Image# 13941763896 PAGE 1 / 16

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	Tourist Trian	All Additionized				Office Use Only
NAME OF TO COMMITTEE (in full)	YPE OR PRINT <b>1</b>		mple: If typin r the lines.	g, type	12FE4M5	
Consumer Healthcare P	roducts Ass	ociation PAC	(CHPA/F	PAC)		
_ 						
ADDRESS (number and street)	900 19th Street, I	<b>\W</b>		1 1 1 1		
<b>▼</b>	Suite 700					
Check if different than previously reported. (ACC)	Washington				DC	20006
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦		5	STATE 🛦	ZIP CODE ▲
C C00040584		3. IS THIS REPORT		IEW N) <b>OR</b>	× AN	MENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Buo on.	Mar 20 (M3)		un 20 (M6)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)	X J	ul 20 (M7)	Oct	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day <b>PRE</b> -E	lection	Primary (12P	_	General	
October 15 Quarterly Report (Q3)	,	for the:	Convention (	120)	Special (	125)
January 31 Year-End Report (YE)		Election on	M = M /	D D /	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		Election	General (30G	i)	Runoff (3	Special (30S)
Termination Report (TER)	пери	for the:  Election on	M M /	D D /	Y	in the State of
5. Covering Period 06	/ D D / 01	2013	through	06	30	2013
I certify that I have examined this	Report and to the	ne best of my know	wledge and b	elief it is tru	e, correct and	d complete.
Type or Print Name of Treasurer	Lisa Early					
Signature of Treasurer Lisa Ea	rly		[Electronically	Filed] D	ate 10	/ 11 / 2013
NOTE: Submission of false, erroneo	us, or incomplete	information may su	bject the pers	on signing th	is Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### Consumer Healthcare Products Association PAC (CHPA/PAC)

Report Covering the Period: From: 06 01 2013 To: 06 30 2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2013		3776.46
	(b) Cash on Hand at Beginning of Reporting Period	18331.18	
	(c) Total Receipts (from Line 19)	12590.08	33463.41
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30921.26	37239.87
7.	Total Disbursements (from Line 31)	3046.71	9365.32
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27874.55	27874.55
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### Consumer Healthcare Products Association PAC (CHPA/PAC)

rt Covering the Period: From: 06	01 2013 To:			
I. Receipts	COLUMN B Calendar Year-to-Date			
	8150.08	13941.93		
(i) Itemized (use Schedule A)	0130.00	7		
(ii) Unitemized	4440.00	6483.62		
Lines 11(a)(i) and (ii)	12590.08	20425.55		
7	0.00	0.00		
(such as PACs)	0.00	10000.00		
•				
Totals to Line 33, page 5)▶	12590.08	30425.55		
	0.00	0.00		
Loans Received	0.00	0.00		
an Repayments Received	0.00	0.00		
efunds, Rebates, etc.)				
arry Totals to Line 37, page 5)	0.00	537.86		
efunds of Contributions Made				
Federal Candidates and Other				
olitical Committees	0.00	2500.00		
her Federal Receipts				
ividends, Interest, etc.)	0.00	0.00		
ansfers from Non-Federal and Levin Funds				
Non-Federal Account				
(from Schedule H3)	0.00	0.00		
Levin Funds (from Schedule H5)	0.00	0.00		
	ontributions (other than loans) From:  Individuals/Persons Other Than Political Committees  (i) Itemized (use Schedule A)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:	iotai iilis reliou	Calcilual Teal-to-Date		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(i) N 5 1 101	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
(b) Other Federal Operating  Expenditures	46.71	365.32		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))▶	46.71	365.32		
Transfers to Affiliated/Other Party				
CommitteesContributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	3000.00	9000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
		0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
man rollical committees	0.00			
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	0.00	0.00		
Federal Fleshing Ashirity (0.11.0.0, \$404(00))				
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
_		222		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds	5.55	5.00		
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))	3046.71	9365.32		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	3046.71	9365.32		

#### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	12590.08	30425.55
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12590.08	30425.55
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	46.71	365.32
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	537.86
8. Net Operating Expenditures (subtract Line 37 from Line 36)	46.71	-172.54

