Image# 12971399919				PAGE 1 / 22
	EPORT OF REC ND DISBURSEN Other Than An Authorized	IENTS		- Oslu
1. NAME OF TYP	E OR PRINT V Exam	nple: If typing, type	Office Us	
COMMITTEE (in full)		the lines.	12FE4M5	
Consumer Healthcare Pro	oducts Association PAC			
ADDRESS (number and street)	00 19th Street, NW			
Check if different	uite 700			
then providually	Vashington		DC 20006	
2. FEC IDENTIFICATION NUMB	ER V CITY	S		ZIP CODE
C C00040584	3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	
(Choose One)	b) Monthly Report Due On: Mar 20 (M3)	May 20 (M5)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
April 15 Quarterly Report (Q1)		Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report (Q2)	PRE-Election Report for the:	Convention (12C)	Special (12S)	
Quarterly Report (Q3) January 31 Year-End Report (YE)	Election on	M M / D D /	Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Report for the: Election on	M = M / D = D /	Y Y Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y Y 01 2012	through 06	/ D D / Y Y 30 201	<sup>Y</sup> Y 2
I certify that I have examined this Re	eport and to the best of my know	ledge and belief it is true	e, correct and complete	e.
Type or Print Name of Treasurer	Roman G. Blazauskas			
Signature of Treasurer	Blazauskas [	Electronically Filed]	ate 07 / 12	D / Y Y Y Y 2012
NOTE: Submission of false, erroneous,	, or incomplete information may sub	ject the person signing thi	is Report to the penaltie	es of 2 U.S.C. §437g.
Office Use Only				FORM 3X ev. 12/2004

#### 07/12/2012 11 : 01

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

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

R	eport Covering the Period: From: 04	M / D D / Y Y Y Y 01 2012 T	io: 06 / 0 / 2012
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		17381.33
	(b) Cash on Hand at Beginning of Reporting Period	29320.53	
	(c) Total Receipts (from Line 19)	9325.64	22443.78
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	38646.17	39825.11
7.	Total Disbursements (from Line 31)	11317.71	12496.65
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	27328.46	27328.46
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

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	DETAILED SUMMARY PAGE of Receipts	Г
FEC Form 3X (Rev. 06/2004)		Page 3
Write or Type Committee Name		
Consumer Healthcare Products As	sociation PAC (CHPA/PAC)	
Report Covering the Period: From: 04	4 01 / Y Y Y Y To:	06 / Y Y Y Y 2012
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	7416.78	11725.11
(i) Itemized (use Schedule A)		
(ii) Unitemized	908.86	2218.67
(iii) TOTAL (add	, , , , , , , , , , , , , , , , , , , ,	7 7
Lines 11(a)(i) and (ii)	8325.64	13943.78
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	1000.00	8500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		22442.70
Totals to Line 33, page 5)▶	9325.64	22443.78
12. Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
10 All Leaves Descined	0.00	0.00
13. All Loans Received	7 7 7	
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made	7 7 7	0.00
to Federal Candidates and Other		
Political Committees	0.00	0.00
17. Other Federal Receipts	7 7 7	
(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
<ol> <li>Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))</li> </ol>	9325.64	22443.78
-,, ,, , ,	7	
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)►	9325.64	22443.78
	/7	

#### DETAILED SUMMARY PAGE

	II. Disbursements	COLUMN A	COLUMN B
1	Operating Expenditures:	Total This Period	Calendar Year-to-Date
	(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	77.53	256.47
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))►	77.53	256.47
	Transfers to Affiliated/Other Party Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	11240.18	12240.18
	Independent Expenditures		
j.	(use Schedule E) Coordinated Party Expenditures	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
j.	Loan Repayments Made	0.00	0.00
	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	0.00	
	(add Lines 28(a), (b), and (c))►	0.00	0.00
).	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(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
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	11317.71	12496.65
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	11317.71	12496.65

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#### **DETAILED SUMMARY PAGE**

of Disbursements

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)	9325.64	22443.78				
<ol> <li>Total Contribution Refunds (from Line 28(d))</li> </ol>	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9325.64	22443.78				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	77.53	256.47				
<ol> <li>Offsets to Operating Expenditures (from Line 15, page 3)</li> </ol>	0.00	0.00				
8. Net Operating Expenditures (subtract Line 37 from Line 36)	77.53	256.47				

