



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Wisconsin Medical Society 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="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2150.00"/>	<input type="text" value="8525.00"/>
(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="2150.00"/>	<input type="text" value="8525.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2150.00"/>	<input type="text" value="8525.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

Wisconsin Medical Society Political Action Committee

Report Covering the Period: From: 07 / 01 / 2014 To: 09 / 30 / 2014

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).....	2150.00	8525.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2150.00	8525.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2150.00	8525.00
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))..... ▶	2150.00	8525.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2150.00	8525.00

**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 .....	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.....	2150.00	8525.00
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)) ..	2150.00	8525.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2150.00	8525.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2150.00	8525.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2150.00	8525.00
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 18
	<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)  
**Wisconsin Medical Society Political Action Committee**

**A. Doctor Sridhar V. Vasudevan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5200 Upper Lakeview Ridge Rd  
 City Belgium State WI Zip Code 53004-9001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2014  
**Transaction ID : 6498975**  
 Amount of Each Receipt this Period  
 100.00  
 Earmarked for Leibham for Congress

**B. Dr. Michael C. Reineck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5730 Paradise Ridge  
 City West Bend State WI Zip Code 53095-8779  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Michael C Reineck MD SC Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 14 / 2014  
**Transaction ID : 6499092**  
 Amount of Each Receipt this Period  
 100.00  
 Earmarked for Glenn Grothman for Congress

**C. Doctor Sridhar V. Vasudevan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5200 Upper Lakeview Ridge Rd  
 City Belgium State WI Zip Code 53004-9001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Froedtert & The Medical College of Wis Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 28 / 2014  
**Transaction ID : 6499104**  
 Amount of Each Receipt this Period  
 100.00  
 Earmarked for Leibham for Congress

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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: PAGE 7 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Doctor Jay A. Gold**

Mailing Address 3100 Lake Mendota Dr. #705

City State Zip Code  
 Madison WI 53705-1462

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

Name of Employer Occupation  
 MetaStar Inc Physician

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2014  
**Transaction ID : 6499117**

Amount of Each Receipt this Period  
 100.00

Earmarked for Tammy Baldwin for Senate

Full Name (Last, First, Middle Initial)  
**B. Mr. William (Rick) Abrams**

Mailing Address 2512 University Ave

City State Zip Code  
 Madison WI 53705-3813

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

Name of Employer Occupation  
 Wisconsin Medical Society CEO

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 07 / 2014  
**Transaction ID : 6499134**

Amount of Each Receipt this Period  
 100.00

Earmarked for Pocan for Congress

Full Name (Last, First, Middle Initial)  
**C. Dr. Kevin Andrew Jessen**

Mailing Address N5115 Oak Hill Rd

City State Zip Code  
 Fond Du Lac WI 54937-7922

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

Name of Employer Occupation  
 AMG Aurora Health Center - Fond Du Lac Physician

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2014  
**Transaction ID : 6499141**

Amount of Each Receipt this Period  
 200.00

Earmarked for Harris for Wisconsin

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 8 OF 18
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Dr. Patrick L. Remington</b>		Date of Receipt MM / DD / YYYY 08 / 06 / 2014 <b>Transaction ID : 6499165</b>
Mailing Address 1214 Dartmouth Rd		Amount of Each Receipt this Period 50.00
City Madison	State WI	Zip Code 53705-2214
FEC ID number of contributing federal political committee. C		Earmarked for Tammy Baldwin for Senate
Name of Employer Health Sciences Learning Center	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) <b>B. Doctor Allan Bertram Levin</b>		Date of Receipt MM / DD / YYYY 08 / 20 / 2014 <b>Transaction ID : 6499177</b>
Mailing Address 4585 Fox Bluff Lane		Amount of Each Receipt this Period 50.00
City Middleton	State WI	Zip Code 53562-2327
FEC ID number of contributing federal political committee. C		Earmarked for Pocan for Congress
Name of Employer Self Employed	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>C. Doctor Kenneth William Merkitch</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : 6499184</b>
Mailing Address W5732 Heatherwood Place		Amount of Each Receipt this Period 100.00
City La Crosse	State WI	Zip Code 54601-2476
FEC ID number of contributing federal political committee. C		Earmarked for Kind for Congress
Name of Employer Gundersen Health System	Occupation Physician	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<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 9 OF 18
	<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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Dr. Sandra L. Osborn**

Mailing Address 2085 County Road J

City State Zip Code  
Verona WI 53593-8829

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

Name of Employer Occupation  
UW School of Medicine and Public Health Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
08 / 06 / 2014  
**Transaction ID : 6499203**

Amount of Each Receipt this Period  
50.00

Earmarked for Tammy Baldwin for Senate

Full Name (Last, First, Middle Initial)  
**B. Doctor Roger Waynsan Kwong**

Mailing Address 1015 Cliffwood Ln

City State Zip Code  
La Crosse WI 54601-6021

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

Name of Employer Occupation  
Gundersen Health System Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
08 / 26 / 2014  
**Transaction ID : 6499225**

