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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For Oth	er Than An Autho	orized Comm	ittee	C	Office Use Only
NAME OF COMMITTEE (in full)		MAILING LABEL OR PRINT	Example:If typ over the lines	ing, type		
Consumer Healthcare	Products Associ	ation PAC (CHPA/PAC	;) 			
			1 1 1 1		1 1 1 1 1	
ADDRESS (number and stre	eet) 900 19	Oth Street, NW				
Check if different than previously reported. (ACC)	Wash	ington			DC	20006
2. FEC IDENTIFICATION	N NUMBER	CITY	A		STATEA	ZIPCODE 🛕
C00040584			THIS PORT	NEW (N) OR	X AME	NDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports April 15 Quarterly Re July 15 Quarterly Re X October 15 Quarterly Re January 31 Quarterly Re July 31 Mid- Report(Non- Year Only) (I	eport(Q1) (comport(Q2) eport(Q3) eport(YE) Year election MY)	PRE-Election Report for the: Election	O (M3) O (M4) Primary (1 Convention On General (3	n (12C)	Aug 20 Sep 20 Oct 20 General (12 Special (120 Runoff (30F	Year Only) Dec 20 (M12 (Non-Election Year Only) (M10) Jan 31 (YE) G) Runoff (12R G) in the State of
5. Covering Period	07	1 2008	throug	n 09	30	2008
I certify that I have examine Type or Print Name of Trea		I to the best of my know ew Fish	ledge and belief i	is true, correct	and complete.	
Signature of Treasurer E	Electronically File	d by Andrew Fish			Date 0 1	30 2009
NOTE : Submission of false	e, erroneous, or i	ncomplete information n	nay subject the po	erson signing thi	is Report to the pe	enalties of 2 U.S.C 437g.
Office Use						FEC FORM 3X

FE6AN026

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Consumer Healthcare Products Association PAC (CHPA/PAC) D " D 0.7 0 1 2008 0.9 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 17909.19 2008 January 1 (b) Cash on Hand at 22670.04 Begining of Reporting Period 4000.00 14100.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 26670.04 32009.19 6(a) and 6(c) for Column B) 20550.69 25889.84 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 6119.35 6119.35 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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) Page 3

Write or Type Committee Name

Consumer Healthcare Products Association PAC (CHPA/PAC)

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	3100.00	10600.00
	(ii) Unitemized	900.00	2500.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	4000.00	13100.00
(b) Political Party Committees	0.00	0.00
	c) Other Political Committees	0.00	1000.00
((such as PACs)d) Total Contributions (add Lines		
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	4000.00	14100.00
	ransfers From Affiliated/Other	0.00	0.00
	All Loans Received	0.00	0.00
4. L	oan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
3.	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	4000.00	14100.00
	otal Federal Receipts subtract Line 18(c) from Line 19)	4000.00	14100.00

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
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	50.69	139.84
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	50.69	139.84
22.	Transfers to Affiliated/Other Party		
23.	Committees	0.00	0.00
04	Federal Candidates/Committees	20500.00	25750.00
	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
	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.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (fram School de US)		
	(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))	20550.69	25889.84
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	20550.69	25889.84

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)	4000.00	14100.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	4000.00	14100.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	50.69	139.84
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	50.69	139.84

