Image# 202201319475593070			_		PAGE 1 / 551
	EPORT OF R ND DISBURS Other Than An Autho	EMENTS	s	Office	
1. NAME OF TYP	PE OR PRINT ▼	Example: If typin	ng, type		
COMMITTEE (in full)		over the lines.		12FE4M5	
	e of the American As	sociation of C	Drthopaedi	c SurgeonsP	AC of AAOS
ADDRESS (number and street)	17 Massachusetts Ave., N.E.				
Check if different	st Floor				
than previously reported. (ACC)	Washington			DC 20002	2
2. FEC IDENTIFICATION NUME			ST	ATE 🔺	ZIP CODE
C C00343137	3. IS T REP	~	IEW N) OR	AMENDED (A)	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	(b) Monthly Report Due On: Mar 20		May 20 (M5) Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
	Apr 20	(M4) J	Jul 20 (M7)	Oct 20 (M10)	Year Only) Jan 31 (YE)
Quarterly Report (Q1)	(c) 12-Day PRE-Election	Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (12S)	
Quarterly Report (Q3) January 31 Year-End Report (YE)	Election c	n _	D D / Y	YYYY	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	General (30G	à)	Runoff (30R)	Special (30S)
Termination Report (TER)	Report for the: Election c	n /	D D / Y	Y Y Y	in the State of
5. Covering Period 07	/ D D / Y Y Y Y 01 2021	through	M M /	D D / Y Y 31 20	21 Y
I certify that I have examined this F Type or Print Name of Treasurer	Report and to the best of my gram, M, , Cassim, MD,FAAO		pelief it is true,	correct and comple	te.
Signature of Treasurer	, Cassim, MD,FAAOS	[Electronically	<i>Filed]</i> Date		D / Y Y Y Y 2022
NOTE: Submission of false, erroneous	s, or incomplete information m	ay subject the pers	son signing this	Report to the penalti	es of 52 U.S.C. § 3010
Office Use Only					FORM 3X Rev. 05/2016

01/31/2022 08 : 49

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Political Action Committee of the American Association of Orth	thopaedic SurgeonsPAC of AAOS
--	-------------------------------

R	eport Covering the Period: From:	01 / Y Y Y Y 2021	To: 12 / D D / Y Y Y Y 12 31 2021
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2021		475730.72
	(b) Cash on Hand at Beginning of Reporting Period	467706.99	
	(c) Total Receipts (from Line 19)	475262.65	1022999.86
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	942969.64	1498730.58
7.	Total Disbursements (from Line 31)	371741.12	927502.06
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	571228.52	571228.52
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Report Covering the Period: From: 07 / 01 / 2021 To: 12 / 31 / 2021								
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)	438839.09	922665.37						
(ii) Unitemized	34381.50	93292.43						
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	473220.59	1015957.80						
(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	473220.59	1015957.80						
Totals to Line 33, page 5)								
Party Committees	0.00	0.00						
3. All Loans Received	0.00	0.00						
4. Loan Repayments Received	0.00	0.00						
5. Offsets To Operating Expenditures								
(Refunds, Rebates, etc.)	42.06	42.06						
(Carry Totals to Line 37, page 5) 6. Refunds of Contributions Made	72.00	42.00						
to Federal Candidates and Other								
Political Committees 7. Other Federal Receipts	0.00	5000.00						
(Dividends, Interest, etc.)	2000.00	2000.00						
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 Transfers (add 18(a) and 18(b))	0.00	0.00						
10 Total Descripto (add Lines 11/d)								
 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	475262.65	1022999.86						
20 Total Federal Receipts								

20. Total Federal Receipts (subtract Line 18(c) from Line 19).......► 475262.65 1022999.86

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4 COLUMN B Calendar Year-to-Date		
II. Disbursements	COLUMN A Total This Period			
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Tear-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	11591.12	26352.06		
(c) Total Operating Expenditures		26252.06		
(add 21(a)(i), (a)(ii), and (b))	11591.12	26352.00		
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	358500.00	723500.00		
Independent Expenditures (use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	1650.00	2650.00		
(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))	1650.00	2650.00		
Other Disbursements (Including Non-Federal Donations)	0.00	175000.00		
Federal Election Activity (52 U.S.C. § 30101) (a) Allocated Federal Election Activity (from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00		
Entirely With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	274744.40	007500.05		
Total Federal Disbursements	371741.12	927502.06		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)				
	371741.12	927502.06		

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
I LO	1 01111	JA	(1100.	03/2010	,

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

		-				
(subtr	ract Li	ne 37	from	Line	36)	

						473220.59
		-7			-7	
						1650.00
a la sub-	1	-7	1	1		1000.00
100						
		-			-	471570.59
						44504.40
		7			7	11591.12
1		_			_	42.06
		-7				
						11549.06
a second		-7-			-7-	

1015957.80				
1015957.80	-7		-7	 L.
2650.00				
2030.00	-7		-7	 <u></u>
1013307.80				
1010007.00	- 7		7	 <u></u>
26352.06				
	-7		7	<u></u>
42.06				
	-7		-7	<u></u>
26310.00				

-7

-7-

COLUMN B

Calendar Year-to-Date

Page 5

FOR LINE NUMBER:

