

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Pharmaceutical Care Management Association Political Action Committee (PCMA 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="2022"/>		<input type="text" value="20801.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="22374.71"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19212.76"/>	<input type="text" value="37785.52"/>
(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="41587.47"/>	<input type="text" value="58587.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32091.64"/>	<input type="text" value="49091.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9495.83"/>	<input type="text" value="9495.83"/>
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

Pharmaceutical Care Management Association Political Action Committee (PCMA 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).....	13600.76	15563.76
(ii) Unitemized	612.00	2221.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14212.76	17785.52
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19212.76	37785.52
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)).....▶	19212.76	37785.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19212.76	37785.52

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	91.64	91.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	91.64	91.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32000.00	49000.00
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	0.00
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)) ..	32091.64	49091.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32091.64	49091.64

DETAILED SUMMARY PAGE
of Disbursements

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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)	19212.76	37785.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19212.76	37785.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	91.64	91.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	91.64	91.64

**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 27
	<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Cascone, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 29 / 2022
Transaction ID : A2022-1501019
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Chambers, Glen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 18 / 2022
Transaction ID : A2022-1111074
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Cianfrocco, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11000 Optum Circle
 City Eden Prairie State MN Zip Code 55344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 20 / 2022
Transaction ID : A2022-1480964
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 27
	<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Dube, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 04 / 08 / 2022
Transaction ID : A2022-846864
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Dube, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 04 / 22 / 2022
Transaction ID : A2022-878048
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Dube, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 05 / 06 / 2022
Transaction ID : A2022-1000599
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
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 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Dube, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 20 / 2022
Transaction ID : A2022-1160669
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Dube, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 06 / 03 / 2022
Transaction ID : A2022-1246155
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Dube, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 06 / 17 / 2022
Transaction ID : A2022-1481794
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 9 OF 27
<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Frost, Amanda, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 03 / 2022
Transaction ID : A2022-1246151
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Frost, Amanda, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 17 / 2022
Transaction ID : A2022-1481789
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Hallemeier, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 08 / 2022
Transaction ID : A2022-846867
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
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 27
<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Hallemeier, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 22 / 2022**
Transaction ID : A2022-878051
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Hallemeier, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00

Date of Receipt **05 / 06 / 2022**
Transaction ID : A2022-1000598
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Hallemeier, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 20 / 2022**
Transaction ID : A2022-1160672
 Amount of Each Receipt this Period 30.00
 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 27
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Hallemeier, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 03 / 2022
Transaction ID : A2022-1246154
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Hallemeier, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR MANAGER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 06 / 17 / 2022
Transaction ID : A2022-1481793
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Mack, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 202.02

Date of Receipt 04 / 08 / 2022
Transaction ID : A2022-846866
 Amount of Each Receipt this Period 28.86
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	88.86
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 27
	<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Mack, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.88

Date of Receipt
 04 / 22 / 2022
Transaction ID : A2022-878050
 Amount of Each Receipt this Period 28.86
 Memo Item

B. Mack, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.74

Date of Receipt
 05 / 06 / 2022
Transaction ID : A2022-1000597
 Amount of Each Receipt this Period 28.86
 Memo Item

C. Mack, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.60

Date of Receipt
 05 / 20 / 2022
Transaction ID : A2022-1160671
 Amount of Each Receipt this Period 28.86
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	86.58
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 13 OF 27
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Mack, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.46

Date of Receipt
 06 / 03 / 2022
Transaction ID : A2022-1246153
 Amount of Each Receipt this Period 28.86
 Memo Item

B. Mack, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.32

Date of Receipt
 06 / 17 / 2022
Transaction ID : A2022-1481792
 Amount of Each Receipt this Period 28.86
 Memo Item

C. McCarthy, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt
 04 / 08 / 2022
Transaction ID : A2022-846857
 Amount of Each Receipt this Period 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.02
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 14 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. McCarthy, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 04 / 22 / 2022
Transaction ID : A2022-878041
 Amount of Each Receipt this Period 192.30
 Memo Item

