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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Society for Vascular Surgery Political Action Committee 633 N. St. Clair St. ADDRESS (number and street) 24th Floor Check if different Χ than previously Chicago 60611 ΙĻ reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00381459 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Х Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2010 03 3 1 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Rebecca M. Maron Type or Print Name of Treasurer Electronically Filed by Rebecca M. Maron 04 15 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) 2/15 Write or Type Committee Name Society for Vascular Surgery Political Action Committee D D " D 2010 0 1 0 1 2010 0.3 31 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 72295.01 January 1 (b) Cash on Hand at 72295.01 Begining of Reporting Period 15126.66 15126.66 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 87421.67 87421.67 6(a) and 6(c) for Column B) 4500.00 4500.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 82921.67 82921.67 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FEC Form 3X (Rev. 06/2004) 3 / 15

Write or Type Committee Name

Society for Vascular Surgery Political Action Committee

Report Covering the Period:

From:

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^D 0 1

^Y 2010

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м м

^D 31

Y Y Y Y 2 0 1 0

	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)	8666.66	8666.66
	(ii) Unitemized	6460.00	6460.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	15126.66	15126.66
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15126.66	15126.66
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15126.66	15126.66
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	15126.66	15126.66

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 15

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	.,	0.00	0.00
	(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party		
3.	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	4500.00	4500.00
١.	Independent Expenditure (use Schedule E)	0.00	0.00
	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
S.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	3.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
).	Other Disbursements	0.00	0.00
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	· ·	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
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4500.00	4500.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	4500.00	4500.00
	from Line 31)	4500.00	4500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 15

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Total Contributions (other than loans) from Line 11(d), page 3)	15126.66	15126.66
Total Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	15126.66	15126.66
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