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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PAGE 6 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Consumer Healthcare Products	Associat	tion PAC (CHPA/PAC)	
Α.	Full Name (Last, First, Middle Initial) Jennifer Hawks Bland Mailing Address 3037 Wellington Court	State	Zip Code	Date of Receipt
	Atlanta FEC ID number of contributing federal political committee.	GA	30339	Amount of Each Receipt this Period
	Name of Employer Merck, Inc. Receipt For: Primary General Other (specify)	Occupation Governmer Aggregate		
в.	Full Name (Last, First, Middle Initial)         Scott Emerson         Mailing Address 407 East Lancaster Ave.			Date of Receipt
	City Wayne FEC ID number of contributing federal political committee.	State PA	Zip Code 19087	Transaction ID : SA11AI.6353         Amount of Each Receipt this Period         2000.00
	Name of Employer The Emerson Group Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate	Year-to-Date ▼ 2000.00	
C.	Full Name (Last, First, Middle Initial) Scott Emerson Mailing Address 407 East Lancaster Ave. City	State	Zip Code	Date of Receipt 06 21 2012 Transaction ID : SA11AI.6357
	Wayne         FEC ID number of contributing federal political committee.         Name of Employer         The Emerson Group         Receipt For:         Primary         General         Other (specify) ▼	PA C Occupation President	19087	Amount of Each Receipt this Period
	UBTOTAL of Receipts This Page (optional)		· · · ·	4500.00
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to sol	icit co	ntrib	outions 1	from suc	1 commit	ttee.			
$\rangle$	NAME OF COMMITTEE (In Full) Consumer Healthcare Products	Associat	ion PAC (CHPA/PAC)	)									
Α.	Full Name (Last, First, Middle Initial) John B. Ende			[	Date of	f Re	eceipt						
	Mailing Address 251 Doncaster Rd.				м м 04	/	04	) / Y	2012	Y			
	City Kenmore	State NY	Zip Code 14217-2109	Transaction ID : SA11AI.6349           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7		50	0.00			
	Name of Employer The Mentholatum Company	Occupation Vice Presid	ent, U.S. Sales & Marketing										
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	]									
В.	Full Name (Last, First, Middle Initial) Deborah Ford				Date of	f Re	eceipt						
	Mailing Address 5730 Park Drive						31	) / Y	2012	Y			
	City	State MD	Zip Code					SA11AI.					
	Bowie	20715	A	Amoun	t of	Each F	Receipt th	nis Perioo	ł				
	FEC ID number of contributing federal political committee.				7		20	).84					
	Name of Employer Consumer Healthcare Products	Occupation Project Mar											
	Receipt For: Primary General Other (specify) ▼	]											
C.	Full Name (Last, First, Middle Initial)				Date of	f Re	eceipt						
	Mailing Address 5730 Park Drive				м м 06	/	D 15	) / Y	ү ү 2012	Y			
	City Bowie	State MD	Zip Code 20715					SA11AI. Receipt th	. <b>6438</b> his Period	ł			
	FEC ID number of contributing federal political committee.	С					7	7	2	0.84			
	Name of Employer	Occupation											
	Consumer Healthcare Products	Project Mar	nager										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		229.24										
s	UBTOTAL of Receipts This Page (optional)						5 - 1 5 - 1		541	.68			
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	y information copied from such Reports and St for commercial purposes, other than using the				for the		rpos	se of s	soliciting		ntribut	ions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Consumer Healthcare Products												
Α.	Full Name (Last, First, Middle Initial) Deborah Ford Mailing Address 5730 Park Drive				Date o		_	ipt	/ Y	Y	Y	Y	
					06		L	30		20	012		
	City Bowie	State MD	Zip Code 20715	_					Ceipt th				
	FEC ID number of contributing federal political committee.	С					7			_	20.	84	
	Name of Employer Consumer Healthcare Products	Occupation Project Mar											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.08										
в.	Full Name (Last, First, Middle Initial) Elizabeth Funderburk				Date of	of Re	ecei	ipt					
	Mailing Address 626 F St, NE		06 15 2012 Transaction ID : SA11AI.6420										
	City Washington	State DC	Zip Code 20002						A11AI.				
	FEC ID number of contributing federal political committee.	С					7			_	20.	84	
	Name of Employer CHPA	Occupation Director, Co	mmunications & Media										
	Receipt For: Primary General Other (specify) ▼	Aggregate											
с.	Full Name (Last, First, Middle Initial)				Date of	of Re	ecei	ipt					
	Mailing Address 626 F St, NE				06	/	/	D D 30	/ Y		)12	Y	
	City Washington	State DC	Zip Code 20002						SA11AL			_	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer	Occupation		-									
	CHPA	Director, Co	ommunications & Media										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 229.24										
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17										
	y information copied from such Reports and St for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) Consumer Healthcare Products	Associat	tion PAC (CHPA/PAC)											
Α.	Full Name (Last, First, Middle Initial)         John Gay         Mailing Address 3180 N. Quincy St.			Date of Receipt										
	City Arlington	State VA	Zip Code 22207	04     15     2012       Transaction ID : SA11AI.6405       Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		104.17										
	Name of Employer         Consumer Healthcare Products         Receipt For:         Primary       General         Other (specify) ▼		lent, Government Affairs Year-to-Date ▼ 208.34											
В.	Full Name (Last, First, Middle Initial) John Gay Mailing Address 3180 N. Quincy St.	Date of Receipt												
	City Arlington FEC ID number of contributing federal political committee.	State VA	Zip Code 22207	04     30     2012       Transaction ID : SA11AI.6406       Amount of Each Receipt this Period       104.17										
	Name of Employer Consumer Healthcare Products	Occupation	ent, Government Affairs											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 312.51											
c.	Full Name (Last, First, Middle Initial) John Gay			Date of Receipt										
	Mailing Address 3180 N. Quincy St. City Arlington	State VA	Zip Code 22207	05 15 2012 Transaction ID : SA11AI.6407 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		104.17										
	Name of Employer         Consumer Healthcare Products         Receipt For:         Primary       General         Other (specify) ▼		lent, Government Affairs Year-to-Date ▼ 416.68											
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# SCHEDULE A (FEC Form 3X)

