11/03/2014 14 : 51

Image# 14952568019 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		TORES		PAGE 1 OF 3 FOR SE OF FORM 24/48				
Ρ	NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS								
Ch	Check if 24-hour report 48-hour report New report Amends report filed on 10 / 23 / 2014								
	Full Name of Payee Mentzer Media Services, Inc	Date	e of Public Distribution/Dissemination						
	Mailing Address 600 Fairmount Ave			Amo					
	City	State	Zin Codo		02050.00				
	Towson	MD	Zip Code 21286-1006		92950.00 nsaction ID : 6531399 e of Disbursement or Obligation				
	Purpose of Expenditure Coffman-Common Sense		Category/ Type 011						
	Name of Federal Candidate		X Support	Office Souc	ght: X House District: 06				
	Mike Coffman		Oppose	Presi					
	Calendar Year-To-Date Per Election for Office Sought	7 7	0.00	Disburseme	ent For: Primary X General Other (specify) ►				
	Full Name of Payee	-		Date	Date of Public Distribution/Dissemination				
	Mentzer Media Services, Inc				10 22 2014				
	Mailing Address 600 Fairmount Ave			Amo	ount				
	City	State	Zip Code		22892.00				
	Towson	MD	21286-1006		saction ID : 6531400 e of Disbursement or Obligation				
	Purpose of Expenditure Benishek-Treated		Category/ Type 011						
	Name of Federal Candidate		X Support	Office Soug	ght: X House District: 01				
	Daniel Benishek		Oppose	Presi	ident Senate State: MI				
	Calendar Year-To-Date Per Election for Office Sought	7 7	0.00	Disburseme 2014	ent For: Primary X General Other (specify) ►				
	(a) SUBTOTAL of Itemized Independent Expenditure	es		• •	115842.00				
(b) SUBTOTAL of Unitemized Independent Expenditures									
	(c) TOTAL Independent Expenditures			•					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.									
	William J. Robb III, MD	[Electron	ically Filed] Date	e 11	/ D D / Y Y Y Y 03 2014				
	Signature								

Image# 14952568020 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)	LINDITORES				PAGE 2 OF 3 FOR SE OF FORM 24/48		
Ρ	NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS							
Check if 24-hour report 48-hour report New report Amends report filed on 10 / 23 / 2014								
	Full Name of Payee Mentzer Media Services, Inc				of Publi	C Distribution/Dissemination		
	Mailing Address 600 Fairmount Ave			Amou				
	City State	Zip Code				46495.00		
	Towson MD	21286-10	06			ID : 6531401 ursement or Obligation		
	Purpose of Expenditure Heck-Protecting	Category Typ			M			
	Name of Federal Candidate	X	Support	Office Sough	nt. 🗋	K House District: 03		
	Joe Heck		Oppose	Presid	-	Senate State: NV		
	Calendar Year-To-Date Per Election for Office Sought	0.00		Disbursemer 2014		□ Primary X General		
	Full Name of Payee			Date	of Publi	ic Distribution/Dissemination		
	Mentzer Media Services, Inc			_	10 ¹	/ D D / Y Y Y Y 22 2014		
	Mailing Address 600 Fairmount Ave			Amou	Int			
	City State	Zip Code				12861.00		
	Towson MD	21286-10	006			D : 6531402 ursement or Obligation		
	Purpose of Expenditure Flores-Standing Up	Category Typ			M = M			
	Name of Federal Candidate		Support	Office Sougl	nt·	K House District: 17		
	Bill Flores		Oppose	Presid		Senate State: TX		
	Calendar Year-To-Date Per Election for Office Sought	0	.00	Disbursemer 2014		Primary X General pecify) ►		
	(a) SUBTOTAL of Itemized Independent Expenditures			•		59356.00		
(b) SUBTOTAL of Unitemized Independent Expenditures								
	(c) TOTAL Independent Expenditures				7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
		Electronically Filed	Date	, ^M 11	03	/ Y Y Y Y Y 2014		
	Signature							

Image# 14952568021 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		TORES			PAGE 3 OF 3 FOR SE OF FORM 24/48		
Ρ	NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS							
Check if 24-hour report 48-hour report New report Amends report filed on 10 / 23 / 2014								
	Full Name of Payee Mentzer Media Services, Inc			Date	of Public	Distribution/Dissemination		
	Mailing Address 600 Fairmount Ave			Amo		22 2014		
	City St	ate	Zip Code			18945.00		
		ИD	21286-1006			D: 6531404 rsement or Obligation		
	Purpose of Expenditure Southerland-Keep Fighting		Category/ Type 011		M M /			
	Name of Federal Candidate		Support	Office Soug	ht [.]	K House District: 02		
	William Steve Southerland		Oppose	Presid		Senate State: <u>FL</u>		
	Calendar Year-To-Date Per Election for Office Sought		0.00	Disburseme	nt For: Other (spe	Primary X General		
	Full Name of Payee			Date	of Public	Distribution/Dissemination		
	Mentzer Media Services, Inc				M M /	D D / Y Y Y Y 22 2014		
	Mailing Address 600 Fairmount Ave			Amo	unt			
	City St	ate	Zip Code			23654.00		
	,	MD	21286-1006			: 6531406 rsement or Obligation		
	Purpose of Expenditure Reed-Fighter		Category/ Type 011		M = M /			
	Name of Federal Candidate		Support	Office Soug	ıht: 🔉	K House District: 29		
	Thomas Reed		Oppose	Presi		Senate State: NY		
	Calendar Year-To-Date Per Election for Office Sought		0.00	Disburseme 2014	ent For: Other (sp	Primary X General ecify) ▶		
	(a) SUBTOTAL of Itemized Independent Expenditures			•		42599.00		
(b) SUBTOTAL of Unitemized Independent Expenditures								
	(c) TOTAL Independent Expenditures				-7	217797.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.								
	William J. Robb III, MD	[Electroni	<i>ically Filed]</i> Date	, 11 /	03	2014		
	Signature							