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 12 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Consumer Healthcare Products Associ	ciation PAC	(CHPA/PAC)	
Α.	Full Name (Last, First, Middle Initial) Mr. J.P. Borneman			Date of Receipt
	Mailing Address 722 Harriton Road			08 28 2008
	City <u>B</u> ryn Mawr	State PA	Zip Code 19010	Transaction ID: SA11AI.5623 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13010	1000.00
	Name of Employer Hylands	Occupation Chairma	on In & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Judy L Brown Mailing Address 441 Ridgeway			Date of Receipt
				09 23 2008
	City St. Joseph	State MI	Zip Code 49085	Transaction ID: SA11AI.5645
	FEC ID number of contributing federal political committee.	C	49003	Amount of Each Receipt this Period 250.00
	Name of Employer Perrigo	Occupation Exec. VF		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
с. С.	Full Name (Last, First, Middle Initial) John Hendrickson			Date of Receipt
	Mailing Address 2350 Onekama SE			09 / 23 / 2008
	City Grand Rapids	State MI	Zip Code 49506	Transaction ID: SA11AI.5647
	FEC ID number of contributing federal political committee.	C	49300	Amount of Each Receipt this Period 350.00
	Name of Employer Perrigo	Occupation Executiv	on e Vice President	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional) .			1600.00
ļ	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 12 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address 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	iation PAC (CHPA/PAC)	
Full Name (Last, First, Middle Initial) Mr. Jeffrey Himmel		Date of Receipt
Mailing Address 4500 PGA Boulevard Suite 302		07 23 2008
City Palm Beach Gardens	State Zip Code LA 33418	Transaction ID: SA11AI.5615 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Himmel Pharmaceuticals	Occupation Chairman & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ronald Janish		Date of Receipt
Mailing Address 7764 Rail Yard Dr, SW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5644
Byron Center	MI 49315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Perrigo	Occupation VP Global Procurement	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Joe Papa		Date of Receipt
Mailing Address 1 Deer Hill Rd		09 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5641
Chester FEC ID number of contributing federal political committee.	NJ 07930	Amount of Each Receipt this Period 250.00
Name of Employer Perrigo	Occupation Chairman, President & CEO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	· ·	3100.00

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Full Name (Last, First, Midd Bill Pascrell for Congres	,				Date of Disburs	
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City Washington	State DC	e Zip Coo 20003			Amount of Eacl	n Disbursement this Perio
Purpose of Disbursement						1000.00
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Full Name (Last, First, Midd CITIZENS TO ELECT F	,				Date of Disburs	
Mailing Address PO Bo	ox 326				08 / 0	13 7 2008
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Purpose of Disbursement						1000.00
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State: WA District: Full Name (Last, First, Midd COLEMAN FOR SENA	le Initial)				Transaction ID	: SB23.5628 ement
Mailing Address 680 T	RANSFER ROAD SUI	ГЕ А			09 / D	23 7 2008
City ST PAUL	State MN				Amount of Eacl	n Disbursement this Perio
Purpose of Disbursement 9/24/08 Event					L	2000.00
Candidate Name			T	egory/ ype		
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В.

C.

CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		OR LIN	_		R:		PAC	GE 9/1	12	
EMIZED DISBURSEMENTS		category of the Summary Page		heck or 21b 27		22 [28a [X 23 28b		24 28c	25 29	F	26 30b
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NAME OF COMMITTEE (In Full)	e and addres	ss of arry political	COMMIN	ilee io s	OliCit	CONTIN	DULIONS II	OIII S	uch cc	minilitee		
Consumer Healthcare Products Associatio	n PAC (C	HPA/PAC)										
Full Name (Last, First, Middle Initial) COLLINS FOR SENATOR						Date of	ction ID Disburs	emen		635		
Mailing Address PO BOX 1096						0 9	/ D	23	/ L	žoŏ	8	
•	State ME	Zip Code 04402				Amoun	t of Each	n Disb	ursen	nent this	Perio	bd
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9/17/08 Event								-	-			_
Candidate Name			Cate Ty									
Office Sought: House Disburse X Senate President State: ME District: 00	ement For: Primary Other (spe	2008 X General cify)										
Full Name (Last, First, Middle Initial) Committee to Re-Elect Ed Towns							ction ID			618		
Committee to he-Elect Ed Towns						м м	Disburs		ι τ / Υ	YY	Υ	
Mailing Address 426 C St, NE						0 7		2 4	Ĺ	žoŏ		
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State: NY District: 08												
Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMMIT	TEE, THE					Date of	ction ID Disburs	emen				
Mailing Address P.O. Box 1444						0 7	/ D	29	/ Y	ž 0 ŏ	8 1	
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TEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21	SCHEDULE B (FEC Form 3X)		IE NUMBER: PAGE 10 / 12
nor 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) FRIENDS OF GORDON SMITH Mailing Address 228 S WASHINGTON STE 115 City ALEXANDRIA VA 22314 Purpose of Disbursement 9/17/08 Event Candidate Name Office Sought: New York State Van State Van Senate Primary X General President State: OR District: 10 Full Name (Last, First, Middle Initial) FRIENDS OF JOE PITTS Mailing Address PO BOX 775 City Unionville PA 19375 Purpose of Disbursement Candidate Name Office Sought: X House Senate Primary X General President State: PA District: 16 Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS Mailing Address 4201 Northview Dr, Ste 307 City State: Zip Code Primary X General President Candidate Name Office Sought: X House Senate Primary X General President Candidate Name Office Sought: X House Senate Primary X General President Category/ Type Office Sought: X House Senate Primary X General President Category/ Type Office Sought: X House Senate Primary X General President Category/ Type Office Sought: X House Senate President Category/ Category/ Type Office Sought: X House Senate President Category/ Category/ Type Office Sought: X House Senate President Category/ Category/ Type Office Sought: X House Senate President Category/ Category/ Type Office Sought: X House Senate President Category/ Type Office Sought: X House Senate President Category/ Category/ Type Office Sought: X House Senate President Category/ Category/ Type Office Sought: X House Senate President Category/ Category/ Category/ Type Office Sought: X House Senate President Category/ Category	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page 21b	22 X 23 24 25
Consumer Healthcare Products Association PAC (CHPA/PAC) Full Name (Last, First, Middle Initial) FRIENDS OF GORDON SMITH Mailing Address 228 S WASHINGTON STE 115 City ALEXANDRIA Purpose of Disbursement 9/17/08 Event Candidate Name Office Sought: I House President State: OR District: 00 Full Name (Last, First, Middle Initial) FRIENDS OF JOE PITTS Mailing Address PO BOX 775 City Candidate Name Office Sought: VA 22314 Purpose of Disbursement For: 2008 Primary VA 22314 Purpose of Disbursement Candidate Name Office Sought: VA 22314 Primary VA 22314 Amount of Each Disbursement this Peri Office Sought: VA 22000.00 Transaction ID: SB23.5595 Date of Disbursement Office Sought: VA 2008 Amount of Each Disbursement this Peri Office Sought: VA 2008 Amount of Each Disbursement this Peri Office Sought: VA 2008 Amount of Each Disbursement this Peri Other (specify) Transaction ID: SB23.5624 Date of Disbursement this Peri Office Sought: VA 2008 Amount of Each Disbursement this Peri Other (specify)			
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ALEXANDRIA Purpose of Disbursement 9/17/08 Event Candidate Name Office Sought: House X Senate President State: OR District: 00 Full Name (Last, First, Middle Initial) FRIENDS OF JOE PITTS Mailing Address PO BOX 775 City Unionville PA 19375 Purpose of Disbursement Candidate Name Office Sought: X House Senate President State: PA District: 16 Full Name (Last, First, Middle Initial) Friesdent State: PA District: 16 Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS Mailing Address 4201 Northview Dr, Ste 307 City State Zip Code Primary X General Other (specify) ▼ Transaction ID: SB23.5595 Date of Disbursement this Period Northview Dr, Ste 307 Transaction ID: SB23.5595 Date of Disbursement this Period Northview Dr, Ste 307 Transaction ID: SB23.5595 Date of Disbursement this Period Northview Dr, Ste 307 Transaction ID: SB23.5595 Amount of Each Disbursement Date of Disbursement Transaction ID: SB23.5624 Date of Disbursement Date of Disbursement Transaction ID: SB23.5624 Date of Disbursement Date of Date of Disbursement Date of	Mailing Address 228 S WASHINGTON S	STE 115	09
