of America PAC**

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="2022"/>	<input type="text" value="58151.09"/>	<input type="text" value="58151.09"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51766.27"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="23897.00"/>	<input type="text" value="54541.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="75663.27"/>	<input type="text" value="112692.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12250.00"/>	<input type="text" value="49278.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="63413.27"/>	<input type="text" value="63413.27"/>
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

Professional Compounding Centers of America PAC

Report Covering the Period: From: 04 / 01 / 2022 To: 04 / 30 / 2022

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).....	23232.00	50712.00
(ii) Unitemized .....	665.00	3829.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	23897.00	54541.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	23897.00	54541.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	23897.00	54541.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	23897.00	54541.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	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.....	12250.00	49163.80
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	115.02
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	12250.00	49278.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12250.00	49278.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	23897.00	54541.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23897.00	54541.00
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: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. Matthys, Arthur, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9901 S. Wilcrest  
 City Houston State TX Zip Code 77099-5132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 12 / 2022  
**Transaction ID : 16591647**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Fura, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1648 W Erie St  
 City Chicago State IL Zip Code 60622-6014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jason Fura PC Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 12 / 2022  
**Transaction ID : 16591654**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Dowler, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 Vintage Drive  
 City Pawleys Island State SC Zip Code 29585-5370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 12 / 2022  
**Transaction ID : 16591656**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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 7 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. Armstrong, Chick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2621 Blackbeard Place  
 City Fernandina Beach State FL Zip Code 32034-2213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 25 / 2022  
**Transaction ID : 16666573**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Armstrong, Rebecca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2621 Blackbeard Place  
 City Fernandina Beach State FL Zip Code 32034-2213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Spouse  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 25 / 2022  
**Transaction ID : 16666577**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. BIGGS, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19814 ICELAND COURT  
 City SPRING State TX Zip Code 77379-1401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Pharmacy Software  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676651**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10100.00
<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 8 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. SPEAIRS, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7054 SERRANO DRIVE  
 City FORT WORTH State TX Zip Code 76126-2320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Director of Communications and Engag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676652**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. MARTIN, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4538 NORTHRIDGE CIRCLE  
 City CRESTWOOD State KY Zip Code 40014-8646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Services Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676653**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. CLARK, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2010 THORNDALE ROAD  
 City INDIAN TRAIL State NC Zip Code 28079-5376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Compounding Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676654**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	307.00
<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 9 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. HARBIN, LIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4409 OLD BROOK RUN  
 City MOUNTAIN BRK State AL Zip Code 35243-4046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) VP PA, Comm, Edu, HR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676657**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. SHANK, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1507 N JEFFERSON STREET  
 City ARLINGTON State VA Zip Code 22205-2839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Director of Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676658**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. LEAKE, W M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 419 O'HARA DRIVE  
 City DANVILLE State KY Zip Code 40422-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Services Pharmacist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 29 / 2022  
**Transaction ID : 16676659**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.00
<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:	PAGE 10 OF 14
	(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)  
**Professional Compounding Centers of America PAC**

**A. DAY, ARJUN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12722 TRAIL HOLLOW  
 City HOUSTON State TX Zip Code 77024-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Clinical Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt **04 / 29 / 2022**  
**Transaction ID : 16676660**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. HARBIN, LIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4409 OLD BROOK RUN  
 City MOUNTAIN BRK State AL Zip Code 35243-4046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) VP PA, Comm, Edu, HR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 30 / 2022**  
**Transaction ID : PR850137728356**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 P/R Deduction (\$40.00 Bi-Weekly)

**C. BIGGS, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19814 ICELAND COURT  
 City SPRING State TX Zip Code 77379-1401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Pharmacy Software  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **04 / 30 / 2022**  
**Transaction ID : PR909920928356**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 P/R Deduction (\$100.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	472.00
<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 11 OF 14
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. CLARK, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2010 THORNDALE ROAD  
 City INDIAN TRAIL State NC Zip Code 28079-5376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Compounding Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 30 / 2022**  
**Transaction ID : PR909921128356**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 P/R Deduction (\$40.00 Bi-Weekly)

**B. MARTIN, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4538 NORTHRIDGE CIRCLE  
 City CRESTWOOD State KY Zip Code 40014-8646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Services Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt **04 / 30 / 2022**  
**Transaction ID : PR909921928356**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 P/R Deduction (\$192.00 Bi-Weekly)

**C. SHANK, AMY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1507 N JEFFERSON STREET  
 City ARLINGTON State VA Zip Code 22205-2839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Director of Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **04 / 30 / 2022**  
**Transaction ID : PR909922228356**  
 Amount of Each Receipt this Period 70.00  
 Memo Item  
 P/R Deduction (\$35.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	534.00
<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 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. SPEAIRS, KIMBERLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7054 SERRANO DRIVE  
 City FORT WORTH State TX Zip Code 76126-2320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Director of Communications and Engag  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 04 / 30 / 2022  
**Transaction ID : PR90992328356**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 P/R Deduction (\$75.00 Bi-Weekly)

**B. LEAKE, W M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 419 O'HARA DRIVE  
 City DANVILLE State KY Zip Code 40422-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Services Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 04 / 30 / 2022  
**Transaction ID : PR973115228356**  
 Amount of Each Receipt this Period 140.00  
 Memo Item  
 P/R Deduction (\$70.00 Bi-Weekly)

**C. DAY, ARJUN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12722 TRAIL HOLLOW  
 City HOUSTON State TX Zip Code 77024-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Clinical Services  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 04 / 30 / 2022  
**Transaction ID : PR974808328356**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 P/R Deduction (\$192.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	674.00
<b>TOTAL</b> This Period (last page this line number only).....	23232.00

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

**A. Morgan McGarvey For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address 2250 Winston Avenue

City Louisville State KY Zip Code 40205

Purpose of Disbursement

Category/  
Type

Candidate Name  
**McGarvey, Morgan, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: KY District: 03

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 16592742**

Amount of Each Disbursement this Period

Memo Item

**B. TULIP PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 403 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2022

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 16592744**

Amount of Each Disbursement this Period

Memo Item

**C. Darren Soto For Congress**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 421349

City Kissimmee State FL Zip Code 34742

Purpose of Disbursement

Category/  
Type

Candidate Name  
**Soto, Darren, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District: 09

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 16669039**

Amount of Each Disbursement this Period

Memo Item

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

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Professional Compounding Centers of America PAC**

Full Name (Last, First, Middle Initial)

**A. Cathy McMorris Rodgers For Congress**

Mailing Address Box 137

City Spokane State WA Zip Code 99210

Purpose of Disbursement

Category/  
Type

Candidate Name  
**McMorris Rodgers, Cathy, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼  
State: WA District: 05

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 16669045**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Diana Degette For Congress**

Mailing Address P.O. Box 61337

City Denver State CO Zip Code 80206

Purpose of Disbursement

Category/  
Type

Candidate Name  
**DeGette, Diana, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼  
State: CO District: 01

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 16669046**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elizabeth Pannill Fletcher For Congress**

Mailing Address 3262 Westheimer Rd #636

City Houston State TX Zip Code 77098

Purpose of Disbursement

Category/  
Type

Candidate Name  
**Fletcher, Elizabeth, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼  
State: TX District: 07

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : 16669047**

Amount of Each Disbursement this Period

Memo Item

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

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