

**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
 Consumer Healthcare Products Association

ADDRESS (number and street) **1150 Connecticut Avenue, N.W.**
12th Floor
 Check if different than previously reported. (ACC) **Washington DC 20036**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00040584

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
April 15 Quarterly Report(Q1)	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
July 15 Quarterly Report(Q2)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)	
<input checked="" type="checkbox"/> October 15 Quarterly Report(Q3)	(c) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	Runoff (12R)	
January 31 Quarterly Report(YE)	Election on	Convention (12C)	Special (12S)		in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election on				in the State of

5. Covering Period 07 01 2002 through 09 30 2002

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 Mr. Kevin Kraushaar

Signature of Treasurer Electronically Filed by Mr. Kevin Kraushaar Date 10 15 2002

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 FORM 3X
(Revised 1/2001)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
Consumer Healthcare Products Association

Report Covering the Period: From: ^h07 ^d01 ^y2002 To: ^h09 ^d30 ^y2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^y 2002		7218.05
(b) Cash on Hand at Beginning of Reporting Period	12598.52	
(c) Total Receipts (from Line 19)	2000.00	20425.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14598.52	27643.05
7. Total Disbursements (from Line 30)	3761.71	16806.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10836.81	10836.81
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**

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Write or Type Committee Name

Consumer Healthcare Products Association

Report Covering the Period: From: ^h07 ^d01 ^y2002 To: ^h09 ^d30 ^y2002

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)	2000.00	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	2000.00	16425.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	4000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	2000.00	20425.00
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 36, page 4)	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 Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	2000.00	20425.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	2000.00	20425.00

DETAILED SUMMARY PAGE

of Disbursements

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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.....	11.71	56.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11.71	56.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3750.00	16750.00
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	0.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	3761.71	16806.24
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	3761.71	16806.24
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	2000.00	20425.00
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	2000.00	20425.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	11.71	56.24
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	11.71	56.24

**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 5 / 8			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	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)
Consumer Healthcare Products Association

Full Name (Last, First, Middle Initial)
A. Mr. Roger Berlin

Mailing Address
5 Giralda Farms

City State Zip Code
Madison NJ 07940

Date of Receipt
MM / DD / YYYY
07 / 16 / 2002

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
Wyeth President, Global Scientific Affairs

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.4518

Full Name (Last, First, Middle Initial)
B. Mr. Joel Brandt

Mailing Address
5 Giralda Farms

City State Zip Code
Madison NJ 07940

Date of Receipt
MM / DD / YYYY
07 / 02 / 2002

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
Wyeth Assistant General Counsel

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.4542

Full Name (Last, First, Middle Initial)
C. Mr Douglas Rogers

Mailing Address
5 Giralda Farms

City State Zip Code
Madison NJ 07940

Date of Receipt
MM / DD / YYYY
07 / 10 / 2002

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Contribution
Wyeth President

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.4520

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association

A. Full Name (Last, First, Middle Initial)
Linda Snydem

Mailing Address
12314 Riding Fields Road

City State Zip Code
Rockville MD 20850

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2002

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
1000.00

Name of Employer CHPA	Occupation President	Contribution
--------------------------	-------------------------	--------------

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 1000.00

Transaction ID: SA11A1.4526

B. Full Name (Last, First, Middle Initial)
Mr. Uf Winberg

Mailing Address
5 Giralda Farms

City State Zip Code
Madison NJ 07940

Date of Receipt
M M / D D / Y Y Y Y
07 / 01 / 2002

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
250.00

Name of Employer Wyeth	Occupation	Contribution
---------------------------	------------	--------------

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.4521

C.

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	2000.00

**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)

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<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

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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association

Full Name (Last, First, Middle Initial) A. ROY BLUNT		Date of Disbursement 09 / 11 / 2002	
Mailing Address PO BOX 278 City STRAFFORD State MO Zip Code 65757		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.4534	
State: MO District: 07			

Full Name (Last, First, Middle Initial) B. CONGRESSMAN BART GORDON COMMITTEE		Date of Disbursement 07 / 29 / 2002	
Mailing Address P O BOX 2008 City MURFREESBORO State TN Zip Code 37133		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.4531	
State: TN District: 06			

Full Name (Last, First, Middle Initial) C. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE		Date of Disbursement 09 / 18 / 2002	
Mailing Address 8885 WILSHIRE BLVD #220 City BEVERLY HILLS State CA Zip Code 90211		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Transaction ID: SB23.4538	
State: CA District: 30			

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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)

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<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

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NAME OF COMMITTEE (In Full)
Consumer Healthcare Products Association

Full Name (Last, First, Middle Initial) A. FRIENDS OF CONNIE MORELLA FOR CONGRESS		Date of Disbursement 09 / 05 / 2002
Mailing Address 7101 Wisconsin Avenue # 102 7101 Wisconsin Avenue # 102		Amount of Each Disbursement this Period 250.00
City State Zip Code Bethesda MD 20814		
Purpose of Disbursement Contribution		Transaction ID: SB23.4532
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: MD District: 06		

Full Name (Last, First, Middle Initial) B. GENE GREEN CONGRESSIONAL CAMPAIGN		Date of Disbursement 09 / 18 / 2002
Mailing Address PO BOX 18128		Amount of Each Disbursement this Period 500.00
City State Zip Code HOUSTON TX 77222		
Purpose of Disbursement Contribution		Transaction ID: SB23.4536
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: TX District: 29		

Full Name (Last, First, Middle Initial) C. TEXANS FOR HENRY BONILLA		Date of Disbursement 09 / 18 / 2002
Mailing Address PO BOX 17292		Amount of Each Disbursement this Period 500.00
City State Zip Code SAN ANTONIO TX 78217		
Purpose of Disbursement Contribution		Transaction ID: SB23.4537
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State: TX District: 23		

SUBTOTAL of Disbursements This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	3750.00