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	NAME OF COMMITTEE (In Full) Consumer Healthcare Products	Associat	ion PAC (CHPA/PAC)	)											
Α.	Full Name (Last, First, Middle Initial) John Gay Mailing Address 3180 N. Quincy St.				te of	_	ceipt	) / Y	Ŷ		1				
	City Arlington	State VA	Zip Code 22207	Т	05     31     2012       Transaction ID : SA11AI.6408       Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С					,			104.1	7				
	Name of Employer         Consumer Healthcare Products         Receipt For:         Primary       General         Other (specify) ▼		ent, Government Affairs Year-to-Date ▼ 520.85												
в.	Full Name (Last, First, Middle Initial) John Gay Mailing Address 3180 N. Quincy St.			_	M	f Re	ceipt	/ Y	Y	Y Y	1				
	City Arlington	State Zip Code VA 22207				06     15     2012       Transaction ID : SA11AI.6409       Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C				104.17									
	Name of Employer Consumer Healthcare Products	Occupation Vice Preside													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 625.02												
с.	Full Name (Last, First, Middle Initial) John Gay			Da	te of	Re	ceipt								
	Mailing Address 3180 N. Quincy St.	01-11-	The Oaste	- L	м 06		D 10 30	J L	2012						
	City Arlington	State VA	Zip Code 22207					SA11AI leceipt th		riod					
	FEC ID number of contributing federal political committee.	С					7			104.1	7				
	Name of Employer	Occupation													
	Consumer Healthcare Products         Receipt For:         Primary       General         Other (specify) ▼		ent, Government Affairs Year-to-Date ▼ 729.19												
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	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Consumer Healthcare Products				noit cor	u D	uuuns	nom	SUCH (					
<b>A</b> .	Full Name (Last, First, Middle Initial) Travis Gibbons Mailing Address 1921 N. Quaker Ln.				Date of		ceipt	D /	/ Y	Y Y	Y			
	City Alexandria	State VA	Zip Code 22302				-	: <b>SA</b> 1	11AI.64	-	4			
	FEC ID number of contributing federal political committee.	С					7			2	0.84			
	Name of Employer         Consumer Healthcare Products         Receipt For:         Primary       General         Other (specify) ▼		ctor, Federal Affairs Year-to-Date ▼ 208.40											
в.	Full Name (Last, First, Middle Initial) Travis Gibbons Mailing Address 1921 N. Quaker Ln.	Date of Receipt												
	City Alexandria	State VA	Zip Code 22302	06     15     2012       Transaction ID : SA11AI.6403       Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			20.84									
	Name of Employer Consumer Healthcare Products	Occupation Assoc. Dire	ctor, Federal Affairs											
	Receipt For: Primary General Other (specify) ▼	Aggregate												
C.	Full Name (Last, First, Middle Initial) Travis Gibbons				Date of	Re	ceipt							
	Mailing Address 1921 N. Quaker Ln.				м м 06	1	30			ү ү 2012	Y			
	City Alexandria	State VA	Zip Code 22302						11AI.64 ipt this		d			
	FEC ID number of contributing federal political committee.	С					7	_	7	2	0.84			
	Name of Employer	Occupation												
	Consumer Healthcare Products	Assoc. Dire	ctor, Federal Affairs											
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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	y information copied from such Reports and S for commercial purposes, other than using the						ose of					1	
	NAME OF COMMITTEE (In Full)			, 10 0					1 00				
$\rangle$	Consumer Healthcare Products	s Associat	ion PAC (CHPA/PAC)										
Α.	Full Name (Last, First, Middle Initial) Dr. Barbara A. Kochanowski				Date of	Re	ceipt						
	Mailing Address 951 Hidden Park Place				м м 05	/	31	) / Y		012	Y		
	City	State	Zip Code		Trans	acti	on ID :	SA11AI.	<u>641</u>	4			
	Herndon	VA	20170	_	Amount	of	Each R	Receipt th	is P	'eriod			