PAGE 6 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	ny information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Ini Cassidy, Carter, , , MD, FAAOS Mailing Address 4890 Faulkirk Lane	tial) or Full O		Date of Receipt
	City	State	Zip Code	Transaction ID : 10977653
	Lexington	KY	40515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		85.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	University of Kentucky Res Program	Orth	opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		505.00	1
	Other (specify) v		595.00	1
В.	Full Name of Individual (Last, First, Middle Init Casey, Brett, Edward, , MD,FAAOS	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 6064 Louis XIV St			07 02 2021
	City	State	Zip Code	Transaction ID : 10977850
	New Orleans	LA	70124-2919	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Gulf Coast Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
с.	Full Name of Individual (Last, First, Middle Ini Higgins, Michael, E, , MD, FAAOS		rganization Name	Date of Receipt
	Mailing Address 5236 Rockport Landing			07 / D D / Y Y Y Y 2021
	City	State	Zip Code	Transaction ID : 10977851
	Suffolk	VA	23435	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
			opaedic Surgeon	
Receipt For: Aggregate			Year-to-Date 🔻	
	Ceneral Other (specify)		588.00	1
			-929292	4
s	UBTOTAL of Receipts This Page (optional)			419.00
т	OTAL This Period (last page this line number	only)		

FOR LINE NUMBER:

PAGE 7 OF

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ITE	MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)			
	nformation copied from such Reports and Sta r commercial purposes, other than using the n			son for the purpose of soliciting contributions			
	AME OF COMMITTEE (In Full) Political Action Committee of the	Americ	can Association of Ortho	paedic SurgeonsPAC of AAOS			
A	III Name of Individual (Last, First, Middle Initia Rana, Adam, J, , MD, FAAOS	l) or Full C	Organization Name	Date of Receipt			
	ailing Address 12 Landing Woods Ln	04-4-	Zia Ocala	07 02 2021			
Ci F	ty almouth	State ME	Zip Code 04105-1948	Transaction ID : 10977852 Amount of Each Receipt this Period			
	EC ID number of contributing deral political committee.	С		100.00			
	ame of Employer (for Individual) aine Medical Center		cupation (for Individual) thopaedic Surgeon	Memo Item			
	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00				
	II Name of Individual (Last, First, Middle Initia Smith, Eric, Louis, , MD,FAAOS	l) or Full C	Organization Name	Date of Receipt			
	ailing Address 1573 Beacon Street						
Ci W	ty ′aban	State MA	Zip Code 02468	Transaction ID : 10977853 Amount of Each Receipt this Period			
	EC ID number of contributing deral political committee.	С		84.00			
	ame of Employer (for Individual) oston Medical Clinic		cupation (for Individual) thopaedic Surgeon	Memo Item			
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 588.00				
	III Name of Individual (Last, First, Middle Initia Anderson, Robert, O, , MD, FAAOS		Organization Name	Date of Receipt			
M	ailing Address 9800 55th St N			M M / D D / Y Y Y Y 07 03 2021			
Ci L	ty ake Elmo	State MN	Zip Code 55042	Transaction ID : 10978175 Amount of Each Receipt this Period			
	EC ID number of contributing deral political committee.	С		250.00			
S	ame of Employer (for Individual) ummit Orthopedics		cupation (for Individual) hopaedic Surgeon	Memo Item			
	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00				
SUE	STOTAL of Receipts This Page (optional)		•	434.00			
тот	AL This Period (last page this line number on	ıly)	•••••				

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 55' (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any the name and address of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
/		nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Stokesbary, Steven, J, , MD,FAAOS Mailing Address 627 Arrowhead Ct	Initial) or Full Organization Name	Date of Receipt
City Dakota Dunes	State Zip Code SD 57049	07 04 2021 Transaction ID : 10978176
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) CNOS	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	
Full Name of Individual (Last, First, Middle Black, David, Albritton, , MD,PhD Mailing Address 12112 Fairway Drive	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	07 04 2021
Little Rock	AR 72212	Transaction ID : 10978177 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Univ of Arkansas	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	588.00	
Full Name of Individual (Last, First, Middle Prohaska, Matthew, G, , MD,FA		Date of Receipt
Mailing Address 69 Griggs Hill Road		07 04 2021
City Danville	StateZip CodeVT05828	Transaction ID : 10978178 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) NVRH Orthopaedic Clinic Receipt For:	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate Year-to-Date ▼ 252.00	
SUBTOTAL of Receipts This Page (optional)		▶ 252.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER:

PAGE 9 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	of the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Mide Lemos, Mark, J, , MD,FAAOS Mailing Address 1164 Ocean Blvd	dle Initial) or Full C	Organization Name	Date of Receipt
City	State	Zip Code	Transaction ID : 10978180
Rye	NH	03870	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Lahey Clinic	Orth	nopaedic Surgeon	-
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		500.00]
Full Name of Individual (Last, First, Mide B. Lintecum, Neal, D, , MD, FAAC		Organization Name	Date of Receipt
Mailing Address 789 N 1500 Road	-		07 05 2021
City	State	Zip Code	Transaction ID : 10978181
Lawrence	KS	66049-9194	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer (for Individual) Self Employed		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1400.00]
Full Name of Individual (Last, First, Mide C. Ellis, Henry, Bone, , Jr, MD,F		Organization Name	Date of Receipt
Mailing Address 2945 Stanford Ave			07 / D D / Y Y Y Y 05 / 2021
City	State	Zip Code	Transaction ID : 10978182
Dallas	ТХ	75225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individual) Texas Scottish Rite Sports Medicine		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Other (specify)		588.00]
SUBTOTAL of Receipts This Page (option	al)		784.00
TOTAL This Period (last page this line nu	mber only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10 OF

