

**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

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

ADDRESS (number and street)

505 9th Street NW, 10th Floor

Check if different
than previously
reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00388819

3. IS THIS
REPORTNEW
(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:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ 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

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

08 06 2026

in the
State of

TN

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

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

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

07 01 2026

through

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

07 17 2026

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

Heafitz, Jonathan, , ,

Signature of Treasurer

Heafitz, Jonathan, , ,

Date

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

07 24 2026

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**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
07		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
07		17		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		25967.95
(b) Cash on Hand at Beginning of Reporting Period.....	22945.27	
(c) Total Receipts (from Line 19)	2027.53	57654.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	24972.80	83622.67
7. Total Disbursements (from Line 31)	7750.00	66399.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	17222.80	17222.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	6

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).....	1967.53	37761.60
(ii) Unitemized	60.00	4893.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2027.53	42654.72
(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)	2027.53	57654.72
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))	2027.53	57654.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2027.53	57654.72

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

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	399.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	399.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7750.00	66000.00
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)) ..	7750.00	66399.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7750.00	66399.87

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)	2027.53	57654.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2027.53	57654.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	399.87
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	399.87

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. Alderson, Rebecca, , ,

Mailing Address 325 7th St NW

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 ▼

400.00

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485737

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Bradham, Jennifer, , ,

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 DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485739

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Buck, Brendan K, , ,

Mailing Address 325 7th St NW

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

07 / 10 / 2026

Transaction ID : A2026-1485740

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

272.30

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)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. Bush, Anthony N, , ,

Mailing Address 325 7th St NW

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 ▼

807.66

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485741

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

B. Buxton, Jonathan D, , ,

Mailing Address 325 7th St NW

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 ▼

700.00

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485742

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Christofane, Philip Joseph, , ,

Mailing Address 325 7th St NW

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 ▼

560.00

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485743

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

147.69

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

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

FOR LINE NUMBER: PAGE 8 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. Dube, Timothy, J, ,

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 ▼

2692.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2026

Transaction ID : A2026-1485744

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Fjelstad, Peter J, , ,

Mailing Address 325 7th St NW

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 ▼

811.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2026

Transaction ID : A2026-1485745

Amount of Each Receipt this Period

57.96

☐ Memo Item

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

C. Frost, Amanda, M, ,

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 ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2026

Transaction ID : A2026-1485746

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

300.26

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 15
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. Hallemeier, Samuel, , ,

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 ▼

560.00

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485748

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Heafitz, Jonathan, , ,

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 ▼

1400.00

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485749

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Kote, Agnita, , ,

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 ▼

961.52

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485751

Amount of Each Receipt this Period

57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

197.69

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

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

FOR LINE NUMBER: PAGE 10 OF 15
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. Lebens, Lucia G, , ,

Mailing Address 325 7th St NW

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 ▼

2692.20

Date of Receipt

MM / DD / YYYY
 07 / 10 / 2026

Transaction ID : A2026-1485752

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Mack, Michelle, , ,

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 ▼

404.04

Date of Receipt

MM / DD / YYYY
 07 / 10 / 2026

Transaction ID : A2026-1485755

Amount of Each Receipt this Period

28.86

☐ Memo Item

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

C. Marin, David L, , ,

Mailing Address 325 7th St NW

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

MM / DD / YYYY
 07 / 10 / 2026

Transaction ID : A2026-1485756

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

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

413.46

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

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

FOR LINE NUMBER: PAGE 11 OF 15
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. McCarthy, Brian, , ,

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 ▼

2692.20

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485757

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Power, William, M, ,

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 DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1115.34

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485760

Amount of Each Receipt this Period

96.15

☐ Memo Item

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

C. Sorrell-Neal, Tonia, , ,

Mailing Address 325 7th St NW

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 ▼

807.66

Date of Receipt

07 / 10 / 2026

Transaction ID : A2026-1485761

Amount of Each Receipt this Period

57.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

346.14

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

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

FOR LINE NUMBER: PAGE 12 OF 15
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

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

A. Stephenson, Sean G, , ,

Mailing Address 325 7th St NW

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 ▼

560.00

Date of Receipt

MM / DD / YYYY
07 / 10 / 2026

Transaction ID : A2026-1485762

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Threadgill, Emily K, , ,

Mailing Address 325 7th St NW

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 ▼

807.66

Date of Receipt

MM / DD / YYYY
07 / 10 / 2026

Transaction ID : A2026-1485763

Amount of Each Receipt this Period

57.69

☐ Memo Item

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

C. Williams, Sean J, , ,

Mailing Address 325 7th St NW

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

MM / DD / YYYY
07 / 10 / 2026

Transaction ID : A2026-1485764

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

289.99

1967.53

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 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. Fischbach for Congress

Mailing Address 611 Pennsylvania Ave SE #424

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Contribution

Candidate Name

Fischbach, Michelle, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	6		

FEC Identification Number

C C00717959**Transaction ID : B928037**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gabe Amo for Congress

Mailing Address 600 PENNSYLVANIA AVE SE #202

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Contribution

Candidate Name

Amo, Gabe, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: RI

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	6		

FEC Identification Number

C C00838060**Transaction ID : B928034**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Husted for Senate

Mailing Address 1101 30th Street NW Suit 390

City
WashingtonState
DCZip Code
20007

Purpose of Disbursement

Contribution

Candidate Name

Husted, Jon, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	6		

FEC Identification Number

C C00896019**Transaction ID : B928036**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4250.00

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

SCHEDULE B (FEC Form 3X)
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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. Nathaniel Moran for Congress

Mailing Address 5827 Colfax Avenue

City
AlexandriaState
VAZip Code
22311

Purpose of Disbursement

Contribution

011

Candidate Name

Moran, Nathaniel, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	6		

FEC Identification Number

C C00796086

Transaction ID : B928039

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Team Hagerty

Mailing Address 1101 30th Street NW Suit 390

City
WashingtonState
DCZip Code
20007

Purpose of Disbursement

Contribution

011

Candidate Name

Hagerty, Bill, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	6		

FEC Identification Number

C C00718627

Transaction ID : B928035

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Andy Barr Committee

Mailing Address 3410 Alabama Ave

City
AlexandriaState
VAZip Code
22305

Purpose of Disbursement

Contribution

011

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	6		

FEC Identification Number

C C00633792

Transaction ID : B928443

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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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. Pfluger Victory Committee

Mailing Address 403 First Street SE

City
WashingtonState
DCZip Code
20003

Purpose of Disbursement

Contribution

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	6		

FEC Identification Number

C C00753913

Transaction ID : B928442

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

Candidate Name

Category/
Type

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

Candidate Name

Category/
Type

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)..... ►

7750.00