PAGE 1 / 12

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Consumer Healthca	re Products Association	on PAC (CHPA/PAC)	
ADDRESS (number and street) Check if different than previously reported. (ACC)	Suite 600 Washington		DC 20006 -
2. FEC IDENTIFICATION	NUMBER ▼ C	ITY▲	STATE ▲ ZIP CODE ▲
C C00040584	3.	IS THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report	Report Due On: Ma	bb 20 (M2) May 20 (Mar 20 (M3) Jun 20 (M6) Jul 20 (M7) Primary (12P)	Sep 20 (M9) Sep 20 (M9) Dec 20 (M1 (Non-Election Year Only)
July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report	Report for the:	Convention (12C)	Special (12S) in the State of
July 31 Mid-Yea Report (Non-elec Year Only) (MY) Termination Rep (TER)	r (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (308) in the State of
5. Covering Period	07		M / D D / Y Y Y Y Y Y 31 31 2022
I certify that I have examined Type or Print Name of Treason	Green, Brian, , ,	of my knowledge and belief it is	true, correct and complete.
Signature of Treasurer	reen, Brian, , ,	[Electronically Filed]	Date 08 / 11 / 2022
NOTE: Submission of false, en	roneous, or incomplete informati	on may subject the person signing	this Report to the penalties of 52 U.S.C. § 30
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Consumer Healthcare Products Association PAC (CHPA/PAC)

Report Covering the Period: From: 07 01 2022 To: 07 31 2022

		COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6.	(a) Cash on Hand January 1, 2022		39443.12			
	(b) Cash on Hand at Beginning of Reporting Period	49375.79				
	(c) Total Receipts (from Line 19)	1162.44	32060.83			
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50538.23	71503.95			
7.	Total Disbursements (from Line 31)	69.31	21035.03			
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50468.92	50468.92			
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Consumer Healthcare Products Association PAC (CHPA/PAC)

01 2022 07 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 1122.44 12220.32 (i) Itemized (use Schedule A)..... 19051.52 40.00 (ii) Unitemized (iii) TOTAL (add 31271.84 1162.44 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 31271.84 1162.44 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 788.99 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 32060.83 1162.44 20. Total Federal Receipts 1162.44 32060.83 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	.5 1 1 51154	Jaionaa Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		1 1 1 1 1 1 1 1
Expenditures	69.31	535.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	69.31	535.03
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	20500.00
. Independent Expenditures	4 1 4 1 4	45 45 45
(use Schedule E)	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
(7 7	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	5.50	
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees	0.00	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 (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2	20))	
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share		
(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
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
•	4	7 7 7
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	69.31	21035.03
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	69.31	21035.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 1162.44 31271.84 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 31271.84 1162.44 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 69.31 535.03 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 788.99 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures - 253.96 69.31 (subtract Line 37 from Line 36)

Use separate schedule(s)