Amount of Each Receipt this Period  
50.00

Earmarked for Kind for Congress

Full Name (Last, First, Middle Initial)  
**C. Dr. Clarence Paul Chou**

Mailing Address 10028 N Miller Dr 2W

City State Zip Code  
Mequon WI 53092-6186

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

Name of Employer Occupation  
Clarence P Chou MD Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
09 / 10 / 2014  
**Transaction ID : 6499237**

Amount of Each Receipt this Period  
50.00

Earmarked for Glenn Grothman for Congress

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

**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 18
	<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)  
**Wisconsin Medical Society Political Action Committee**

**A. Dr. Timothy Lisle Bartholow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 714 Dunning St  
 City Madison State WI Zip Code 53704-5614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEA Trust Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2014  
**Transaction ID : 6499239**  
 Amount of Each Receipt this Period  
 200.00  
 Earmarked for Ribble for Congress

**B. Doctor George L. Morris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1578 E Cumberland Blvd  
 City Whitefish Bay State WI Zip Code 53211-1141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Epilepsy Care Specialists SC Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : 6499273**  
 Amount of Each Receipt this Period  
 100.00  
 Earmarked for Harris for Wisconsin

**C. Dr. Timothy Lisle Bartholow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 714 Dunning St  
 City Madison State WI Zip Code 53704-5614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEA Trust Occupation Physician  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2014  
**Transaction ID : 6499275**  
 Amount of Each Receipt this Period  
 100.00  
 Earmarked for Harris for Wisconsin

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<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 11 OF 18
<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)  
**Wisconsin Medical Society Political Action Committee**

**A. Dr. Timothy Lisle Bartholow**  
Full Name (Last, First, Middle Initial)

Mailing Address 714 Dunning St

City Madison	State WI	Zip Code 53704-5614
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FEC ID number of contributing federal political committee. **C**

Name of Employer WEA Trust	Occupation Physician
-------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

**Transaction ID : 6499310**

Amount of Each Receipt this Period  

200.00
--------

Earmarked for Rob Zerban for Congress

**B. Doctor Sridhar V. Vasudevan**  
Full Name (Last, First, Middle Initial)

Mailing Address 5200 Upper Lakeview Ridge Rd

City Belgium	State WI	Zip Code 53004-9001
-----------------	-------------	------------------------

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

Name of Employer Froedtert & The Medical College of Wis	Occupation Physician
------------------------------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

**Transaction ID : 6499312**

Amount of Each Receipt this Period  

200.00
--------

Earmarked for Glenn Grothman for Congress

**C. Dr. Paul A. Wertsch**  
Full Name (Last, First, Middle Initial)

Mailing Address 4221 Venetian Ln

City Madison	State WI	Zip Code 53718-6655
-----------------	-------------	------------------------

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

Name of Employer Wildwood Family Clinic SC	Occupation Physician
-----------------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

**Transaction ID : 6499322**

Amount of Each Receipt this Period  

100.00
--------

Earmarked for Duffy for Congress

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500.00</b>
<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: PAGE 12 OF 18  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Wisconsin Medical Society Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Doctor Laurence J. Verlinden**

Mailing Address 3933 Indian Bluff Dr

City State Zip Code  
 Manitowoc WI 54220-3074

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

Name of Employer Occupation  
 HFM Internal Medicine Physician

Receipt For: 2014  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : 6499329**

Amount of Each Receipt this Period  
 200.00

Earmarked for Glenn Grothman for Congress

**B.** 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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2150.00

**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

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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Leibham for Congress**

Mailing Address P.O. Box 941

City Sheboygan State WI Zip Code 53082

Purpose of Disbursement  
Earmarked by Sri Vasudevan

Category/  
Type

Candidate Name

**Joseph Leibham**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

/  /

**Transaction ID : 6273792**

Amount of Each Disbursement this Period

Earmarked by Sri Vasudevan

Full Name (Last, First, Middle Initial)

**B. Pocan for Congress**

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Earmarked by Rick Abrams

Category/  
Type

Candidate Name

**Mark Pocan**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 02

Date of Disbursement

/  /

**Transaction ID : 6273810**

Amount of Each Disbursement this Period

Earmarked by Rick Abrams

Full Name (Last, First, Middle Initial)

**C. Glenn Grothman for Congress**

Mailing Address P.O. Box 1215

City Fond du Lac State WI Zip Code 54936

Purpose of Disbursement  
Earmarked by Michael Reineck

Category/  
Type

Candidate Name

**Glenn Grothman for Congress**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

/  /

**Transaction ID : 6273884**

Amount of Each Disbursement this Period

Earmarked by Michael Reineck

**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"/> 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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Leibham for Congress**