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State: OR District: 00 Full Name (Last, First, Middle Initial) FRIENDS OF JOE PITTS Mailing Address PO BOX 775 City Unionville PA 19375 Purpose of Disbursement Candidate Name District: 16 Full Name (Last, First, Middle Initial) Primary Zip Code PA 19375 Purpose of Disbursement Office Sought: X House Primary General Other (specify) ▼ City State Zip Code PA 19375 Primary General Other (specify) ▼ Transaction ID: SB23.5595 Date of Disbursement Office Sought: X House Primary General Other (specify) ▼ Transaction ID: SB23.5595 Date of Disbursement this Perion Pate of Disbursement this Perion Pate of Disbursement this Perion Pate of Disbursement For: 2008 Mailing Address 4201 Northview Dr, Ste 307 City State Zip Code MD 20716 Purpose of Disbursement Category/Type Office Sought: X House Senate Primary X General Other (specify) ▼ Office Sought: X House Senate Primary X General Other (specify) ▼ Office Sought: X House Senate Primary X General Other (specify) ▼		Туре	
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Transaction ID: SB23.5624 Date of Disbursement Office Sought: X House Primary X General Disbursement City State Zip Code Phan 19375 Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS Mailing Address 4201 Northview Dr, Ste 307 City State Zip Code Bowie MD 20716 Purpose of Disbursement Candidate Name City State Zip Code Bowie MD 20716 Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Off Y Y 2 0 0 8 Amount of Each Disbursement this Perivaction in the primary X General Disbursement Transaction ID: SB23.5624 Date of Disbursement this Perivaction in the primary X General Office Sought: X House Senate Primary X General Office Sought: X House Senate Primary X General Other (specify) ▼ Office Sought: X House Senate Primary X General Other (specify) ▼ Other (specify) ▼			Transaction ID: SB23.5595
City			Date of Disbursement
Unionville PA 19375 Purpose of Disbursement Candidate Name Office Sought: X House Senate Primary General Other (specify) ▼ State: PA District: 16 Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS Mailing Address 4201 Northview Dr, Ste 307 City State Zip Code Bowie MD 20716 Purpose of Disbursement Candidate Name Office Sought: X House Primary General Other (specify) ▼ Category/ Type Office Sought: X House Primary General Other (specify) ▼ Office Sought: X House Primary General Other (specify) ▼ Office Sought: X House Primary General Other (specify) ▼ Office Sought: X House Primary General Other (specify) ▼ Office Sought: X House Primary General Other (specify) ▼ Office Sought: X House Primary A General Other (specify) ▼			
Candidate Name Category/ Type Office Sought:	Unionville		
Office Sought:			1000.00
Senate Primary X General Other (specify) ▼ State: PA District: 16 Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS Mailing Address 4201 Northview Dr, Ste 307 City State Zip Code MD 20716 Purpose of Disbursement Candidate Name Category/ Type Office Sought: X House Senate Primary X General Other (specify) ▼ Other (specify) ▼ Transaction ID: SB23.5624 Date of Disbursement Amount of Each Disbursement this Period Category/ Type Category/ Type Office Sought: X House Senate Primary X General Other (specify) ▼ Other (specify) ▼		Туре	_
Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS Mailing Address 4201 Northview Dr, Ste 307 City State Zip Code Bowie MD 20716 Purpose of Disbursement Candidate Name Category/ Type Office Sought: X House Senate Primary X General Other (specify) Type Office (specify) Type	Senate President	Primary X General	
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President

District: 19

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 12/12
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam-			
NAME OF COMMITTEE (In Full)			
Consumer Healthcare Products Association	n PAC (CHPA/PAC)		
Full Name (Last, First, Middle Initial)		Transaction ID:	
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	State Zip Code	Amount of Each I	Disbursement this Period
RYE	NH 03870		2000.00
Purpose of Disbursement 9/23/08 Event			2000.00
Candidate Name		Category/ Type	
Office Sought: House Disburse X Senate President State: NH District: 00	ement For: 2008 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial)		Transaction ID:	CD00 FCCF
VOLUNTEERS FOR SHIMKUS		Transaction ID: Date of Disburser	ment
Mailing Address PO Box 5458 PO BOX 5458		0 9 1	6 7 2008
City Springfield	State Zip Code IL 62705	Amount of Each I	Disbursement this Period
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SUBTOTAL of Disbursements This Page (optional)	•	4000.00
TOTAL This Period (last page this line number only)	•	20500.00

Other (specify)

State: IL