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE 1	NUMBER	:	PAGE	6	OF	16
(chec	k only	one)					
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	13	14		15	16		17

	and Statements may not be sold or used by any pering the name and address of any political committee	
NAME OF COMMITTEE (In Full)	usts Association DAC (OLIDA/DAC)	
Consumer Healthcare Prod	ucts Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)  Jennifer Hawks Bland		Date of Receipt
Mailing Address 3037 Wellington Court		06 17 2013
City	State Zip Code	Transaction ID : SA11AI.6909
Atlanta	GA 30339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	+
Merck, Inc.	Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	†
Primary General	Aggregate real to-bate •	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  Gary Downing		Date of Receipt
Mailing Address 1197 Mine Hill Rd.		06 18 _2013 _
City	State Zip Code	Transaction ID : SA11AI.6913
Fairfield	CT 06430	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	500.00
Name of Employer	Occupation	
Lansinoh Laboratories, Inc.	Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Scott Emerson		Date of Receipt
Mailing Address 407 East Lancaster Ave	).	06 05 2013
City	State Zip Code	Transaction ID : SA11AI.6904
Wayne	PA 19087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3000.00
Name of Employer	Occupation	-
The Emerson Group	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2000.00	
Other (specify) ▼	3000.00	
SUBTOTAL of Receipts This Page (option	nal)	3900.00
	<u> </u>	
TOTAL This Period (last page this line nu	mber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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	and Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full)		
/ Consumer Healthcare Produ	ucts Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)  A. Elizabeth Funderburk		Date of Receipt
Mailing Address 626 F St, NE		06 15 2013
City	State Zip Code	Transaction ID : SA11AI.6869
Washington	DC 20002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.84
Name of Employer	Occupation	7
CHPA	Director, Communications & Media	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	229.24	
Full Name (Last, First, Middle Initial)  B. Elizabeth Funderburk		Date of Receipt
Mailing Address 626 F St, NE		06 30 2013
City	State Zip Code	Transaction ID : SA11AI.6870
Washington	DC 20002	Amount of Each Receipt this Period
FEC ID number of contributing		T
federal political committee.	C	20.84
Name of Employer	Occupation	
CHPA	Director, Communications & Media	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.08	
Full Name (Last, First, Middle Initial)  John Gay		Date of Receipt
Mailing Address 3180 N. Quincy St.		06 15 _ 2013 _
City	State Zip Code	Transaction ID : SA11AI.6871
Arlington	VA 22207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	104.17
Name of Employer	Occupation	
Consumer Healthcare Products	Vice President, Government Affairs	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1145.87	
SUBTOTAL of Receipts This Page (options	al)	145.85
,		
TOTAL This Period (last page this line num	nber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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		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 PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) John Gay Date of Receipt Mailing Address 3180 N. Quincy St. 30 2013 City State Zip Code Transaction ID: SA11AI.6872 VA Arlington 22207 Amount of Each Receipt this Period FEC ID number of contributing C 104.17 federal political committee. Name of Employer Occupation Vice President, Government Affairs Consumer Healthcare Products Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.04 Other (specify) Full Name (Last, First, Middle Initial) **B.** Patrick Gibbons Date of Receipt Mailing Address 200 Kensey Road 06 18 2013 City State Zip Code Transaction ID: SA11AI.6962 Plymouth Meeting PA 19462 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation The Emerson Group Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Travis Gibbons Date of Receipt Mailing Address 728 18th Street S. 06 15 2013 City State Zip Code Transaction ID: SA11AI.6873 Arlington VA 22202 Amount of Each Receipt this Period FEC ID number of contributing 20.84 С federal political committee. Name of Employer Occupation

229.24

Assoc. Director, Federal Affairs

Aggregate Year-to-Date ▼

Consumer Healthcare Products

Other (specify)

General

Receipt For:

Primary

Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any pers name and address of any political committee to	
NAME OF COMMITTEE (In Full) Consumer Healthcare Product	s Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)  Travis Gibbons  Mailing Address 728 18th Street S.		Date of Receipt
		06 30 2013
City	State Zip Code	Transaction ID : SA11AI.6874
Arlington	VA 22202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.84
Name of Employer	Occupation	
Consumer Healthcare Products	Assoc. Director, Federal Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.08	
Full Name (Last, First, Middle Initial)  Carlos Gutierrez	1	Date of Receipt
Mailing Address 926 North Barton Street		M M / D D / Y Y Y Y
City	State Zip Code	06 15 2013 Transaction ID : SA11Al.6875
Arlington	VA 22201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.84
Name of Employer	Occupation	
Consumer Healthcare Products	Director, State Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	229.24	
Full Name (Last, First, Middle Initial) C. Carlos Gutierrez	1	Date of Receipt
Mailing Address 926 North Barton Street		06 30 / Y Y Y Y Y Y
City Arlington	State Zip Code VA 22201	Transaction ID : SA11AI.6876  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.84
Name of Employer	Occupation	
Consumer Healthcare Products	Director, State Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.08	
SUBTOTAL of Receipts This Page (optional)		62.52
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 10 OF 16 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 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 PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) Kenneth W. Hoffman Date of Receipt Mailing Address 9809 Redwing Drive 2013 City Zip Code State Transaction ID: SA11AI.6907 MD Perry Hall 21128 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Consumer Healthcare Products Operations Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Barbara A. Kochanowski Date of Receipt Mailing Address 951 Hidden Park Place 06 15 2013 City State Zip Code Transaction ID: SA11AI.6879 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing 20.84 federal political committee. Name of Employer Occupation **CHPA** Vice President, Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 229.24 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr. Barbara A. Kochanowski Date of Receipt Mailing Address 951 Hidden Park Place