	FEC ID number of contributing federal political committee.	С					,	7	_	20.	84	]	
	Name of Employer	Occupation	l										
	СНРА	Vice Presid	ent, Regulatory Affairs										
	Receipt For:	Aggregate	Year-to-Date <b>V</b>										
	Other (specify)		208.40										
в.	Full Name (Last, First, Middle Initial) Dr. Barbara A. Kochanowski				Date of	Re	ceipt						
	Mailing Address 951 Hidden Park Place		м м 06	/	15	) / Y	20	)12	Y				
	City	State	Zip Code		Trans	actio	on ID :	SA11AL	<u>541</u>	5			
	Herndon	ndon VA 20170											
	FEC ID number of contributing federal political committee.	С		20.84									
	Name of Employer CHPA	Occupation	ent, Regulatory Affairs										
	Receipt For:		Year-to-Date ▼										
	Primary General Other (specify) ▼	Aggregate	229.24										
_	Full Name (Last, First, Middle Initial) Dr. Barbara A. Kochanowski				Date of	De	:-+						
C.	Mailing Address 951 Hidden Park Place					не /	2010 - 10 30	) / Y		)12	Y		
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	Name of Employer	Occupation											
	СНРА	Vice Presid	ent, Regulatory Affairs										
	Receipt For:		Year-to-Date ▼										
	Primary General												
	Other (specify)		250.08										
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			for each category of the Detailed Summary Page		11a 13		11b 14	11c		12 16	17
			y not be sold or used by any poddress of any political committee		for the		pose of	f solicitin		ntributi	ons
	MMITTEE (In Full) er Healthcare Pro	ducts Associat	ion PAC (CHPA/PAC)								
A. Scott M. M Mailing Addres City Vienna	ast, First, Middle Initial) elville ss 1596 Lupine Den Cou er of contributing	rt State VA C	Zip Code 22182			/ sact	15 ion ID :		20 1.638		Y
Receipt For: Primary		Occupation President a	nd CEO Year-to-Date ▼ 1458.32				7	1.9	-	200.	
B. Scott M. N Mailing Addres City Vienna	er of contributing al committee.	rt State VA C	Zip Code 22182			acti	30		20 . <b>638</b> 8		Y 33
Receipt For: Primary	General Gen	President ar Aggregate	nd CEO Year-to-Date ▼ 1666.65								
C. Scott M. M Mailing Addres City Vienna FEC ID numb federal politica Name of Emp Consumer Hea Receipt For:	er of contributing al committee.	State VA C Occupation President a	Zip Code 22182 nd CEO Year-to-Date ▼ 1874.98			sact	15 ion ID		20 <b>1.638</b>		
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Consumer Healthcare Produc	ts Associat	ion PAC (CHPA/PAC	)
Full Name (Last, First, Middle Initial)         A.         Scott M. Melville         Mailing Address 1596 Lupine Den Court         City         Vienna         FEC ID number of contributing federal political committee.         Name of Employer         Consumer Healthcare Products         Receipt For:         Primary	State VA C Occupation President a Aggregate		Date of Receipt
Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Scott M. Melville Mailing Address 1596 Lupine Den Court		2083.31	Date of Receipt
City Vienna FEC ID number of contributing federal political committee. Name of Employer Consumer Healthcare Products Receipt For: Primary General Other (specify)	State VA C Occupation President at Aggregate		Transaction ID : SA11AI.6391         Amount of Each Receipt this Period         208.33
Full Name (Last, First, Middle Initial)         C. Scott M. Melville         Mailing Address 1596 Lupine Den Court         City         Vienna         FEC ID number of contributing federal political committee.         Name of Employer         Consumer Healthcare Products         Receipt For:         Primary       General         Other (specify) ▼	State VA C Occupation President a Aggregate	Zip Code 22182	Date of Receipt 06 30 2012 Transaction ID : SA11AI.6392 Amount of Each Receipt this Period 208.33
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			624.99