City State Zip Code Greenville NC 27858 FEC ID number of contributing federal political committee. Name of Employer East Carolina University Receipt For: Primary General Other (specify) ▼ City State Zip Code Boston MA 02114 FEC ID number of contributing federal political committee. City State Zip Code Boston MA 02114 FEC ID number of contributing federal political committee. City State Zip Code Boston MA 02114 FEC ID number of contributing federal political committee. City State Zip Code Boston MA 02114 FEC ID number of contributing federal political committee. City State Zip Code Boston MA 02114 FEC ID number of contributing federal political committee. City State Zip Code Phoenix Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Douglas Carlon Mailling Address 10803 S. 26th Avenue City State Zip Code Phoenix AZ 85041 FEC ID number of contributing federal political committee. City State Zip Code Phoenix AZ 85041 Fec ID number of contributing federal political committee. City State Zip Code Phoenix AZ 85041 Fec ID number of contributing federal political committee. City State Zip Code Phoenix AZ 85041 Fec ID number of contributing federal political committee. City State Zip Code Phoenix AZ 85041 Fer Imanaction ID: SA11AI.5426 Amount of Each Receipt this Period Transaction ID: SA11AI.5426 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Transaction ID: SA11AI.5426 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial) Dr. William M Bogey Mailing Address 441 Forest Park City State Zip Code Greenville NC 27858 FEC ID number of contributing federal political committee. Name of Employer Mailing Address 15 Parkman Street City State Zip Code Greenville No 27858 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code MA 02114 Date of Receipt Transaction ID: SA11AI.5421 Amount of Each Receipt this Period Date of Receipt Transaction ID: SA11AI.5421 Amount of Each Receipt this Period Date of Receipt Transaction ID: SA11AI.5421 Amount of Each Receipt this Period Date of Receipt Transaction ID: SA11AI.5426 Amount of Each Receipt Init Period Transaction ID: SA11AI.5426 Transaction ID: SA11AI.5426 Transaction ID: SA11AI.5426 Transaction ID: SA11AI.5426 Amount of Each Receipt Init Period Transaction ID: SA11AI.5426 Transaction ID: SA11A	7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
City State Zip Code NC 27858 FEC ID number of contributing federal political committee. Name of Employer East Carolina University Receipt For: Primary General Other (specify) ▼	\ \ .	Full Name (Last, First, Middle Initial) Dr. William M Bogey			M M / D D / Y Y Y Y
Secretary State Secretary State Secretary State Secretary Sec		-		·	Transaction ID: SA11AI.5421
Receipt For:		federal political committee.			250.00
Date of Receipt Date of Receipt		Receipt For: Primary General	vascular	surgeon e Year-to-Date ▼	
City State Zip Code MA 02114 FEC ID number of contributing federal political committee. Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼	3.	Dr. Richard Cambria			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Mass General Hospital Receipt For: Primary General Other (specify) ▼ State Zip Code AZ 85041 PEC ID number of contributing federal political committee. Name of Employer Vascular surgeon Date of Receipt Transaction ID: SA11AI.5426 Amount of Each Receipt this Period Primary General Occupation Vascular surgeon Date of Receipt Transaction ID: SA11AI.5426 Amount of Each Receipt this Period C C Cocupation Vascular surgeon Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		City	State	Zip Code	
Receipt For:		FEC ID number of contributing		02114	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Douglas Carlon Mailing Address 10803 S. 26th Avenue City Phoenix AZ 85041 FEC ID number of contributing federal political committee. Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Vascular Surgeon Aggregate Year-to-Date ▼ Other (specify) ▼		Name of Employer Mass General Hospital			
Dr. Douglas Carlon Mailing Address 10803 S. 26th Avenue City State Zip Code Phoenix AZ 85041 FEC ID number of contributing federal political committee. Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M O 3 2 2 1 2 0 1 0 Transaction ID: SA11AI.5426 Amount of Each Receipt this Period 250.00		Primary General	Aggregate		
City State Zip Code Phoenix AZ 85041 FEC ID number of contributing federal political committee. Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ State Zip Code AZ 85041 C C Transaction ID: SA11AI.5426 Amount of Each Receipt this Period 250.00		, , , ,			Date of Receipt
Phoenix AZ 85041 FEC ID number of contributing federal political committee. Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date ▼ 250.00		Mailing Address 10803 S. 26th Avenue	Э		
FEC ID number of contributing federal political committee. Name of Employer Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00				•	
Vascular Surgery Specialists Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		FEC ID number of contributing		85041	
Primary General Other (specify) ▼ 250.00		Vascular Surgery Speciali- sts	vascular	surgeon	
		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional) .			600.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 15 (check only one) X 11a
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Society for Vascular Surgery Political	Action Com	mittee	
	Full Name (Last, First, Middle Initial) Dr. James M Cook			Date of Receipt
	Mailing Address 9308 63rd Place, W			03 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.5419
	<u>Dalton</u>	GA	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Private Practice	Occupatio Vascular	n Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. J. Thomas Crepps			Date of Receipt
	Mailing Address 175 S. Union Blvd			03 17 YYYY 2010
	City	State	Zip Code	Transaction ID: SA11AI.5403
	Colorado Springs	CO	80910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Colorado Springs Vascular	Occupation vascular		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	250.00	
	Full Name (Last, First, Middle Initial) Carlo Dall'Olmo			Date of Receipt
	Mailing Address 5020 W. Bristol Road			03 31 2010
	City	State	Zip Code	Transaction ID: SA11AI.5454
	Flint	MI	48507	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Michigan Vascular Center		Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional) .	1		550.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Society for Vascular Surgery Political	Action Com	mittee	
Α.	Full Name (Last, First, Middle Initial) Dr. Michael Dalsing			Date of Receipt
	Mailing Address 9010 Greenridge Way			03 18 2010
	City Indianapolis	State IN	Zip Code 46278	Transaction ID: SA11AI.5411 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10270	250.00
	Name of Employer Indiana University	Occupatio vascular	n surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) David Deaton	_I		Date of Receipt
	Mailing Address 1593 Piscataway Road			02 / 01 / 2010
	City	State	Zip Code	Transaction ID: SA11AI.5348
	Crownsville FEC ID number of contributing federal political committee.	C	21032	Amount of Each Receipt this Period 250.00
	Name of Employer Private Practice	Occupatio Vascular	n surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
_ C.	Full Name (Last, First, Middle Initial) Dr. Rumi Faizer			Date of Receipt
	Mailing Address 1022 Queen Ave Driv	е		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Columbia	State MO	Zip Code 65212	Transaction ID: SA11AI.5449 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer University of Missouri	Occupatio Vascular	n surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .			1500.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Society for Vascular Surgery Political	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
4 .	Full Name (Last, First, Middle Initial) Dr. Peter L Faries			Date of Receipt
	Mailing Address 6 Red Oak Drive City	State	Zip Code	03 09 2010
	Rye	NY	10580	Transaction ID: SA11AI.5390 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mount Sinai Medical Ctr	Occupation Vascular	on r Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Julie Freischlag Mailing Address East Baltimore Campi	II.		Date of Receipt
	<u> </u>			02 26 2010
	City	State	Zip Code	Transaction ID: SA11AI.5364
	Baltimore FEC ID number of contributing federal political committee.	C	21205	Amount of Each Receipt this Period 500.00
	Name of Employer Johns Hopkins Univ. Sof M	Occupation vascular	on surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 500.00	
-).	Full Name (Last, First, Middle Initial) Dr. Shahid N Haque			Date of Receipt
	Mailing Address 218 Commonsway Bldg B			02 / 23 / Y Y Y Y Y
	City	State NJ	Zip Code	Transaction ID: SA11AI.5361
	Toms River FEC ID number of contributing federal political committee.	C	08755	Amount of Each Receipt this Period 500.00
	Name of Employer Self - private practice	Occupation	on : surgeon	
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .	<u> </u>		1500.00
-	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 15 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Society for Vascular Surgery Political	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Harrington Mailing Address 1890 LPGA Blvd Suite 250 City Daytona Beach FEC ID number of contributing federal political committee. Name of Employer Surgical Assocs. of Volusia Receipt For: Primary General Other (specify)		Surgeon • Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: SA11Al.5458 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Dr. Karl A Illig Mailing Address 1274 Clover Street City Rochester FEC ID number of contributing federal political committee. Name of Employer University of Rochester Receipt For: Primary General Other (specify)	State NY C Occupation Vascular Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. M A Mansour Mailing Address P.O. Box 312 City Ada FEC ID number of contributing federal political committee. Name of Employer Spectrum Health Receipt For: Primary General Other (specify)	State MI C Occupation vascular Aggregate		Date of Receipt M M D D 2 0 1 0
SUBTOTAL of Receipts This Page (optional)			600.00

