

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

Generic Pharmaceutical Association Political Action Committee

ADDRESS (number and street) 777 6th Street, NW Suite 510 Washington DC 20001

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00383463

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on in the State of

5. Covering Period 07 01 2015 through 12 31 2015

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

Type or Print Name of Treasurer Heidi Wilson

Signature of Treasurer Heidi Wilson [Electronically Filed] Date 01 31 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Generic Pharmaceutical Association Political Action Committee**

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="2015"/>		51856.43
(b) Cash on Hand at Beginning of Reporting Period.....	77161.43	
(c) Total Receipts (from Line 19) .....	22382.30	71187.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	99543.73	123043.73
7. Total Disbursements (from Line 31).....	17000.00	40500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	82543.73	82543.73
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Generic Pharmaceutical Association Political Action Committee**

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).....	22190.00	55355.00
(ii) Unitemized .....	192.30	832.30
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22382.30	56187.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	22382.30	71187.30
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))..... ▶	22382.30	71187.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22382.30	71187.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	17000.00	40500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17000.00	40500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17000.00	40500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	22382.30	71187.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22382.30	71187.30
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 15
	<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

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)  
**Generic Pharmaceutical Association Political Action Committee**

**A. Marcy Macdonald**  
Full Name (Last, First, Middle Initial)

Mailing Address 972 Roselma PL

City Pleasanton State CA Zip Code 94566-7454

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

Name of Employer Impax Laboratories Occupation VP Regulatory Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : 7874214**

Amount of Each Receipt this Period  
 2500.00

**B. James Van Lieshout**  
Full Name (Last, First, Middle Initial)

Mailing Address 4000 Savannah PI

City Boulder State CO Zip Code 80301-6056

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

Name of Employer Apotex Occupation Vice President of Retail Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : 7874215**

Amount of Each Receipt this Period  
 2000.00

**C. Steve Giuli**  
Full Name (Last, First, Middle Initial)

Mailing Address 1725 'I' Street, N.W. Suite 300

City Washington State DC Zip Code 20005

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

Name of Employer Apotex Occupation Director Government Affairs & Industry

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2015

**Transaction ID : 7874216**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**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 7 OF 15  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Generic Pharmaceutical Association Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Antonio R Pera**

Mailing Address 305 Bond Court

City Exton State PA Zip Code 19341-2365

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

Name of Employer Par Pharmaceutical Companies Inc Occupation Chief Commercial Officer

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  
 12 / 08 / 2015  
**Transaction ID : 7874217**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**B. Paul B. McGarty**

Mailing Address 95 Cedarfield Road

City Syosset State NY Zip Code 11791-1416

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

Name of Employer Lupin Pharmaceuticals Inc Occupation President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2015  
**Transaction ID : 7874218**

Amount of Each Receipt this Period  
 1000.00

Full Name (Last, First, Middle Initial)  
**C. Jeffrey Hampton**

Mailing Address 12388 NW 80th Place

City Parkland State FL Zip Code 33076-4947

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

Name of Employer Apotex Occupation Vice President of Commercial Operation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2015  
**Transaction ID : 7874219**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00

**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 15
<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)  
**Generic Pharmaceutical Association Political Action Committee**

**A. Christine Simmon**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 6th Street NW

City Washington State DC Zip Code 20001-3723

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

Name of Employer: Generic Pharmaceutical Association Occupation: Senior VP Policy & Strategic Alliances

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR644636916919**

Amount of Each Receipt this Period: 1400.00

P/R Deduction (\$100.00 Bi-Weekly)

**B. Mark D. Hendrickson**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 6th Street, NW Suite 510

City Washington State DC Zip Code 20001-4498

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

Name of Employer: Generic Pharmaceutical Associa Occupation: Director of Science and Regulatory Aff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR644646016919**

Amount of Each Receipt this Period: 280.00

P/R Deduction (\$20.00 Bi-Weekly)

**C. Chris Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 6th Street, NW

City Washington State DC Zip Code 20001-3723

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

Name of Employer: Generic Pharmaceutical Association Occupation: Director Federal Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 920.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR644646216919**

Amount of Each Receipt this Period: 400.00

P/R Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2080.00

**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 15
<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)  
**Generic Pharmaceutical Association Political Action Committee**

**A. Brynna Clark**  
Full Name (Last, First, Middle Initial)  
Mailing Address 777 6th Street, NW

City Washington	State DC	Zip Code 20001-3723
--------------------	-------------	------------------------

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

Name of Employer Generic Pharmaceutical Association	Occupation Senior Director of State Government Af
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1080.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

**Transaction ID : PR644648216919**

Amount of Each Receipt this Period  
560.00

P/R Deduction (\$40.00 Bi-Weekly)

**B. David Gaugh**  
Full Name (Last, First, Middle Initial)  
Mailing Address 777 6th Street NW

City Washington	State DC	Zip Code 20001-3723
--------------------	-------------	------------------------

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

Name of Employer Generic Pharmaceutical Association	Occupation Senior Vice President Sciences & Regul
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