ITEMIZED RECEIPTS	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may not be sold or used by any pont and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Keller, Julie, M, , MD, FAAOS Mailing Address 113 W Essex Street Suite 201 City Maywood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Restoration Orthopaedics Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code NJ 07607 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00 750.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi B. Schmale, Gregory, A, , MD, FAAOS Mailing Address 6515 126th Ave NE City Kirkland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Seattle Children's Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code WA 98033 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi C. Burke, Charles, J, , III, MD, F Mailing Address 200 Delafield Rd Ste 4010 City Pittsburgh FEC ID number of contributing federal political committee. Name of Employer (for Individual) UPMC Receipt For: Primary General Other (specify)	al) or Full Organization Name State Zip Code PA 15215-3235 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number o		418.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 55 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Gomez, Gregory, , , MD	itial) or Full Organization Name	Date of Receipt
Mailing Address 6201 Moonfield Dr	State Zip Code	
Huntington Beach	CA 92648	Transaction ID : 10979068 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) Emanate Health	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00]
Full Name of Individual (Last, First, Middle In B. Pushkin, Gary, W, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 2506 St Paul Street		07 06 2021
City Baltimore	State Zip Code MD 21218	Transaction ID : 10979069
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) Cohen & Pushkin MD PA	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle In Fleeter, Thomas, B, , MD,MBA,F.		Date of Receipt
Mailing Address 1860 Town Center Dr Ste 300		07 / D D / Y Y Y Y Y 06 / 2021
City Reston	StateZip CodeVA20190	Transaction ID : 10980623 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) Town Center Orthopaedic Assoc	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		800.00
TOTAL This Period (last page this line number	^r only)	

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FOR LINE NUMBER:

PAGE 12 OF

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▼ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Green, Daniel, William, , MD,FAAOS Mailing Address 535 E 70th St	al) or Full Or	ganization Name	Date of Receipt
	City New York	State NY	Zip Code 10021	Transaction ID : 10980626 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) Hosp for Special Surgery Receipt For:	Orth	pation (for Individual) opaedic Surgeon Year-to-Date ▼	Memo Item
	Other (specify) ▼		1225.00]
в.	Full Name of Individual (Last, First, Middle Initia Mosley, Emmett, Wayne, , MD,FAAC		ganization Name	Date of Receipt
	Mailing Address 220 Thompson Pl			07 07 2021
	City Roswell	State GA	Zip Code 30075-3522	Transaction ID : 10980629 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) ASPIRUS		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 588.00]
С.	Full Name of Individual (Last, First, Middle Initia Kiner, Dirk, W, , MD,FAAOS	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 449 Canyon Springs Dr			07 07 Y Y Y Y 2021
	City Hixson	State TN	Zip Code 37343-2387	Transaction ID : 10980630 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Southern Orthopaedic Trauma Surgeons Receipt For:	Ortho	pation (for Individual) ppaedic Surgeon	Memo Item
	Primary General Other (specify)	Aygregate	Year-to-Date ▼ 588.00]
s	UBTOTAL of Receipts This Page (optional)			343.00
Т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)		Lise separate schedule(s)	FOR LINE NUMBER: PAGE 13 OF 551	
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)	
		Detailed Summary Page	* 11a 11b 11c 12 13 14 15 16 17	
			person for the purpose of soliciting contributions	
or for commercial purposes, other than using th	ie name and a	ddress of any political committe	ee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne Americ	an Association of Orth	nopaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Ir Gallant, Gregory, G, , MD,MBA,FAA	nitial) or Full C	organization Name	Date of Receipt	
Mailing Address 3588 Wellsford Lane			07 07 / Y Y Y Y 2021	
City	State PA	Zip Code 18902	Transaction ID : 10980631	
Doylestown	FA	18902	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		83.33	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Rothman Institute	Orth	nopaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date V		
Other (specify) V		416.65		
			-	
Full Name of Individual (Last, First, Middle Ir B. Szczech, Bartlomiej, , , MD, FAAO		organization Name	Date of Receipt	
Mailing Address 89 Intervale Way			07 08 2021	
City	State	Zip Code	Transaction ID : 10980844	
Lake Placid	NY	12946	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		100.00	
Name of Employer (for Individual) St Joseph's Hospital Med Ctr		upation (for Individual) hopaedic Surgeon	Memo Item	
Receipt For:	Aggregate	Year-to-Date V		
Primary General Other (specify) ▼		, 700.00		
Full Name of Individual (Last, First, Middle Ir C. Goldberg, Steven, Scott, , MD,FA		organization Name	Date of Receipt	
Mailing Address 5867 Whisperwood Ct			07 08 2021	
City	State	Zip Code	Transaction ID : 10980845	
Naples	FL	34110	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		1000.00	
Name of Employer (for Individual) Physicians Regional Medical Center - P		upation (for Individual) Iopaedic Surgeon	Memo Item	
Receipt For:	1	Year-to-Date V	—	
Primary General	, .99109410			
Other (specify)		1500.00		
SUBTOTAL of Receipts This Page (optional)			1183.33	

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 a mark
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Mejia, Alfonso, , , MD,MPH,FAA Mailing Address 5332 South Shore Drive City Chicago FEC ID number of contributing federal political committee. Name of Employer (for Individual) Illinois Association of Orthopedic Sur Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code IL 60615 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1092.00 1092.00	Date of Receipt
B. Full Name of Individual (Last, First, Middle Ir B. Clain, Michael, R, , MD, FAAOS Mailing Address 9 Indian Head Road City Riverside	State Zip Code CT 06878	Date of Receipt 07 09 2021 Transaction ID : 10981295
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Neurosurgery Specialists Receipt For:	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Ir C. Matson, Paul, C, , MD,FAAOS,F Mailing Address 1431 Premier Drive		Date of Receipt
City Mankato FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State MN Zip Code 56001 C Occupation (for Individual)	Transaction ID : 10981476 Amount of Each Receipt this Period 500.00 Memo Item
Orthopedic and Fracture Clinic Receipt For: Primary General Other (specify)	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		668.00

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FOR LINE NUMBER: PAGE 15 OF 551

ITEMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political co	y any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Political Action Committee of	the American Association of	Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Kelly, James, D, , II, MD,FAA	Initial) or Full Organization Name	Date of Receipt
Mailing Address 3838 California Street Suite 715		07 11 2021
City San Francisco	StateZip CodeCA94118	Transaction ID : 10981480 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) California Pacific Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750	.00
Full Name of Individual (Last, First, Middle B. Nahigian, Kevin, K, , MD, FAAOS Mailing Address 85 Red Bay Rd		Date of Receipt
City	State Zip Code	07 11 2021 Transaction ID : 10981481
Elgin	SC 29045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Carolina Shoulder & Knee Specialists	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	9.00
Full Name of Individual (Last, First, Middle C. Bernard, Johnathan, , , MD, MF		Date of Receipt
Mailing Address 21549 Glebe View Dr		07 / D D / Y Y Y Y 2021
City Broadlands	StateZip CodeVA20148	Transaction ID : 10981556 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) National Sports Medicine Institute	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 588	.00
SUBTOTAL of Receipts This Page (optional)		418.00

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

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FOR LINE NUMBER:

PAGE 16 OF

551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and St or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Marinello, Patrick, Gaetano, , MD, FAAO Mailing Address 43 Bradhaven Rd City Slingerlands FEC ID number of contributing federal political committee. Name of Employer (for Individual) The Bone and Joint Center Receipt For: Primary General Other (specify)	State NY C Occu Orth	rganization Name Zip Code 12159 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 688.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi B. Dodds, Julie, A, , MD,FAAOS Mailing Address 2603 90th Ave	tial) or Full Or	rganization Name	Date of Receipt
City Lone Rock FEC ID number of contributing federal political committee. Name of Employer (for Individual) Michigan State University Receipt For: Primary General Other (specify) ▼	Orth	Zip Code 50559	Transaction ID : 10981558 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Initi C. Braaton, Paul, J, , MD,FAAOS Mailing Address 1335 Coffee Rd Ste 100 City Modesto FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoMed Receipt For: Primary General Other (specify)	CA CA Occu Ortho	rganization Name Zip Code 95355 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 588.00	Date of Receipt 07 12 2021 Transaction ID : 10981559 Amount of Each Receipt this Period 84.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of			252.00

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 OF 551
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a	nd Statements ma	not be sold or used by any i	person for the purpose of soliciting contributions
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Political Action Committee of	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl	e Initial) or Full C	rganization Name	
A. Espinoza, Luis, M, , MD, FAAOS	,		Date of Receipt
Mailing Address 5 Savannah Ridge Lane			
City	State	Zip Code	07 12 2021
Metairie	LA	70001	Transaction ID : 10981560 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	С		84.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Orthopaedic Center for Sports Medicine		nopaedic Surgeon	
Receipt For:		Year-to-Date ▼	—
Primary General	33 13 11		
Other (specify) ▼		588.00	
Full Name of Individual (Last, First, Middl	e Initial) or Full O	roanization Name	
B. John, Thomas, K, , MD,FAAOS		rganization Name	Date of Receipt
Mailing Address 522 Eastbrook Rd			M = M / D = D / Y = Y = Y
		7.0.1	07 12 2021
City Ridgewood	State NJ	Zip Code 07450-2110	Transaction ID : 10981561
		01400 2110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
News of Freedom (for to dividual)		un ations (fam ha dividual)	Memo Item
Name of Employer (for Individual) Active Orthopedics and Sports Medicine			
Receipt For:		Year-to-Date ▼	
Primary General	Aggregate		
Other (specify) v		, 588.00	
Full Name of Individual (Last, First, Middl	o Initial) or Full C	ragnization Namo	
c. Mansfield, David, J, , MD,FAA		iganization Name	Date of Receipt
Mailing Address 5019 Montoya Rd			M = M / D = D / Y = Y = Y
0:5	Otata	Zin Code	
City El Paso	State TX	Zip Code 79922	Transaction ID : 10981562 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.		84.00	
Name of Employer (for Individual)	0	upation (for Individual)	Memo Item
El Paso Orthopaedic Surgery Group		opaedic Surgeon	
Receipt For:	I	Year-to-Date ▼	—
Primary General			
Other (specify)		588.00	
[
SUBTOTAL of Receipts This Page (optiona	D.		252.00