Mailing Address P.O. Box 941

City Sheboygan State WI Zip Code 53082

Purpose of Disbursement  
Earmarked by Sri Vasudevan

011

Candidate Name

**Joseph Leibham**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	1	4		

**Transaction ID : 6295978**

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Earmarked by Sri Vasudevan

Full Name (Last, First, Middle Initial)

**B. Harris For Wisconsin**

Mailing Address 2425 Sandstone Ct

City Oshkosh State WI Zip Code 54904

Purpose of Disbursement  
Earmarked by Kevin Jessen

011

Candidate Name

**Mark Harris**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	4		

**Transaction ID : 6317540**

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Earmarked by Kevin Jessen

Full Name (Last, First, Middle Initial)

**C. Tammy Baldwin for Senate**

Mailing Address PO Box 696

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Earmarked by Jay Gold, Sandra Osborn, and Patrick Remington

011

Candidate Name

**Tammy Baldwin**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	4		

**Transaction ID : 6317541**

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Earmarked by Jay Gold, Sandra Osborn, and Patrick Remington

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

5	0	0	.	0	0
---	---	---	---	---	---

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

5	0	0	.	0	0
---	---	---	---	---	---

**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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Pocan for Congress**

Mailing Address PO Box 327

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Earmarked by Allan Levin

011

Candidate Name  
**Mark Pocan**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	1	4

**Transaction ID : 6364703**

Amount of Each Disbursement this Period

5	0	.	0	0
---	---	---	---	---

Earmarked by Allan Levin

Full Name (Last, First, Middle Initial)

**B. Kind for Congress**

Mailing Address P.O. Box 184

City La Crosse State WI Zip Code 54602-0184

Purpose of Disbursement  
Earmarked by Ken Merkitch

011

Candidate Name  
**Ron Kind**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	4

**Transaction ID : 6364714**

Amount of Each Disbursement this Period

1	0	.	0	0
---	---	---	---	---

Earmarked by Ken Merkitch

Full Name (Last, First, Middle Initial)

**C. Kind for Congress**

Mailing Address P.O. Box 184

City La Crosse State WI Zip Code 54602-0184

Purpose of Disbursement  
Earmarked by Roger Kwong

011

Candidate Name  
**Ron Kind**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	4

**Transaction ID : 6366603**

Amount of Each Disbursement this Period

5	0	.	0	0
---	---	---	---	---

Earmarked by Roger Kwong

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

2	0	.	0	0
---	---	---	---	---

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

2	0	.	0	0
---	---	---	---	---

**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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Glenn Grothman for Congress**

Mailing Address P.O. Box 1215

City State Zip Code  
Fond du Lac WI 54936

Purpose of Disbursement  
Earmarked by Clarence Chou

011

Candidate Name

**Glenn Grothman for Congress**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : 6404910**

Amount of Each Disbursement this Period

50.00

Earmarked by Clarence Chou

Full Name (Last, First, Middle Initial)

**B. Ribble for Congress**

Mailing Address PO Box 7200

City State Zip Code  
Appleton WI 54912

Purpose of Disbursement  
Earmarked by Tim Bartholow

011

Candidate Name

**Reid Ribble**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

**Transaction ID : 6404911**

Amount of Each Disbursement this Period

200.00

Earmarked by Tim Bartholow

Full Name (Last, First, Middle Initial)

**C. Harris For Wisconsin**

Mailing Address 2425 Sandstone Ct

City State Zip Code  
Oshkosh WI 54904

Purpose of Disbursement  
Earmarked by George Morris and Tim Bartholow

011

Candidate Name

**Mark Harris**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

**Transaction ID : 6409661**

Amount of Each Disbursement this Period

200.00

Earmarked by George Morris and Tim Bartholow

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

450.00

**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)  
**Wisconsin Medical Society Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rob Zerban for Congress**

Mailing Address P.O. Box 2286

City Kenosha State WI Zip Code 53141

Purpose of Disbursement  
Earmarked by Tim Bartholow

011

Candidate Name  
**Rob Zerban**

Category/  
Type

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

**Transaction ID : 6409665**

Amount of Each Disbursement this Period

200.00

Earmarked by Tim Bartholow

Full Name (Last, First, Middle Initial)

**B. Glenn Grothman for Congress**

Mailing Address P.O. Box 1215

City Fond du Lac State WI Zip Code 54936

Purpose of Disbursement  
Earmarked by Sri Vasudevan

011

Candidate Name  
**Glenn Grothman for Congress**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 22 / 2014

**Transaction ID : 6426315**

Amount of Each Disbursement this Period

200.00

Earmarked by Sri Vasudevan

Full Name (Last, First, Middle Initial)

**C. Duffy for Congress**

Mailing Address P.O. Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement  
Earmarked by Paul Wertsch

011

Candidate Name  
**Sean Duffy**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

**Transaction ID : 6449409**

Amount of Each Disbursement this Period

100.00

Earmarked by Paul Wertsch

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

500.00

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