Use separate schedule(s) for each category of the

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11E	MIZED RECEIPTS		for each category of the Detailed Summary Page		X         11a         11b         11c         12           13         14         15         16         17
or fo	information copied from such Reports and St. or commercial purposes, other than using the				
	IAME OF COMMITTEE (In Full) Consumer Healthcare Products	Associat	tion PAC (CHPA/P	AC)	
<b>A</b>	ull Name (Last, First, Middle Initial) Ted Peterson Aailing Address 8417 Weller Avenue				Date of Receipt
ō	Dity	State	Zip Code		04 15 _ 2012 _ Transaction ID : SA11AI.6393
F	McLean EC ID number of contributing ederal political committee.	C	22102		Amount of Each Receipt this Period 41.67
C	lame of Employer CHPA Receipt For: Primary General Other (specify) ▼	Occupation VP Aggregate	Year-to-Date ▼ 291.60	9	
<b>B</b>	Full Name (Last, First, Middle Initial) Ted Peterson Mailing Address 8417 Weller Avenue				Date of Receipt
<u>ľ</u> F	Dity McLean EC ID number of contributing ederal political committee.	State VA	Zip Code 22102		04     30     2012       Transaction ID : SA11AI.6394       Amount of Each Receipt this Period       41.67
⊼ C	lame of Employer CHPA Receipt For:	Occupation VP			
·	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36	6	
<b>C</b>	ull Name (Last, First, Middle Initial) Ted Peterson Mailing Address 8417 Weller Avenue				Date of Receipt
F fe	City McLean EC ID number of contributing ederal political committee. Iame of Employer CHPA Receipt For: ☐ Primary	State VA C Occupation VP Aggregate	Zip Code 22102 Year-to-Date ▼ 375.03	3	05     15     2012       Transaction ID : SA11AI.6395       Amount of Each Receipt this Period       41.67
SU	BTOTAL of Receipts This Page (optional)			···· ►	125.01
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PAGE 16 OF