SCHEDULE A (FEC Form CITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usi NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Society for Vascular Surgery Poli	tical Action Committee	
Full Name (Last, First, Middle Initial) Dr. Robert G. Molnar		Date of Receipt
Mailing Address G-5020 W. Bristo	ol Road	03 11 7 2010
City	State Zip Code	Transaction ID: SA11AI.5395
Flint	MI 48507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Michigan Vascular Center	Occupation Vascular Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Robert W Osborne		Date of Receipt
Mailing Address 1802 S Yakima Suite 204		03 15 2010
City	State Zip Code	Transaction ID: SA11AI.5398
Tacoma FEC ID number of contributing federal political committee.	WA 98405	Amount of Each Receipt this Period 500.00
Name of Employer Cascade Vascular Associat-	Occupation vascular surgeon	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Geoffrey L Risley		Date of Receipt
Mailing Address 3030 Lake Shore	Blvd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5433
<u>Jacksonville</u>	FL 32210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.33
Name of Employer Cardiothoracic & Vascular Ascs	Occupation Vascular surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 208.33	
SUBTOTAL of Receipts This Page (optic	nal)	1708.33
TOTAL This Period (last page this line no		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 15 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ C	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Society for Vascular Surgery Politica	I Action Comm	nittee	
۱.	Full Name (Last, First, Middle Initial) Dr. Geoffrey L Risley	.1		Date of Receipt
	Mailing Address 3030 Lake Shore Blv City	O State	Zip Code	0 3 2 2 2 1 0 Transaction ID: SA11Al.5464
	Jacksonville	FL	32210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	GEL 10	208.33
	Name of Employer Cardiothoracic & Vascular Ascs	Occupation Vascular		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.66	
 3.	Full Name (Last, First, Middle Initial) Dr. Sean Roddy			Date of Receipt
	Mailing Address 43 New Scotland Ave	.		02 / 23 / 2010
	City	State	Zip Code	Transaction ID: SA11AI.5358
	Albany	NY	12208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer The Vascular Group, PLLC	Occupation Vascular		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Dr. Farouq A Samhouri			Date of Receipt
	Mailing Address 2137 Welsh Rd., suit	e 1-C		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Phildelphia	State PA	Zip Code 19115	Transaction ID: SA11AI.5425
	FEC ID number of contributing federal political committee.	C	19112	Amount of Each Receipt this Period 250.00
	Name of Employer Northeast Philadelphia Va- scula	Occupation Vascular		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1458.33

A.