B. McCarthy, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt 05 / 06 / 2022
Transaction ID : A2022-1000600
 Amount of Each Receipt this Period 192.30
 Memo Item

C. McCarthy, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt 05 / 20 / 2022
Transaction ID : A2022-1160662
 Amount of Each Receipt this Period 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	576.90
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 15 OF 27
<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. McCarthy, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2115.30

Date of Receipt **06 / 03 / 2022**
Transaction ID : A2022-1246156
 Amount of Each Receipt this Period 192.30
 Memo Item

B. McCarthy, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2307.60

Date of Receipt **06 / 17 / 2022**
Transaction ID : A2022-1481795
 Amount of Each Receipt this Period 192.30
 Memo Item

C. Murphy, Katherine, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt **06 / 03 / 2022**
Transaction ID : A2022-1246150
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	404.60
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 16 OF 27
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Murphy, Katherine, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) AVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 17 / 2022
Transaction ID : A2022-1481788
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Scott, Juan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt 04 / 08 / 2022
Transaction ID : A2022-846862
 Amount of Each Receipt this Period 192.30
 Memo Item

C. Scott, Juan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1538.40

Date of Receipt 04 / 22 / 2022
Transaction ID : A2022-878046
 Amount of Each Receipt this Period 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	404.60
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 17 OF 27
<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Scott, Juan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt
 05 / 06 / 2022
Transaction ID : A2022-100601
 Amount of Each Receipt this Period
 192.30
 Memo Item

B. Scott, Juan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1923.00

Date of Receipt
 05 / 20 / 2022
Transaction ID : A2022-1160667
 Amount of Each Receipt this Period
 192.30
 Memo Item

C. Scott, Juan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt
 06 / 03 / 2022
Transaction ID : A2022-1246157
 Amount of Each Receipt this Period
 192.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	576.90
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 18 OF 27
<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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Scott, Juan, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2307.60

Date of Receipt **06 / 17 / 2022**
Transaction ID : A2022-1481796
 Amount of Each Receipt this Period 192.30
 Memo Item

B. Shrader, Melodie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **05 / 06 / 2022**
Transaction ID : A2022-1000596
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Shrader, Melodie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 20 / 2022**
Transaction ID : A2022-1160666
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	242.30
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 19 OF 27
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Shradr, Melodie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 03 / 2022
Transaction ID : A2022-1246152
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Shradr, Melodie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 17 / 2022
Transaction ID : A2022-1481791
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Wiles, Jocelyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7th St NW 9th Floor
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pharmaceutical Care Management Associa Occupation (for Individual) SR DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 07 / 2022
Transaction ID : A2022-1233878
 Amount of Each Receipt this Period 520.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
TOTAL This Period (last page this line number only).....	13600.76

**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 20 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Megellan Health, Inc Employee Committee for Good Government

Mailing Address 8621 Robert Fulton Dr

City Columbia	State MD	Zip Code 21046
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00247262

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2022

Transaction ID : A2022-19368

Amount of Each Receipt this Period
5000.00

Memo Item
Federal PAC

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

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Chc Bold Pac

Mailing Address PO Box 15096

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00365536

Transaction ID : B818708

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Greg Pence for Congress

Mailing Address 439 New Jersey Ave SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Pence, Greg, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: IN District: 06

Date of Disbursement

/ /

FEC Identification Number

C C00658401

Transaction ID : B818706

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Kelly for Congress

Mailing Address 5827 Colfax Avenue

City
Alexandria

State
VA

Zip Code
22311

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Kelly, George J. (Mike), , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

/ /

FEC Identification Number

C C00474189

Transaction ID : B818707

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Victoria Spartz for Congress

Mailing Address 439 New Jersey Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Category/Type

Candidate Name Spartz, Victoria, , ,

Office Sought: House Senate President
State: IN District: 05

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 17 / 2022

FEC Identification Number

Transaction ID : B818705
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Walorski for Congress