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	y information copied from such Reports and S for commercial purposes, other than using the										
$\backslash$	NAME OF COMMITTEE (In Full)	A									
	Consumer Healthcare Products	Associat	ION PAC (CHPA/PAC)								
Α.	Full Name (Last, First, Middle Initial) Ted Peterson				Date of	Re	ceipt				
	Mailing Address 8417 Weller Avenue			м м 05	/	31	D /		012	Y	
	City	State	Zip Code			acti		SA11A			
	McLean	VA	22102	_	Amount	of	Each F	Receipt	this F	Period	
	FEC ID number of contributing federal political committee.	С					,			41.	67
	Name of Employer CHPA	Occupation VP									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	riggrogato		11							
	Other (specify)		416.70	4							
в.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt				
	Mailing Address 8417 Weller Avenue				м – м 06	/	15		Y Y	012	Y
	City	State	Zip Code		Trans	acti		SA11A			
	McLean	VA	22102		Amount	of	Each F	Receipt	this F	Period	
	FEC ID number of contributing federal political committee.	С					,			41.	67
	Name of Employer CHPA	Occupation VP									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		458.37								
	Other (specify)		430.37								
C.	Full Name (Last, First, Middle Initial) Ted Peterson				Date of	Re	ceipt				
	Mailing Address 8417 Weller Avenue				м м 06	/	30			012	Y
	City	State	Zip Code		Trans	act	ion ID :	SA11A	1.639	8	_
	McLean	VA	22102	_	Amount	of	Each F	Receipt	this F	Period	
	FEC ID number of contributing federal political committee.	С				_	<u></u>	7	_	41	.67
	Name of Employer	Occupation									
	СНРА	VP									
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General		500.04	11							
	Other (specify)		300.04								
s	UBTOTAL of Receipts This Page (optional)		••••••	-			7		_	125.	01
Т	OTAL This Period (last page this line number	only)	••••••	•			,				

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PAGE 17 OF

			Detailed Summary Page		11a 13		111	-	11c	$\left  - \right $	12 16	17
Any i or for	nformation copied from such Reports and St	atements ma name and a	ay not be sold or used by any po ddress of any political committee	erson f e to so	or the	pur ntrib	pos	e of	soliciting	لين cor ز h cor	ntributi	ons
N/	AME OF COMMITTEE (In Full) Consumer Healthcare Products											
<b>A</b>	III Name (Last, First, Middle Initial) Dan Quinonez ailing Address 6011-A Curtier Drive			[	Date o		_	D D	/ Y	Y	Y	Y
Ci	ty lexandria	State VA	Zip Code 22310						<b>SA11AI.</b> eceipt th	.6425		
	EC ID number of contributing deral political committee.	С					7			_	20.	84
Co	ame of Employer onsumer Healthcare Products eceipt For:		rnment Affairs									
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.40									
<b>B</b> . <u></u>	III Name (Last, First, Middle Initial) Dan Quinonez ailing Address 6011-A Curtier Drive			(	Date o			pt	/ Y	Y	Y	Y
Ci		State VA	Zip Code		06 Trans	acti	ion	15 ID:	SA11AI. eceipt th		6	
FE	EC ID number of contributing deral political committee.	nber of contributing										84
Сс	ame of Employer onsumer Healthcare Products	Occupation State Gover	rnment Affairs									
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 229.24									
с	II Name (Last, First, Middle Initial) Dan Quinonez				Date o	f Re	ecei	pt				
Ma	ailing Address 6011-A Curtier Drive				м м 06	/		30	/ Y		12 12	Y
Ci <sup>-</sup>	ty Iexandria	State VA	Zip Code 22310						SA11AI. eceipt th			
	EC ID number of contributing deral political committee.	С					7			_	20.	84
Na	ame of Employer	Occupation										
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	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.08									
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

FOR LINE NUMBER:

