FEC FORM 3X	AN	PORT OF D DISBUE	RSEMEN	ITS		Office Use Only		
1. NAME OF COMMITTEE (in fu		EC MAILING LAB	EL Exampl over the	e:If typing, type lines				
	are Products Asso	ociation PAC (CHP	A/PAC)					
ADDRESS (number and	street)	19th Street, NW						
Check if differ than previousl reported. (ACC	ent L⊥ V .Wa	te 700 				20006	-	
2. FEC IDENTIFICAT	ION NUMBER	▼	CITY 🛋		STATE	ZIPCO	DE 👗	
C00040584		3	IS THIS REPORT	(N) C		AMENDED (A)		
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Only	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election	(d) 30-Day Post -Electic Report for the	ection on con n X Ge	May 20 (Jun 20 (l Jul 20 (N mary (12P) nvention (12C) neral (30G)	M6) So M7) O Genera	ug 20 (M8) ep 20 (M9) pct 20 (M10) al (12G) d (12G) f (30R) in the State c	Special (30S)	
5. Covering Period 10 16 2008 through 11 24 2008 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 Andrew Fish Signature of Treasurer Electronically Filed by Andrew Fish Date 01 30 2009 NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.								
Office Use Only						FEC FOR (Rev. 12/20	M 3X	

Image# 29990886687

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

V	Write or Type Committee Name Consumer Healthcare Products Association F	PAC (CHPA/PAC)	
F	Report Covering the Period: From: 10^{10}	D D Y Y W Y 16 2008	To: 11 D D Y Y Y Y 2 0 0 8
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Ž008 ^Y ^Y		17909.19
	(b) Cash on Hand at Begining of Reporting Period	10100.58	
	(c) Total Receipts (from Line 19)	750.00	19850.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10850.58	37759.19
7.	Total Disbursements (from Line 31)	7020.86	33929.47
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	3829.72	3829.72
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	

X 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

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nage# 29990886688	DETAILED SUMMARY PAGE OF RECEIPTS	
FEC Form 3X (Rev. 06/2004)	OF RECEIPTS	Page 3
Write or Type Committee Name Consumer Healthcare Products Ass	sociation PAC (CHPA/PAC)	
Report Covering the Period: From:		
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)	750.00	11350.00
	0.00	0500.00
(ii) Unitemized		2500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	▶ 750.00	13850.00
		0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees(such as PACs)	0.00	6000.00
(d) Total Contributions (add Lines		
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	▶ 750.00	19850.00
12. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
13. All Loans Received		
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	0.00	0.00
(Dividends, Interest, etc.)		0.00
18. Transfers from Non-Federal and Levin Fun	nds	
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).		0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	. 750.00	19850.00
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)	750.00	19850.00
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DETAILED SUMMARY PAGE

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	20.86	179.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	20.86	179.47
 Transfers to Affiliated/Other Party Committees 	0.00	0.00
3. Contributions to Federal Candidates/Committees	7000.00	33750.00
and Other Political Committees 4. Independent Expenditure	0.00	0.00
(use Schedule E) 5. Coordinated Expenditures Made by Party Committees (2 LLS C. 441a(d))		
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
 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
9. Other Disbursements	0.00	0.00
 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	0.00	0.00
With Federal Funds (c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
 Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) 	7020.86	33929.47
 Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 		
from Line 31)	7020.86	33929.47

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DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	750.00	19850.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	750.00	19850.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20.86	179.47
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	20.86	179.47

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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 8 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Consumer Healthcare Products Associ	ation PAC	(CHPA/PAC)	
Α.	Full Name (Last, First, Middle Initial) Patrick Lonergan			Date of Receipt
	Mailing Address 165 Northfield Avenue			M M / D D / Y
	City	State	Zip Code	Transaction ID: SA11AI.5669
	Edison	NJ	08837	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer NUMARK Labs	Occupation Partner,	ⁿ President	PAC Contribution
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	►	750.00
TOTAL This Period (last page this line number only)	►	750.00

TEMIZED DISBUBSEMENTS	SCHEDULE B (FEC Form 3X)			FOF	R LINE	NUMBE	R:			PA	GE	7/8			
any information copied from such Reports and Statements may note be old or used by apresort for the purposes of soliciting contributions from such committee to solicit contributions from such contributions from such contributions from such commits from such c	ITEMIZED DISBURSEMENTS				(check only one)										
Avy Information copied from such Reports and Statematis may not be sold or used by any porson for the purposes of solicit contributions from such committee AVME OF COMMITTEE (in Full) Consumer (Healthcare Products Association PAC (CHPA/PAC) NAME OF COMMITTEE (in Full) Consumer (Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) HOOSIERS SUPPORTING BUYER FOR CONGRESS Mailing Address 200 North Main St. P.O. Box 712 City Mailing Address Purpose of Disbursement Candidate Name Office Sought: X House Disbursement Candidate Name City Mailing Address PO BOX 3176 City City Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Candidate Name Disbur		Detailed Summary Page	∣⊦				H		\vdash	1	Н				
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Monticello IN 47960 Purpose of Disbursement							M		2 ^D	/ Y	ž	٥ ð ð	} ^Y		
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Candidate Name Category/ Type Office Sought: X House President Disbursement For: 2008 State: NJ District: 06 Transaction ID: SB23.5677 Full Name (Last, First, Middle Initial) UDALL FOR COLORADO Transaction ID: SB23.5677 Mailing Address PO BOX 40158 Momentary X are of Disbursement City State Zip Code Amount of Each Disbursement this Period DENVER Code 80204 Amount of Each Disbursement this Period Category/ Type Category/ Type Type 2000.00 Office Sought: House Disbursement For: 2008 Category/ Type Other (specify) Senate 5000.00 Subtrottal of Disbursements This Page (optional) 5000.00 5000.00						Amou	int of	f Each	h Di	sburse	0	-			
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City State Zip Code DENVER CO 80204 Purpose of Disbursement 2000.00 Candidate Name Category/ Type Office Sought: House President Disbursement For: 2008 President Other (specify) State: CO Disbursements This Page (optional)						Date	of Di	sburs	seme	ent			Y		
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							-	-	•		50	00.00	1		

FEC Schedule B (Form 3X) (Revised 02/2003)

	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		any person for th	a) 22 X 23 24 25 26 28a 28b 28c 29 30b 1e purpose of soliciting contributions
	or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Consumer Healthcare Products Association		mmittee to solicit o	contributions from such committee
Α.	Full Name (Last, First, Middle Initial) WICKER FOR SENATE Mailing Address PO BOX 64		D	ransaction ID: SB23.5675 Date of Disbursement 10^{M} / 21^{P} / 2008^{Y}
	JACKSON N Purpose of Disbursement	State Zip Code MS 39205		mount of Each Disbursement this Period 2000.00
	<u>A</u>		Category/ Type	

	SUBTOTAL of Disbursements This Page (optional)	•	2000.00
	TOTAL This Period (last page this line number only)	►	7000.00
Ì	FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)