30 06 2013 City Zip Code State Transaction ID: SA11AI.6880 Herndon VA 20170 Amount of Each Receipt this Period FEC ID number of contributing 20.84 С federal political committee. Name of Employer Occupation **CHPA** Vice President, Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 250.08 Other (specify) 541.68

SUBTOTAL of Receipts This Page (optional).....

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

Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) Consumer Healthcare Product	s Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)  A. Richard Randall Lloyd		Date of Receipt
Mailing Address 78 Garfield Avenue		06 17 2013
City Madison	State Zip Code NJ 07940	Transaction ID : SA11Al.6912  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer  Novartis Consumer Healthcare  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation President and Region Head, Novartis OT  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  Scott M. Melville  Mailing Address 1596 Lupine Den Court	1	Date of Receipt  06 15 2013
City Vienna	State Zip Code VA 22182	Transaction ID : SA11AI.6881  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.33
Name of Employer Consumer Healthcare Products	Occupation President and CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2291.70	
Full Name (Last, First, Middle Initial)  C. Scott M. Melville	ı	Date of Receipt
Mailing Address 1596 Lupine Den Court		06 30 2013
City Vienna	State Zip Code VA 22182	Transaction ID : SA11AI.6882  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.33
Name of Employer	Occupation	
Consumer Healthcare Products  Receipt For:  □ Primary □ General  Other (specify) ▼	President and CEO  Aggregate Year-to-Date ▼  2500.03	
SUBTOTAL of Receipts This Page (optional)		1416.66
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)	Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial) Lindsay Morris Mailing Address 7605 Trail Run Rd.		Date of Receipt
City Falls Church	State Zip Code VA 22042	06 15 2013  Transaction ID : SA11AI.6883  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.51
Name of Employer  Consumer Healthcare Products  Receipt For:  Primary General  Other (specify) ▼	Occupation Government Affairs  Aggregate Year-to-Date ▼  687.61	
Full Name (Last, First, Middle Initial)  Lindsay Morris  Mailing Address 7605 Trail Run Rd.		Date of Receipt
City Falls Church FEC ID number of contributing federal political committee.	State Zip Code VA 22042	06 30 2013  Transaction ID: SA11AI.6884  Amount of Each Receipt this Period  62.51
Name of Employer Consumer Healthcare Products  Receipt For:  Primary General Other (specify) ▼	Occupation Government Affairs  Aggregate Year-to-Date ▼  750.12	
Full Name (Last, First, Middle Initial) Ted Peterson Mailing Address 8417 Weller Avenue  City McLean	State Zip Code VA 22102	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 41.67
Name of Employer  CHPA  Receipt For:  Primary General  Other (specify)	Occupation VP  Aggregate Year-to-Date ▼  458.37	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	166.69
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any pering the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Consumer Healthcare Produ	ucts Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)  Ted Peterson  Mailing Address 8417 Weller Avenue		Date of Receipt
011	71.0.1	06 30 2013
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.6886
FEC ID number of contributing federal political committee.	C 22102	Amount of Each Receipt this Period 41.67
Name of Employer CHPA	Occupation VP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial)  Marc L. Rovner  Mailing Address 5 Persimmon Ln.		Date of Receipt
City	State 7in Code	06 18 2013
City White Plains	State Zip Code NY 10605	Transaction ID : SA11AI.6916  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Boehringer Ingelheim	Occupation Vice President & General Manager	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)		2. (2
Randy Sloan  Mailing Address 46 Old Pine Drive		Date of Receipt  06 13 2013
City	State Zip Code	Transaction ID : SA11AI.6903
Manhasset	NY 11030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Lornamead, Inc. Receipt For:	President and CEO	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option.	al) <b>&gt;</b>	1041.67
	<u> </u>	
TOTAL This Period (last page this line nur	mber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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			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