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PAGE 18 OF

	Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any the name and address of any political committ	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Consumer Healthcare Produce	cts Association PAC (CHPA/PAC	C)
Full Name (Last, First, Middle Initial) <b>BAYPAC</b>		Date of Receipt
Mailing Address Bayer Road	State Zip Code	04 09 2012
Pittsburgh	PA 15205	Transaction ID : SA11C.6352 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00155713	1000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
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		
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	)	1000.00
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	CHEDULE B (FEC Form 3X)	arate schedule(s)				E NUMBER: PAGE 19 OF 22													
11	EMIZED DISBURSEMENTS	for each	category of the Summary Page			21b 27	22 284 284	ι	23 28b	-	24 28c		25 29	26 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na																		
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)																		
	Consumer Healthcare Products As	ssociatio	on PAC (CH	PA/F	PA	C)													
Α.	Full Name (Last, First, Middle Initial) Wells Fargo Bank						Date	of D	isburs	em	nent								
	Mailing Address 1800 K Street NW						04 11 2012												
	City Washington	State DC	Zip Code 20006			Transaction ID : SB21B.6382													
	Purpose of Disbursement			C	01		Amou	int of	f Each	n D	)isburse	men	t this	Period					
	Candidate Name			Cate T	egoi ype				7		. ,		27	7.34					
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼																
_	State: District:																		
В.	Wells Fargo Bank							of D	isburs	em			( Y	V					
	Mailing Address 1800 K Street NW						0			11			2012	Ť					
	City Washington	State DC	Zip Code 20006				Tra	nsac	tion II	D :	SB21B	.638	3						
	Purpose of Disbursement			(	001		Amou	int of	f Each	n D	)isburse	men	t this	Period					
	Candidate Name			Cate T	egoi ype		25.60												
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General Gereral						-										
	State: District:																		
C.	Full Name (Last, First, Middle Initial) Wells Fargo Bank								isburs										
	Mailing Address 1800 K Street NW						M Of			11			012	Y					
	City Washington	State DC	Zip Code 20006				Tra	nsac	tion II	<b>D</b> :	SB21B	.638	4						
	Purpose of Disbursement	_		-	_														
	Candidate Name			Cate	01 egoi ype		Amou	int o	f Each	n D	)isburse	men		Period 1.59					
	Senate           President	ment For: Primary Other (spe	General ccify) ▼		<u>, , , , , , , , , , , , , , , , , , , </u>				7		7								
_	State: District:									_									
s	UBTOTAL of Disbursements This Page (optional).					• ▶	E	_	7			_		7.53 7.53					
ΙT	OTAL This Period (last page this line number only	')				• 🕨			7										