**Transaction ID : PR644648416919**

Amount of Each Receipt this Period  
1400.00

P/R Deduction (\$100.00 Bi-Weekly)

**C. Melissa Schulman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 777 6th Street NW

City Washington	State DC	Zip Code 20001-3723
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FEC ID number of contributing federal political committee. **C**

Name of Employer Generic Pharmaceutical Association	Occupation Senior Vice President Government Affai
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

**Transaction ID : PR644648516919**

Amount of Each Receipt this Period  
1350.00

P/R Deduction (\$225.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3310.00
<b>TOTAL</b> 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 15
<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)  
**Generic Pharmaceutical Association Political Action Committee**

**A. Heidi Wilson**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 6th Street NW  
Suite 510

City Washington State DC Zip Code 20001-4498

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

Name of Employer: Generic Pharmaceutical Association  
Occupation: Director Federal Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR656605116919**

Amount of Each Receipt this Period: 560.00

P/R Deduction (\$40.00 Bi-Weekly)

**B. Kathy Altman**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 6th Street NW  
Suite 510

City Washington State DC Zip Code 20001-4498

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

Name of Employer: Generic Pharmaceutical Association  
Occupation: Executive Assistant to the President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR739268616919**

Amount of Each Receipt this Period: 280.00

P/R Deduction (\$20.00 Bi-Weekly)

**C. Chester Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 6th Street NW  
Suite 510

City Washington State DC Zip Code 20001-4498

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

Name of Employer: Generic Pharmaceutical Association  
Occupation: Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR825606216919**

Amount of Each Receipt this Period: 1900.00

P/R Deduction (\$190.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 2740.00

**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 15
	<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)  
**Generic Pharmaceutical Association Political Action Committee**

**A. Michael Brzica**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 6th Street NW  
 Suite 510  
 City Washington State DC Zip Code 20001-4498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Generic Pharmaceutical Association  
 Occupation: Senior Director, Federal Government Af  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR829973616919**  
 Amount of Each Receipt this Period: 280.00  
 P/R Deduction (\$40.00 Bi-Weekly)

**B. Hannah Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 6th Street NW  
 Suite 510  
 City Washington State DC Zip Code 20001-4498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Generic Pharmaceutical Association  
 Occupation: Senior Manager, State Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 12 / 31 / 2015  
**Transaction ID : PR855127416919**  
 Amount of Each Receipt this Period: 280.00  
 P/R Deduction (\$20.00 Bi-Weekly)

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer  
 Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	560.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22190.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Generic Pharmaceutical Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. NEW DEMOCRAT COALITION PAC**

Mailing Address 700 13TH STREET  
NWSUITE 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

011

Candidate Name

**NEW DEMOCRAT COALITION PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 28 / 2015

**Transaction ID : 7874220**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Blumenauer For Congress**

Mailing Address 232 Ne 9th

City Portland State OR Zip Code 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Earl Blumenauer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 03

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : 7874221**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Tim Scott for Senate**

Mailing Address 499 South Capitol Street, SW Ste 4

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Timothy Scott**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : 7874222**

Amount of Each Disbursement this Period

2500.00

Contribution

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

8500.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Generic Pharmaceutical Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kind For Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Ron Kind**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

**Transaction ID : 7874223**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. HATCH ELECTION COMMITTEE INC**

Mailing Address 175 SOUTH WEST TEMPLE SUITE 650

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Orrin Hatch**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: UT District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2015

**Transaction ID : 7874224**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Mckinley For Congress**

Mailing Address 23 STAMM LN

City WHEELING State WV Zip Code 26003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. David McKinley**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WV District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2015

**Transaction ID : 7874225**

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

**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"/> 24	<input type="checkbox"/> 25	<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)

**Generic Pharmaceutical Association Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. LEAHY FOR U.S. SENATOR COMMITTEE**

Mailing Address PO BOX 1042

City MONTPELIER State VT Zip Code 05601

Purpose of Disbursement Contribution

011

Candidate Name

**Mr. Patrick Leahy**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: VT District:

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2015

**Transaction ID : 7874226**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Richard Burr Committee; The**

Mailing Address Post Office Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement Contribution

011

Candidate Name

**Sen. Richard Burr**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

**Transaction ID : 7874227**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. PALLONE FOR CONGRESS**

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement Contribution

011

Candidate Name

**Mr. Frank Pallone Jr**

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: NJ District: 06

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2015

**Transaction ID : 7874228**

Amount of Each Disbursement this Period

2500.00

Contribution

**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"/> 24	<input type="checkbox"/> 25	<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)

**Generic Pharmaceutical Association Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Brady For Congress

Mailing Address PO Box 8277

City The Woodlands State TX Zip Code 77387

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Rep. Kevin Brady**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

**Transaction ID : 7874229**

Amount of Each Disbursement this Period

1000.00
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Contribution

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

Amount of Each Disbursement this Period

--

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

Amount of Each Disbursement this Period

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

1000.00
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**TOTAL** This Period (last page this line number only)..... ▶

17000.00
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