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Ortho	ppaedic SurgeonsPAC of AAOS
✓ Full Name of Individual (Last, First, Middle A. Krueger, Chad, A, , MD,FAAOS Mailing Address 705 Kyle Dr City Ambler FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify) ▼	e Initial) or Full Organization Name State Zip Code PA 19002 C Occupation (for Individual) Othopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Date of Receipt 07 13 2021 Transaction ID : 10985247 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle B. James, Jeremy, R, , MD,FAAOS Mailing Address 7 Briar Hollow St	Initial) or Full Organization Name	Date of Receipt
City Covington FEC ID number of contributing federal political committee. Name of Employer (for Individual) DISC of Louisiana Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code LA 70433-4511 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 700.00	Transaction ID : 10985248 Amount of Each Receipt this Period 100.00 Memo Item
Full Name of Individual (Last, First, Middle C. Courtney, Paul, Maxwell, , MD, Mailing Address 902 S Front St City Philadelphia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute		Date of Receipt 07 14 2021 Transaction ID : 10985411 Amount of Each Receipt this Period 84.00 Memo Item
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 588.00	268.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 OF 551
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Beports and	Statements ma	l av not be sold or used by any p	erson for the purpose of soliciting contributions
or for commercial purposes, other than using t			
NAME OF COMMITTEE (In Full)			
Political Action Committee of t	he America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Service, Benjamin, , , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 8710 Crestgate Circle			07 15 / Y Y Y Y 2021
City	State	Zip Code	Transaction ID : 10985925
Orlando	FL	32819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
Orlando Health		opaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	33 - 3		1
Other (specify) v		336.00	
Full Name of Individual (Last, First, Middle 3. Jamison, James, P, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7092 Killdeer Drive			07 16 2021
City	State	Zip Code	Transaction ID : 10987796
Canfield	ОН	44406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Youngstown Orthopaedic Associates, Ltd		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		750.00]
Full Name of Individual (Last, First, Middle C. Smith, Jeffrey, Mark, , MD,CPC,		rganization Name	Date of Receipt
Mailing Address 5865 Friars Rd	1700		07 16 2021
Unit 3310	State	Zip Code	Transaction ID : 10987797
San Diego	CA	92110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250.00	
Name of Employer (for Individual) UNITE Orthopaedics Foundation		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 750.00]
SUBTOTAL of Receipts This Page (optional).			584.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 20 OF 551 (check only one)
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	I Statements may not be sold or used by any pe the name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee of t	the American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Grimm, Matthew, R, , MD, FAAOS	Initial) or Full Organization Name	Date of Receipt
Mailing Address 920 Avenue B	State Zip Code	07 16 2021 Transaction ID : 10987798
Marrero	LA 70072	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Jefferson Orthopaedic Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	
Full Name of Individual (Last, First, Middle Battaglia, Michael, Jacob, , MD,FA		Date of Receipt
Mailing Address 1641 Windermere Dr E		07 16 2021
City Seattle	State Zip Code WA 98112-3737	Transaction ID : 10987799 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) Bellevue Bone & Joint Physicians	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	750.00	
Full Name of Individual (Last, First, Middle McCulloch, Patrick, T, , MD, FA		Date of Receipt
Mailing Address 307 Buckingham Drive		07 17 2021
City Venetia	StateZip CodePA15367	Transaction ID : 10987943 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Advanced Ortho & Rehab	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 588.00	
SUBTOTAL of Receipts This Page (optional).	····· •	418.00
TOTAL This Period (last page this line number	er only) 🕨	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Goldberg, Steven, Scott, , MD,FAAOS		rganization Name	Date of Receipt
Mailing Address 5867 Whisperwood Ct			07 17 2021
City Naples	State FL	Zip Code 34110	Transaction ID : 10987944 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Physicians Regional Medical Center - P Receipt For:		nopaedic Surgeon	
Primary General	Aggregate	Year-to-Date ▼	1
Other (specify) v		1750.00	
Full Name of Individual (Last, First, Middle 3. Kwok, Moody, , , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 708 Presidential Dr			07 17 2021
City	State	Zip Code	
Horsham	PA	19044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Rothman Institute		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		750.00]
Full Name of Individual (Last, First, Middle C. Greene, Robert, Neil, , MD,FAA		rganization Name	Date of Receipt
Mailing Address 1211 N 16th Ave			07 17 2021
City	State	Zip Code	Transaction ID : 10987946
Yakima FEC ID number of contributing	WA	98902	Amount of Each Receipt this Period
federal political committee.	C		84.00
Name of Employer (for Individual) Orthopedics Northwest PLLC		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00]
SUBTOTAL of Receipts This Page (optional).			584.00

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

FOR LINE NUMBER: PAGE 22 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only 11a 13	/ one) 11b 14	11c 15	12 16	17
	y information copied from such Reports and St for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	opaedic S	urgeons	SPA	C of AA	OS
Α.	Full Name of Individual (Last, First, Middle Initi Coates, Kevin, E, , MD, MBA, F	al) or Full O	rganization Name	Date of	Receipt			
	Mailing Address 5651 Goldenberry Ct			07	/ D D 17	/ Y	2021	Y
	City Winston Salem	State NC	Zip Code 27106		action ID : ² of Each Re			
	FEC ID number of contributing federal political committee.	С				-	250.0	0
	Name of Employer (for Individual) Wake Forest Baptist Medical Center		upation (for Individual) nopaedic Surgeon	Me	emo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00					
B.	Full Name of Individual (Last, First, Middle Initi Olsen, Adam, S, , MD	al) or Full O	rganization Name	Date of	Receipt			
	Mailing Address 3686 Washington Street Apt 2520 City	State	Zip Code	07	/ D D D 17	/ Y	2021	Y
	Boston	MA	02130		action ID : 1 of Each Re			
	FEC ID number of contributing federal political committee.	С					42.0	0
	Name of Employer (for Individual) Brigham and Women's Hospital		upation (for Individual) nopaedic Surgeon	Me	emo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 294.00					
с.	Full Name of Individual (Last, First, Middle Initi Winston, Jonathan, , , MD	al) or Full O	rganization Name	Date of	Receipt			
	Mailing Address 4534 Shadowbrook Court			07	/ D D 18	/ Y	2021	Y
	City Bettendorf	State IA	Zip Code 52722		of Each Re		-	
	FEC ID number of contributing federal political committee.	С				,	84.0	0
	Name of Employer (for Individual) ORA Orthopaedics		upation (for Individual) opaedic Surgeon	Me	emo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00					
s	UBTOTAL of Receipts This Page (optional)				. , .	,	376.0	0
т	OTAL This Period (last page this line number o	nly)						

SCHEDULE A (FEC Form 3X) [Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Carnduff, Mary, Foley, , MD,MBA,FA		ganization Name	Date of Receipt
Mailing Address 1909 Rhode Island Ave			07 18 2021
City McLean	State VA	Zip Code 22101	Transaction ID : 10987958 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item
Self Employed Receipt For: Primary General Other (specify) ▼		opaedic Surgeon Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle 3. Tyndall, William, A, , MD,FAAOS	Initial) or Full O	ganization Name	Date of Receipt
Mailing Address 123 Brittany Ln			07 19 2021
City Hollidaysburg	State PA	Zip Code 16648	Transaction ID : 10987979
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) University Orthopedics		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00]
Full Name of Individual (Last, First, Middle C. Woodcock, Jessica, A, , MD,FA		ganization Name	Date of Receipt
Mailing Address 738 Newman Rd			07 19 2021
City New Bern	State NC	Zip Code 28562	Transaction ID : 10987980 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Carolina Orthopedics and Sports Medici		pation (for Individual) ppaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00]
SUBTOTAL of Receipts This Page (optional)			418.00

