Robert D. "Bobby" Orrock for House Committee (CC-12-00825)

Schedule A: Direct Contributions Over \$100 Full Name of Contributor Mailing Address of Contributor	Donor Information 1. Employer or Business (If Corporate/Company Donor: N/A) 2. Type of Business(If Corporate Donor Type of Business) 3. Business Location	Date Received	Contribution This Period	Aggregate To Date	
Pharmaceutical Care Management Association 325 7th Street NW 9th Floor Washington, DC 20004	1. 2.Represents Pharmacy Benefit Managers 3.Washington, DC	05/25/2023	\$1,000.00	\$0.00	

No Schedule B results to display.

No Schedule E-1 results to display.	