PAGE 13 / 15 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) Society for Vascular Surgery Political Action Committee Full Name (Last, First, Middle Initial) Dr. Russell Samson Date of Receipt Mailing Address 600 N. Cattleman Road 03 22 2010 Suite 220 City State Zip Code Transaction ID: SA11AI.5432 Sarasota FI 34232 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Samson, Showalter, Lepore Occupation vascular surgeon VS Receipt For: Aggregate Year-to-Date General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) В. Dr. Daniel Walsh Date of Receipt Mailing Address One Medical Center Dr 0 3 09 2010 City State Zip Code Transaction ID: SA11AI.5389 Lebanon NH 03756 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Dartmouth-Hitchcock Med. Occupation Vascular Surgeon <u>Ctr</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	750.00
TOTAL This Period (last page this line number only)	•	8666.66

EMIZED DISBURSEMENTS			/ one)
	for each category of the Detailed Summary Page	27	22 X 23 24 25 28a 28b 28c 29
ny Information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) 'Society for Vascular Surgery Political A	name and address of any politic	ed by any person f al committee to so	or the purpose of soliciting contributions licit contributions from such committee
Full Name (Last, First, Middle Initial) CHARLES E GRASSLEY Mailing Address PO BOX 1000			Transaction ID: SB23.5463 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DES MOINES Purpose of Disbursement	State Zip Code IA 50304		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House District: 00	oursement For: 2010 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Gene Green Congressional Ctme			Transaction ID: SB23.5459 Date of Disbursement
Mailing Address P.O. Box 16128			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & 1 & M \end{smallmatrix} & \begin{smallmatrix} D & D \\ D & 2 & 7 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ Q & O & 1 & O \end{smallmatrix} \end{bmatrix}$
City Houston	State Zip Code TX 77222		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name		Category/ Type	1000.00
Office Sought: X House Senate President State: TX District: 29	oursement For: 2010 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) RICHARD E MR. NEAL			Transaction ID: SB23.5461 Date of Disbursement
Mailing Address 36 ATWATER TERR	ACE		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & 1 & Q \\ 2 & 0 & 1 & Q \end{smallmatrix} \end{bmatrix}$
City SPRINGFIELD	State Zip Code MA 01107		Amount of Each Disbursement this Period
Purpose of Disbursement			1000.00
Candidate Name		Category/ Type	
Office Sought: X House Senate President State: MA District: 02	oursement For: 2010 Primary X General Other (specify)		
SUBTOTAL of Disbursements This Page (option	nal)	>	3000.00
TOTAL This Period (last page this line number of	only))	

В.

President

District: 10

-9	on 100000 10000			
S	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
	ly Information copied from such Reports and State for commercial purposes, other than using the na			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	Society for Vascular Surgery Political Ac	tion Committee		
	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.5460
	Frank Pallone for Congress			Date of Disbursement
	Mailing Address P.O. Box 3167			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & D \\ Z & O & T & O \end{smallmatrix} \end{bmatrix}$
	City	State Zip Code		Amount of Each Disbursement this Period
	Long Branch	NJ 07740		1000.00
	Purpose of Disbursement		•	1000.00
	Candidate Name	C	Category/ Type	
	Office Sought: X House Senate President State: NJ District: 06	sement For: 2010 Primary X General Other (specify) ▼		
	Full Name (Last, First, Middle Initial) EDOLPHUS TOWNS			Transaction ID: SB23.5462 Date of Disbursement
	Mailing Address 286 HIGHLAND BOUL	EVARD		$\begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 5 \\ 0 & 1 & 5 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 & 1 \\ 0 & 2 & 0 & 1 & 0 \end{bmatrix}$
	City BROOKLYN	State Zip Code NY 11207		Amount of Each Disbursement this Period
	Purpose of Disbursement			500.00
	Candidate Name	C	category/ Type	
	Office Sought: X House Disbur	sement For: 2010		

SUBTOTAL of Disbursements This Page (optional)	•	1500.00
TOTAL This Period (last page this line number only)	•	4500.00

Other (specify)

State: NY