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

Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
\setminus	NAME OF COMMITTEE (In Full)	Amoric	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
	Folitical Action Committee of the			paedic SurgeonsFAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Cooper, Scott, Snow, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 405 NW A St 1101 Horsebarn Road			M M / D D / Y Y Y Y 07 19 2021
	City	State	Zip Code	Transaction ID : 10987981
	Bentonville	AR	72712	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	Mercy Clinic Orthopedics		nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	33 - 3		
	Other (specify)	L	588.00	
B	Full Name of Individual (Last, First, Middle Initi Urband, Lindsey, , , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
υ.	Mailing Address 15066 Almond Orchard Lane Suite 403			07 06 2021
	City	State	Zip Code	Transaction ID : 10988527
	San Diego	CA	92131	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) San Diego Hand Specialists		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		588.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initi Delanois, Ronald, Emilio, , MD,FA		rganization Name	Date of Receipt
	Mailing Address 6 Brookfield Garth			07 06 Y Y Y Y 2021
	City	State	Zip Code	Transaction ID : 10988529
	Lutherville	MD	21093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Lifebridge		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o		· ·	418.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Α. Mailing Address 9207 Duncaster Ct 1 07 06 2021 City Zip Code State Transaction ID: 10988530 TN Brentwood 37027 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Vanderbilt Univ-Vanderbilt Ortho Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 588.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hettrich, Carolyn, , , MD, MPH, FAA Date of Receipt Mailing Address 28A Miller Hill Rd 07 2021 06 City State Zip Code Transaction ID : 10988534 MA Dover 02030-2332 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Brigham and Women's Hospital Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 588.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sheehan, John, P., MD, FAAOS Date of Receipt Mailing Address 6621 Cuming St М M 07 06 2021 City State Zip Code Transaction ID : 10988536 NE Omaha 68132 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Boys Town Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 588.00 Other (specify) 252.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and St		ay not be sold or used by any p	
or	for commercial purposes, other than using the	name and a	address of any political committee	e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Chutkan, Norman, Barrington, , MD,FAA		Organization Name	Date of Receipt
	Mailing Address 1 E Lexington Ave			07 / D D / Y Y Y Y Y 08 2021
	City Phoenix	State AZ	Zip Code 85012	Transaction ID : 10988538 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) The CORE Institute		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00]
_	Full Name of Individual (Last, First, Middle Initi		Drganization Name	
в.	More, Robert, Cameron, , MD, FAAC Mailing Address 8100 Wescott Drive Suite 101			Date of Receipt
	City	State NJ	Zip Code 08822	Transaction ID : 10988539
	Flemington FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 84.00
	Name of Employer (for Individual) MidJersey Orthopaedics		cupation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 588.00	
	Full Name of Individual (Last, First, Middle Initi Abboud, Joseph, A, , MD,FAAOS	al) or Full O	Organization Name	Date of Receipt
•.	Mailing Address 726 Conestoga Rd			07 09 2021
	City Bryn Mawr	State PA	Zip Code 19010	Transaction ID : 10988541 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer (for Individual) Rothman Institute Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
s	UBTOTAL of Receipts This Page (optional)			1168.00
т	OTAL This Period (last page this line number c	only)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	I Statements may not be sold or used by any po- the name and address of any political committee	
Political Action Committee of t		ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Bosco, Joseph, A, , III, MD,FA	Initial) or Full Organization Name	Date of Receipt
Mailing Address 54 Bleecker St Apt 6A City	State Zip Code	07 12 2021 Transaction ID : 10988543
New York	NY 10012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) NYU Hospital for Joint Diseases	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Beverley, Laurel, A, , MD,MPH,FA		Date of Receipt
Mailing Address 701 W Lakeside Ave #806		07 / D D / Y Y Y Y 2021
City Cleveland	State Zip Code OH 44113	Transaction ID : 10988544 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer (for Individual) MetroHealth	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Ferkel, Richard, D, , MD,FAAOS		Date of Receipt
Mailing Address 6815 Noble Ave		07 / D D / Y Y Y Y 2021
City Van Nuys	StateZip CodeCA91405-6515	Transaction ID : 10988545 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) Southern California Ortho	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional).	•••••••••••••••••••••••••••••••••••••••	2250.00
TOTAL This Period (last page this line number	er only)	

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 OF 551 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
		hopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Samson, Marc, Arnold, , MD,FAAOS Mailing Address 1020 Montrose Ave	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	07 12 2021 Transaction ID : 10988546
South Pasadena FEC ID number of contributing federal political committee.	CA 91030	Amount of Each Receipt this Period
Name of Employer (for Individual) Los Angeles Orthopaedic Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 512.82	
Full Name of Individual (Last, First, Middle In Cimino, William, Gerard, , MD,FAA		Date of Receipt
Mailing Address 52 Beach Road Suite 207 City	State Zip Code	07 12 2021 Transaction ID : 10988547
Fairfield	CT 06824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Beach Road Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	
Full Name of Individual (Last, First, Middle II Parsley, Brian, S, , MD,FAAOS,F		Date of Receipt
Mailing Address 302 Pine Shadows Dr Suite 2400		07 13 2021
City Houston	StateZip CodeTX77056	Transaction ID : 10988548 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) UT Health Physicians	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 588.00	
SUBTOTAL of Receipts This Page (optional)		680.82
TOTAL This Period (last page this line numbe	r only)	

