10/24/2014 08 : 31

Image# 14952545046 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)			PAGE 1 OF 1 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS					
Cł	neck if X 24-hour report 48-hour report X New report Amends	report filed	on /		
	Full Name of Payee Mammen Group, Inc		Date of Public	Distribution/Dissemination	
	Mailing Address 1901 L Street, N.W.		Amount		
	CityStateZip CodeWashingtonDC20036		Transaction I		
	Purpose of Expenditure Category/ Type	011		Unsement or Obligation	
	Name of Federal Candidate Support Daniel Maffei Oppost		Sought:	House District: 25 Senate State: NY	
	Calendar Year-To-Date Per Election for Office Sought 0.00	Disbur 2014	rsement For:	Primary X General	
	Full Name of Payee	Date of Pu		ate of Public Distribution/Dissemination	
	Mailing Address				
	City State Zip Code				
	Purpose of Expenditure Category/ Type		Date of Disbu	Ursement or Obligation	
	Name of Federal Candidate Suppo		Sought:	House District: Senate State:	
	Calendar Year-To-Date Per Election for Office Sought	Disbu	rsement For:	Primary General	
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures	•••••		23612.16	
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 [Electronically Filed] Signature	Date 10) / D D 24	2014	