S	CHEDULE B (FEC Form 3X)		FO		NUMBER: PAGE 20 OF 22											
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the		eck only	one)											
		Detailed Summary Page		21b	22 X 23 24 25 26 28a 28b 28c 29 30b											
	y information copied from such Reports and Stater for commercial purposes, other than using the nar			any perso	on for the purpose of soliciting contributions											
	NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·														
	Consumer Healthcare Products As	ssociation PAC (CF	IPA/P	AC)												
_	Full Name (Last, First, Middle Initial)				Date of Disbursement											
	BERG FOR SENATE															
	Mailing Address PO BOX 9394				06 08 2012											
	,	State Zip Code			Transaction ID : SB23.6377											
	FARGO Purpose of Disbursement	ND 58106														
					Amount of Each Disbursement this Period											
	Candidate Name		Cate	aorv/	4500.00											
	RICHARD A BERG		Ту		1500.00											
	Office Sought: House Disbursel	ment For: 2012 Primary General Other (specify)														
	State: ND District: 00	· · · · · · · · · · · · · · · · · · ·														
	Full Name (Last, First, Middle Initial)															
В.	CITIZENS FOR HARKIN				Date of Disbursement											
	Mailing Address P O BOX 811				05 24 2012											
	DES MOINES	StateZip CodeIA50304			Transaction ID : SB23.6360											
	Purpose of Disbursement				Amount of Each Disbursement this Period											
	Candidate Name		Cotor	non/												
	Tom Harkin		Cateo Typ		1000.00											
	Office Sought: House Disburser Senate President	ment For: 2012 Primary X General Other (specify) ▼														
_	State: District:															
C.	Full Name (Last, First, Middle Initial) Consumer Healthcare Products As	ssociation			Date of Disbursement											
	Mailing Address 900 19th Street, NW Suite 700				06 / D D / Y Y Y Y 28 2012											
	City Washington	StateZip CodeDC20006			Transaction ID : SB23.6381											
	Purpose of Disbursement In-Kind payment to Rep. Diane Black (reimburseme	ent)			Amount of Each Disbursement this Period											
	Candidate Name DIANE BLACK FOR CONGRESS		Cateo Typ		740.18											
	Office Sought: X House Disburser Senate President X	ment For: 2012 Primary General Other (specify) ▼														
_	State: TN District: 06															
s	UBTOTAL of Disbursements This Page (optional)			••••• ▶	3240.18											
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S	CHEDULE B (FEC Form 3X)			F	)B I		IUMBER			PA	GE	21 (	DF 22				
IT	EMIZED DISBURSEMENTS	Use sepa		heck	only	ly one)											
			category of the Summary Page			21b 27	22 28a	X	23 28b	24 28c	$\mid \mid$	25 29	26 30b				
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)																
	Consumer Healthcare Products As	sociatio	n PAC(CH	PA/F	PAC	C)											
Δ	Full Name (Last, First, Middle Initial) DIANE BLACK FOR CONGRESS						Date o	of Die	huree	ment							
	DIANE BLACK FOR CONGRESS								D		VV	Y	V				
	Mailing Address PO BOX 1437						06		2			)12					
	,	State	Zip Code				Trans	sactio	on ID	: SB23.6	378						
	GALLATIN Purpose of Disbursement	TN	37066														
	Fulpose of Disbursement						Amour	nt of I	Each	Disburse	ment	this I	Period				
	Candidate Name			Cate	gory	//						1500	00				
	DIANE L MRS. BLACK				ype				7			1500	.00				
	° –	ment For: ; Primary Other (spe	General														
	State: TN District: 06																
В.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARRASSO						Date o	of Dis	burse	ment							
	Mailing Address PO BOX 52008						06		0	8	20	)12					
	CASPER	State WY	Zip Code 82605				Tran	sacti	on ID	: SB23.6	6376						
	Purpose of Disbursement						A 100 0 1 10	+ of 1	Taab	Dieburge	mont	thia I	Dariad				
	Candidate Name						Amount of Each Disbursement this Per						enou				
	JOHN BARRASSO				egory /pe	//	2000.00										
		ment For:															
	X Senate	Primary	X General														
	State: WY District: 00	Other (spe	cify) 🔻														
_	Full Name (Last, First, Middle Initial)																
C.	HATCH ELECTION COMMITTEE	INC					Date o	_									
	Mailing Address 175 SOUTH WEST TEMPLE SUIT	E 650					м м 06	/	0			)12 )	Y				
	City	State	Zip Code				Tran	sacti		: SB23.6	363						
	SALT LAKE CITY	UT	84101				Tan	Sacil		. 3023.0	1303						
	Purpose of Disbursement								<b>-</b> . ·	Dist							
	Candidate Name						Amoun	nt of I	⊨ach	Disburse	ment	this I	-eriod				
	ORRIN G HATCH				egory /pe	"					_	1500	.00				
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_	State: UT District: 00																
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SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 22 OF 22
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
	for each category of the Detailed Summary Page	21b 27	22         X         23         24         25         26           28a         28b         28c         29         30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
Consumer Healthcare Products A	ssociation PAC (CH	PA/PAC)	
Full Name (Last, First, Middle Initial)  A. JIM GERLACH FOR CONGRESS	COMMITTEE		Date of Disbursement
Mailing Address PO BOX 87			04 24 2012
City UWCHLAND	StateZip CodePA19480		Transaction ID : SB23.6375
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name JIM GERLACH		Category/ Type	1000.00
Office Sought: House Disburse Senate President	ment For: 2012 Primary General Other (specify) ▼		
State: PA District: 06 Full Name (Last, First, Middle Initial)	-		
B. PALLONE FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 3176			06 08 2012
City Long Branch	StateZip CodeNJ07740		Transaction ID : SB23.6361
Purpose of Disbursement			Amount of Each Disbursement this Period
		Category/	1000.00
FRANK JR PALLONE		Туре	1000.00
Senate President	ement For: 2012 Primary X General Other (specify) ▼		
State: NJ District: 06 Full Name (Last, First, Middle Initial)			
C. The Freedom Project/Friends of John E	Boehner (TFP-FOJB) Co	ommittee	Date of Disbursement
Mailing Address 7908 Cincinnatti-Dayton Rd. Suite I-2			05 09 2012
City West Chester	StateZip CodeOH45069		Transaction ID : SB23.6362
Purpose of Disbursement			
Candidate Name John Boehner		Category/	Amount of Each Disbursement this Period 1000.00
	ement For: 2012	Туре	
Senate President	Primary X General Other (specify)		
State: OH District: 08			
SUBTOTAL of Disbursements This Page (optional)		•••••	3000.00
	/)		11240.18