<u> </u>	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Consumer Healthcare Products	s Association PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial)  David Spangler  Mailing Address 1449 N Street, NW  Apartment 3  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  CHPA  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20005  C  Occupation Senior VP., Policy & Int'l Affairs  Aggregate Year-to-Date ▼	Date of Receipt  06 15 2013  Transaction ID: SA11AI.6908  Amount of Each Receipt this Period  500.00
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	and an analysis of the state of
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line number	<u> </u>	8150.08

#### S 17

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 15 OF 16				
ITEMIZED DISBURSEMENTS	Use separate schedule(s					
II LIVIIZED DISDUNSEIVIEN IS	for each category of the	X 21b	22 23 24 25 26			
	Detailed Summary Page	27	28a 28b 28c 29 30			
Any information copied from such Reports and State	ments may not be sold or u	sed by any pers	on for the purpose of solicitina contributions			
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
Consumer Healthcare Products A	ssociation PAC (Ch	HPA/PAC)				
/	,					
Full Name (Last, First, Middle Initial)			Date of Dishurasment			
A. Wells Fargo Bank			Date of Disbursement			
Mailing Address 1800 K Street NW			06 11 2013			
3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3						
City	State Zip Code		Transaction ID : SB21B.6901			
Washington	DC 20006		Transaction ID . 362 IB.0901			
Purpose of Disbursement		004	Amount of Foots Bishamous and this Bosis I			
Candidate Name		001	Amount of Each Disbursement this Period			
Candidate Name		Category/	46.71			
Office Sought: House Disburse	ment For:	Туре				
Senate	Primary General					
President	Other (specify) ▼					
State: District:	•					
Full Name (Last, First, Middle Initial)						
В.			Date of Disbursement			
			M   M / D   D / Y   Y   Y   Y			
Mailing Address						
City	State Zip Code					
o,	p					
Purpose of Disbursement						
			Amount of Each Disbursement this Period			
Candidate Name		Category/				
Office Sought: House Disburse	ment For:	Туре				
Senate	Primary General					
President	Other (specify)					
State: District:	, , , , , , , , , , , , , , , , , , ,					
Full Name (Last, First, Middle Initial)						
C.			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address						
City	State Zip Code					
•	į. 3333					
Purpose of Disbursement						
Candidate Name		Category/				
Office Sought: House Disburse	ment For:	Туре				
Senate	Primary General					
President	Other (specify)					
State: District:	, , , , , , , , , , , , , , , , , , ,					
,						
SUBTOTAL of Disbursements This Page (optional)			46.71			
TOTAL This Period (last page this line number only	')		46.71			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 16 OF 16					
ITEMIZED DISPLIPSEMENTS  Use separate schedule(s) (check of			(check only one)				
	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26				
		27	28a 28b 28c 29 30b				
Any information copied from such Reports and Stater							
or for commercial purposes, other than using the nan	ne and address of any politica	I committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
$ \; angle$ Consumer Healthcare Products As	sociation PAC (CHP	'A/PAC)					
Full Name (Last, First, Middle Initial)							
A. BOEHNER FOR SPEAKER			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 320 FIRST ST., SE			06 17 2013				
City	State Zip Code						
WASHINGTON	DC 20003		Transaction ID : SB23.6898				
Purpose of Disbursement							
		!!	Amount of Each Disbursement this Period				
Candidate Name	"	Category/	1500.00				
JOHN A. BOEHNER	and Fam. 6511	Туре	1300.00				
	nent For: 2014 Primary General						
Senate President	Primary General Other (specify)						
State: OH District: 08	Ctrici (opcony)						
Full Name (Last, First, Middle Initial)							
B. MATHESON FOR CONGRESS			Date of Disbursement				
		M M / D D / Y Y Y Y					
Mailing Address PO Box 521048			06 18 2013				
Suite A	Nata 7: Cada						
City Salt Lake City	State Zip Code UT 84152		Transaction ID : SB23.6900				
Purpose of Disbursement	002						
			Amount of Each Disbursement this Period				
Candidate Name		Category/	1500.00				
JAMES D MATHESON		Туре	1300.00				
	nent For: 2014 Primary General						
President	Other (specify)						
State: UT District: 04	Curior (opcomy)						
Full Name (Last, First, Middle Initial)							
C.			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address							
City	City State Zip Code						
Purpose of Disbursement							
i dipose oi Dispuisement			Amount of Fools Dishumon and this David				
Candidate Name		Cotomani	Amount of Each Disbursement this Period				
		Category/ Type					
Office Sought: House Disburser	nent For:						
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
CURTOTAL of Distance and Till D. ( )			3000.00				
SUBTOTAL of Disbursements This Page (optional)							
		·····•	3000.00				