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 29 OF 551
	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Political Action Committee of th		
Full Name of Individual (Last, First, Middle Ir A. Damalas, Dino, , , MBA Mailing Address 9400 W Higgins Rd City Rosemont FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State Zip Code IL 60018-4975 C Occupation (for Individual)	Date of Receipt 07 13 2021 Transaction ID : 10988549 Amount of Each Receipt this Period 84.00 Memo Item
AAOS Receipt For: Primary General Other (specify) ▼	Chief Operating Officer Aggregate Year-to-Date ▼ 588.00	
Full Name of Individual (Last, First, Middle Ir B. DiCaprio, Matthew, R, , MD,FAAO Mailing Address 2028 Dobie Lane City	S State Zip Code	Date of Receipt 07 / 14 / 2021 Transaction ID : 10988550
Schenectady FEC ID number of contributing federal political committee. Name of Employer (for Individual) Albany Medical College Receipt For: Primary General Other (specify) ▼	NY 12303 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Amount of Each Receipt this Period
Full Name of Individual (Last, First, Middle Ir Roberson, Rowland, M, , MD, FA Mailing Address 641 N Lamar Blvd City Oxford FEC ID number of contributing federal political committee. Name of Employer (for Individual) Specialty Orthopedic Group Receipt For: Primary General Other (specify)		Date of Receipt 07 / 14 / 2021 Transaction ID : 10988551 Amount of Each Receipt this Period 84.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	r only)	418.00

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only	/ one)	L		
			for each category of the Detailed Summary Page	× 11a 13	11b	11c 15	12	17
Any info	ormation copied from such Reports and Sta	itements may	y not be sold or used by any pe ddress of any political committee	rson for the	purpose of	solicitin	g contribu	utions
	E OF COMMITTEE (In Full)							
Pol	litical Action Committee of the	America	an Association of Ortho	paedic S	urgeon	sPA	C of A	AOS
A. Lise	Name of Individual (Last, First, Middle Initia ella, Jordan, Mills, , MD, FAAOS	al) or Full Or	ganization Name	Date of	Receipt			
	ng Address 14 Turner Lane			07	/ D 14	D / Y	2021	Y
City Loud	donville	State NY	Zip Code 12211		action ID : of Each F			k
	ID number of contributing al political committee.	С					84	.00
Capi	e of Employer (for Individual) tal Region Orthopaedic Group		ipation (for Individual) opaedic Surgeon		emo Item			
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00					
	Name of Individual (Last, First, Middle Initianaros, George, , , MD,FAAOS	al) or Full Or	ganization Name	Date of	Receipt			
	ng Address 16 Shaker Bay Rd			07	/ D 14	р / Y	2021	Y
City		State	Zip Code	Trans	action ID :	1098855	i3	
Lath	am	NY	12110	Amount	of Each F	Receipt tl	nis Perioc	1
	ID number of contributing ral political committee.	С					84	.00
Capit	e of Employer (for Individual) tal Region Orthopaedic Group		ipation (for Individual) opaedic Surgeon	M	emo Item			
Rece	Pipt For:	Aggregate `	Year-to-Date 🔻					
	Primary General Other (specify) ▼		588.00					
	Name of Individual (Last, First, Middle Initia ocks, Gregory, William, , MD,FA		ganization Name	Date of	Receipt			
	ng Address 5207 Valerie	1 -		07	/ D 20		2021	Ŷ
City Bella	aire	State TX	Zip Code 77401		action ID :			
FEC	ID number of contributing ral political committee.	С			of Each F		nis Perioc	
Texa	e of Employer (for Individual) as Orthopedic Hospital		pation (for Individual) opaedic Surgeon		emo Item			
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00					
SUBTO	DTAL of Receipts This Page (optional)		••••••		. , .		1168.	.00
TOTAL	. This Period (last page this line number o	nly)				-		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 OF 551
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	
			person for the purpose of soliciting contributions
	the name and a	ddress of any political committe	ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	he Americ	an Association of Orth	nopaedic SurgeonsPAC of AAOS
			lopaedie Odigeons-1 AC OLAACO
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name	
A. Zoltan, Donald, J, , MD, FAAOS			Date of Receipt
Mailing Address 1081 East Circle Dr			07 20 2021
City	State	Zip Code	Transaction ID : 10989464
Milwaukee	WI	53217	Amount of Each Receipt this Period
FEC ID number of contributing	С		500.00
federal political committee.	U		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Midwest Orthopedic Specialty Hospital	Orth	nopaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) V		500.00	
		-ge	-
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name	
B. Chapman, Cary, B, , MD, FAAOS			Date of Receipt
Mailing Address 10903 Blue Palm Street			07 21 2021
City	State	Zip Code	Transaction ID : 10989477
Plantation	FL	33324	Amount of Each Receipt this Period
FEC ID number of contributing	С		84.00
federal political committee.	0		
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Miami Orthopedics & Sports Medicine In Receipt For:		nopaedic Surgeon	
Primary General	Aggregate	Year-to-Date ▼	_
Other (specify) V		588.00	
Full Name of Individual (Last, First, Middle C. Stoeckl, Andrew, , , MD, FAAOS		rganization Name	Date of Receipt
Mailing Address 90 Fairlawn Dr	,		
		1	07 21 2021
City	State NY	Zip Code 14226	Transaction ID : 10989478
Amherst		14220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.00
			Memo Item
Name of Employer (for Individual) Excelsior Orthopedics		upation (for Individual) opaedic Surgeon	
Receipt For:		Year-to-Date V	
Primary General	Aggregate		
Other (specify)		581.00	
I			
SUBTOTAL of Receipts This Page (optional).			667.00
CODICIAL OF HECCIPIS THIS Fage (Optional).			