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for each category of the Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name Brikman, Anita, , , Date of Receipt Mailing Address 8300 Comanche Court City Zip Code State Transaction ID: SA11AI.11641 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Products Communications Receipt For: Aggregate Year-to-Date ▼ Primary General 248.16 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Brikman, Anita, , , Date of Receipt Mailing Address 8300 Comanche Court 2022 City State Zip Code Transaction ID: SA11AI.11642 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Products Communications Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 268.84 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Green, Brian, , , Date of Receipt Mailing Address 19110 Mateny Hill Road 14 2022 City Zip Code State Transaction ID: SA11AI.11626 MD Germantown 20874 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Prod. Assn Vice President, Finance & Ops. (CFO) Receipt For: Aggregate Year-to-Date ▼ Primary General 268.84 Other (specify) 62.04 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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12 7 OF Use separate schedule(s) for each category of the 12 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 of Individual (Last, First, Middle Initial) or Full Organization Name Green, Brian, , , Date of Receipt Mailing Address 19110 Mateny Hill Road 2022 City Zip Code State Transaction ID: SA11AI.11627 MD Germantown 20874 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President, Finance & Ops. (CFO) Consumer Healthcare Prod. Assn. Receipt For: Aggregate Year-to-Date ▼ Primary General 289.52 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gutierrez, Carlos, , , Date of Receipt Mailing Address 926 North Barton Street 2022 City State Zip Code Transaction ID: SA11AI.11628 VA Arlington 22201 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Products Director, State Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 268.84 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gutierrez, Carlos, , , Date of Receipt Mailing Address 926 North Barton Street 29 2022 City Zip Code State Transaction ID: SA11AI.11629 VAArlington 22201 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Products Director, State Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 289.52 Other (specify) 62.04 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name Kochanowski, Barbara, A., Dr., Date of Receipt Mailing Address 951 Hidden Park Place 2022 City Zip Code State Transaction ID: SA11AI.11631 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing 41.59 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Vice President, Regulatory Affairs **CHPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 540.67 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kochanowski, Barbara, A., Dr., Date of Receipt Mailing Address 951 Hidden Park Place 2022 City State Zip Code Transaction ID: SA11AI.11632 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing 41.59 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CHPA** Vice President, Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 582.26 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Melville, Scott, M., , Date of Receipt Mailing Address 1596 Lupine Den Court 14 2022 City State Zip Code Transaction ID: SA11AI.11635 VAVienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 216.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Products President and CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 2808.00 Other (specify) 299.18 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name Melville, Scott, M., , Date of Receipt Mailing Address 1596 Lupine Den Court 2022 City Zip Code State Transaction ID: SA11AI.11636 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 216.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Products President and CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 3024.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Schloss, Marc, , , Date of Receipt Mailing Address 8221 Larry Pl. 2022 City State Zip Code Transaction ID: SA11AI.11637 Chevy Chase MD 20815 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cons. Healthcare Prod. Assn. Sr. Dir., Fed. Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schloss, Marc, , , Date of Receipt Mailing Address 8221 Larry Pl. 29 2022 City Zip Code State Transaction ID: SA11AI.11638 MD Chevy Chase 20815 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cons. Healthcare Prod. Assn. Sr. Dir., Fed. Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 266.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 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 of Individual (Last, First, Middle Initial) or Full Organization Name Spangler, David, , , Date of Receipt Mailing Address 1449 N Street, NW Apartment 3 2022 City Zip Code State Transaction ID: SA11AI.11639 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing C 175.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Senior VP., Policy & Int'l Affairs **CHPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 2275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Spangler, David, , , Date of Receipt Mailing Address 1449 N Street, NW 2022 Apartment 3 City State Zip Code Transaction ID: SA11AI.11640 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CHPA** Senior VP., Policy & Int'l Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Tringale, Mike, , , Date of Receipt Mailing Address 2115 12th Place NW 14 2022 City Zip Code State Transaction ID: SA11AI.11643 DC Washington 20009 Amount of Each Receipt this Period FEC ID number of contributing C 41.59 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Consumer Healthcare Prod. Assn Sr. Dir., Comms. & Pub. Aff. Receipt For: Aggregate Year-to-Date ▼ Primary General 540.67 Other (specify) 391.59 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name Tringale, Mike, , , Date of Receipt Mailing Address 2115 12th Place NW 2022 City Zip Code State Transaction ID: SA11AI.11644 DC Washington 20009 Amount of Each Receipt this Period FEC ID number of contributing 41.59 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sr. Dir., Comms. & Pub. Aff. Consumer Healthcare Prod. Assn. Receipt For: Aggregate Year-to-Date ▼ Primary General 582.26 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 41.59 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE B (FEC Form 3X)	·		FOR LINE NUMBER: PAGE 12 OF 12						
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check on						
		Summary Page	X 21b		23	26	27		
[28a		28c	29	30b		
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NAME OF COMMITTEE (In Full)									
Consumer Healthcare Products A	ssociatio	on PAC (CHF	PA/PAC)						
Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·								
A. Wells Fargo Bank				Date of D	/ D D		Y Y Y	7	
Mailing Address 1510 K Street NW				07	11		2022		
City	State	Zip Code		FEC Ident	ification N	lumber			
Washington	DC	20005							
Purpose of Disbursement				C	action ID	: SB21B	.11646		
Candidate Name			Category/ Type	Amount o	f Each Dis	sburseme	ent this Pe	riod	
Office Sought: House Disburse Senate	ement For: Primary	General		<u> </u>	7	7	69.31	ш	
President State: District:	Other (sp	ecify) ▼		Memo) Item				
Full Name (Last, First, Middle Initial)									
B.				Date of D	isburseme	ent			
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City	State	State Zip Code			FEC Identification Number				
Purpose of Disbursement		Category/ Type			Amount of Each Disbursement this Period				
Candidate Name									
Office Sought: House Disburse	ement For:								
Senate President	Primary	General							
State: District:	Other (sp	ecny)		Memo Item					
Full Name (Last, First, Middle Initial) C.	Date of D	isburseme	ent						
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Mailing Address									
City	State	Zip Code		FEC Ident	ification N	lumber			
Purpose of Disbursement				С					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse								П	
Senate	Primary	General				7	- 4		
State: President District:									
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