Mailing Address 1100 New Jersey Ave SE Suite 2406

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Category/Type

Candidate Name Walorski, Jackie, , ,

Office Sought: House Senate President
State: IN District: 02

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 17 / 2022

FEC Identification Number

Transaction ID : B818704
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Jay Obernolte For Congress 2022

Mailing Address 1100 New Jersey Ave SE Suite 2406

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Category/Type

Candidate Name Obernolte, Jay, , ,

Office Sought: House Senate President
State: CA District: 08

Disbursement For: 2022
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 19 / 2022

FEC Identification Number

Transaction ID : B818793
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Adrian Smith for Congress

Mailing Address 439 New Jersey Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name
Smith, Adrian, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NE District: 03

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number

C C00412890

Transaction ID : B822253

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Angie Craig for Congress

Mailing Address 6129 Long Meadow Road

City McLean State VA Zip Code 22101

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name
Craig, Angie, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MN District: 02

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number

C C00575209

Transaction ID : B822219

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Buckeye Victory Fund

Mailing Address PO Box 368

City Falls Church State VA Zip Code 22040

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: District: Not Applicable

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number

C C00694414

Transaction ID : B822248

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

**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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Carey For Congress

Mailing Address 439 New Jersey Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Carey, Mike, , ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼
State: OH District: 15

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B822249
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Duckworth Victory Fund

Mailing Address 124 Washington St. Suite 101

City Foxboro State MA Zip Code 20235

Purpose of Disbursement Contribution

Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) Not Applicable
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B822222
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Emmer for Congress

Mailing Address 220 W Windsor Ave

City Alexandria State VA Zip Code 22301

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Emmer, Tom, , ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼
State: MN District: 06

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B822254
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Feenstra for Congress

Mailing Address 1200 Trinity Drive

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Feenstra, Randy, , ,

Office Sought: House Senate President

Disbursement For: 2022
 Primary General Other (specify) ▼

State: IA District: 04

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number

C C00693663

Transaction ID : B822220

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Garbarino for Congress

Mailing Address 3410 Alabama Avenue

City Alexandria State VA Zip Code 22305

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Garbarino, Andrew, , ,

Office Sought: House Senate President

Disbursement For: 2022
 Primary General Other (specify) ▼

State: NY District: 02

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number

C C00729954

Transaction ID : B822218

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie for Congress

Mailing Address 5827 Colfax Avenue

City Alexandria State VA Zip Code 22311

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name

Guthrie, Brett, , ,

Office Sought: House Senate President

Disbursement For: 2022
 Primary General Other (specify) ▼

State: KY District: 02

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number

C C00445023

Transaction ID : B822252

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

**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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Johnson For Congress

Mailing Address 5827 Colfax Avenue

City Alexandria State VA Zip Code 22311

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name
Johnson, Bill, , ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼
State: OH District: 06

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number
C00476820
Transaction ID : B822251
Amount of Each Disbursement this Period
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mullin for America

Mailing Address 439 New Jersey Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name
Mullin, Markwayne, , ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼
State: OK District:

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number
C00498345
Transaction ID : B822255
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Rand Paul for U.S. Senate

Mailing Address PO 100

City Goshen State KY Zip Code 40026

Purpose of Disbursement Contribution

011
Category/Type

Candidate Name
Paul, Rand, , ,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General Other (specify) ▼
State: KY District:

Date of Disbursement
MM / DD / YYYY
06 / 29 / 2022

FEC Identification Number
C00462069
Transaction ID : B822221
Amount of Each Disbursement this Period
1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4000.00

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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Full Name (Last, First, Middle Initial)

A. Rosen for Nevada

Mailing Address 600 Pennsylvania Ave SE #15845

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Rosen, Jacky, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2022

FEC Identification Number

C C00606939

Transaction ID : B822250

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1000.00

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

32000.00