

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
Professional Compounding Centers of America PAC

ADDRESS (number and street) 9901 South Wilcrest Dr
▼
 Check if different than previously reported. (ACC) Houston TX 77099

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00558452

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input checked="" type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 06 / 01 / 2020 through 06 / 30 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Rogers, Emory, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Rogers, Emory, , , [Electronically Filed] Date 07 / 16 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Professional Compounding Centers of America PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="48338.29"/>	<input type="text" value="48338.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="69543.29"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1798.00"/>	<input type="text" value="41063.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="71341.29"/>	<input type="text" value="89401.29"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3000.00"/>	<input type="text" value="21060.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="68341.29"/>	<input type="text" value="68341.29"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

Professional Compounding Centers of America PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1558.00	36100.00
(ii) Unitemized	240.00	4963.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1798.00	41063.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1798.00	41063.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from 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
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1798.00	41063.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1798.00	41063.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	21000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	60.00
30. Federal Election Activity (52 U.S.C. § 30101(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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3000.00	21060.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3000.00	21060.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	1798.00	41063.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1798.00	41063.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Professional Compounding Centers of America PAC

A. BIGGS, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19814 ICELAND COURT
 City SPRING State TX Zip Code 77379-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Pharmacy Software
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622521
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BOTTONI, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10010 ELKHART AVE
 City LUBBOCK State TX Zip Code 79424-8211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Compounding Pharmacist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622522
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CATALANO, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14092 CARSON COURT
 City JACKSONVILLE State FL Zip Code 32224-0868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Outside Sales Representative Territory
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622523
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. CLARK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2010 THORNDALE ROAD
 City INDIAN TRAIL State NC Zip Code 28079-5376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Compounding Pharmacist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622524
 Amount of Each Receipt this Period 40.00
 Memo Item

B. DAY, ARJUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12722 TRAIL HOLLOW
 City HOUSTON State TX Zip Code 77024-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Clinical Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622525
 Amount of Each Receipt this Period 192.00
 Memo Item

C. DEATSMAN, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4923 WELFORD DR
 City BELLAIRE State TX Zip Code 77401-5335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Manager of Corporate Communications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622526
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	257.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. HARBIN, LIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9518 SPRING ROSE DRIVE
 City MISSOURI CITY State TX Zip Code 77459-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) VP PA, Comm, Edu, HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2020
Transaction ID : 14622528
 Amount of Each Receipt this Period
 40.00
 Memo Item

B. JONES, MICHEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 MAIN ST #547
 City HOUSTON State TX Zip Code 77002-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Senior Benefits Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2020
Transaction ID : 14622533
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. MARTIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4538 NORTHRIDGE CIRCLE
 City CRESTWOOD State KY Zip Code 40014-8646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Services Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1344.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2020
Transaction ID : 14622534
 Amount of Each Receipt this Period
 192.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	262.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. SHANK, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 N JEFFERSON STREET
 City ARLINGTON State VA Zip Code 22205-2839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Director of Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622537
 Amount of Each Receipt this Period 35.00
 Memo Item

B. SPEARS, KIMBERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7054 SERRANO DRIVE
 City FORT WORTH State TX Zip Code 76126-2320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Director of Communications and Engag
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 06 / 12 / 2020
Transaction ID : 14622538
 Amount of Each Receipt this Period 75.00
 Memo Item

C. BIGGS, MICHELLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19814 ICELAND COURT
 City SPRING State TX Zip Code 77379-1401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Pharmacy Software
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622539
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. BOTTONI, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10010 ELKHART AVE
 City LUBBOCK State TX Zip Code 79424-8211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Compounding Pharmacist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622540
 Amount of Each Receipt this Period 25.00
 Memo Item

B. CATALANO, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14092 CARSON COURT
 City JACKSONVILLE State FL Zip Code 32224-0868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Outside Sales Representative Territory
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622541
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CLARK, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2010 THORNDALE ROAD
 City INDIAN TRAIL State NC Zip Code 28079-5376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Clinical Compounding Pharmacist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622542
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. DAY, ARJUN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12722 TRAIL HOLLOW
 City HOUSTON State TX Zip Code 77024-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Vice President of Clinical Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1920.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622543
 Amount of Each Receipt this Period 192.00
 Memo Item

B. DEATSMAN, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4923 WELFORD DR
 City BELLAIRE State TX Zip Code 77401-5335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) Manager of Corporate Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622544
 Amount of Each Receipt this Period 25.00
 Memo Item

C. HARBIN, LIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9518 SPRING ROSE DRIVE
 City MISSOURI CITY State TX Zip Code 77459-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCCA Occupation (for Individual) VP PA, Comm, Edu, HR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 06 / 26 / 2020
Transaction ID : 14622546
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	257.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. JONES, MICHEAL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 MAIN ST #547

City HOUSTON	State TX	Zip Code 77002-9685
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PCCA	Occupation (for Individual) Senior Benefits Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2020
Transaction ID : 14622551

Amount of Each Receipt this Period
 30.00

Memo Item

B. MARTIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4538 NORTHRIDGE CIRCLE

City CRESTWOOD	State KY	Zip Code 40014-8646
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PCCA	Occupation (for Individual) Clinical Services Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1536.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2020
Transaction ID : 14622552

Amount of Each Receipt this Period
 192.00

Memo Item

C. SHANK, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1507 N JEFFERSON STREET

City ARLINGTON	State VA	Zip Code 22205-2839
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PCCA	Occupation (for Individual) Director of Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 26 / 2020
Transaction ID : 14622555

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	257.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 13 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Professional Compounding Centers of America PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SPEAIRS, KIMBERLY, , ,

Mailing Address **7054 SERRANO DRIVE**

City FORT WORTH	State TX	Zip Code 76126-2320
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PCCA	Occupation (for Individual) Director of Communications and Engag
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
06 / 26 / 2020

Transaction ID : 14622556

Amount of Each Receipt this Period
75.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	1558.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Professional Compounding Centers of America PAC

A. Bill Cassidy For Us Senate

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement 011 Category/Type

Candidate Name **Cassidy, Bill, , Sen.,**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: LA District:

Date of Disbursement: 06 / 26 / 2020

FEC Identification Number: **C00543983**
Transaction ID : **14619527**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Jaime For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642

Purpose of Disbursement 011 Category/Type

Candidate Name **Herrera-Beutler, Jaime, , Rep.,**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: WA District: 03

Date of Disbursement: 06 / 26 / 2020

FEC Identification Number: **C00472704**
Transaction ID : **14619528**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Clarke For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 111-36 200th. Street

City Hollis State NY Zip Code 11412

Purpose of Disbursement 011 Category/Type

Candidate Name **Clarke, Yvette, , Rep.,**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: NY District: 09

Date of Disbursement: 06 / 08 / 2020

FEC Identification Number: **C00415331**
Transaction ID : **14619529**
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00