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

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 32 OF 551 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the		
/		opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Jones, Lowry, , , Jr, MD,FAA Mailing Address 2609 W 65th St	nitial) or Full Organization Name	Date of Receipt
City Mission Hills	State Zip Code KS 66208	07 21 2021 Transaction ID : 10989487 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) Kansas City Orthopaedic Institute Receipt For: Primary General	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Memo Item
Conter (specify) ▼ Full Name of Individual (Last, First, Middle In	3000.00 nitial) or Full Organization Name]
3. Zilberfarb, Jeffrey, L, , MD,FAAOS Mailing Address 1101 Beacon Street Suite 5W		Date of Receipt
City Brookline	State Zip Code MA 02446	Transaction ID : 10989603 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) Meeks and Zilberfarb Orthopedics Receipt For:	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	1
Full Name of Individual (Last, First, Middle In Bruggeman, Adam, J, , MD,FAA		Date of Receipt
Mailing Address 37 La Escalera	State Zip Code	07 21 2021 Transaction ID : 10989653
San Antonio FEC ID number of contributing	TX 78261	Amount of Each Receipt this Period
federal political committee.		2000.00
Name of Employer (for Individual) Self Employed Receipt For:	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	
Primary General Other (specify)	2000.00	1
SUBTOTAL of Receipts This Page (optional)		5500.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s)

FOR LINE NUMBER:

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11	EIVILED RECEIPIO		for each category of the Detailed Summary Page			11b	11c	12 16	17
	ny information copied from such Reports and S for commercial purposes, other than using the					ourpose of s		ontributi	ons
	NAME OF COMMITTEE (In Full)								
	Political Action Committee of the	e America	an Association of	Orthop	baedic S	urgeons	PAC	of AA	OS
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sherbondy, Paul, Strawn, , MD, FAAOS				Date of	Receipt			
	Mailing Address 507 Beaumont Dr				M M / D D / Y Y Y Y 07 22 2021				
	City State College	State PA	Zip Code 16801-8311			action ID : 1 of Each Re		Period	
	FEC ID number of contributing federal political committee.	С						84.0	0
	Name of Employer (for Individual) Penn State Health		upation (for Individual) hopaedic Surgeon		Memo Item				
	Receipt For:	Aggregate	Year-to-Date V		1				
	Other (specify) ▼		588.	.00					
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kirol, Bernard, G, , MD, FAAOS				Date of	Receipt			
	Mailing Address 338 Turnwall Ln				07	/ D D D 22		2021	Y
	City	State SC	Zip Code			ction ID : 1			
	Elgin	30	29045-9507		Amount	of Each Re	ceipt this	Period	
	FEC ID number of contributing federal political committee.	C		75.00					
	Name of Employer (for Individual) Midlands Orthopaedics, PA		upation (for Individual) hopaedic Surgeon		Memo Item				
	Receipt For:	Aggregate Year-to-Date ▼							
	Other (specify)	525.00							
С.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Veitch, Andrew, John, , MD,FAAOS				Date of	Receipt			
	Mailing Address 13416 Desert Zinnia Ct NE				м м 07	/ D D 22		2021	Y
	City	State NM	Zip Code			action ID : 1			
	Albuquerque		87111		Amount	of Each Re	ceipt this	Period	
	FEC ID number of contributing federal political committee.	C						84.0	0
	Name of Employer (for Individual) University of New Mexico, Dept of Orth	Occupation (for Individual) Orthopaedic Surgeon			Me	mo Item			
	Receipt For: Primary General	Aggregate Year-to-Date ▼							
	Other (specify)		588.						
s	UBTOTAL of Receipts This Page (optional)			····· ►		, , , , , , , , , , , , , , , , , , ,	, , ,	243.0	0

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini A. Hire, Justin, M, , MD,FAAOS Mailing Address 3100 Crestwood Lane City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Dwight David Eisenhower Army Medical C Receipt For: Primary General Other (specify) ▼	State Zip Code MO 65203 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 294.00 2	Date of Receipt 07 22 2021 Transaction ID : 10990725 Amount of Each Receipt this Period 42.00 Memo Item
Full Name of Individual (Last, First, Middle Ini B. Plancher, Kevin, D, , MD,MPH,FAA Mailing Address 21 Pheasant Lane City Greenwich FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ortho Foundation For Active Lifestyles Receipt For: Primary General Other (specify)		Date of Receipt 07 22 2021 Transaction ID : 10990941 Amount of Each Receipt this Period 5000.00 Memo Item
Full Name of Individual (Last, First, Middle Ini C. Kofoed, John, Charles, , MD, FAA Mailing Address 2619 Seminole Ct City Fairfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Sutter Medical Group Receipt For: Primary General Other (specify)		Date of Receipt 07 20 2021 Transaction ID : 10993657 Amount of Each Receipt this Period 89.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	· · · · · · · · · · · · · · · · · · ·	5131.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Ose separate schedule(s) for each category of the Detailed Summary Page	(check only 11a 13		1c 12 5 16 17			
	information copied from such Reports and Sta or commercial purposes, other than using the r					citing contributions			
	IAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	opaedic S	SurgeonsF	PAC of AAOS			
A	ull Name of Individual (Last, First, Middle Initia Russell, George, V, , Jr, MD,MBA failing Address 244 North Natchez Drive	l) or Full Or	rganization Name		Date of Receipt				
)ity Madison	State MS	Zip Code 39110	Trans	action ID : 1099	93658			
	EC ID number of contributing ederal political committee.	С				90.00			
ι	lame of Employer (for Individual) Iniv of Mississippi Med Ctr		upation (for Individual) opaedic Surgeon		emo Item				
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 630.00						
B	ull Name of Individual (Last, First, Middle Initia Kamps, Bryan, Scott, , MD,FAAOS failing Address 3741 Monarch Dr NE	Date of	Receipt	YYYYY					
ō	Dity Grand Rapids	State Zip Code MI 49525			07 20 2021 Transaction ID : 10993659 Amount of Each Receipt this Period				
F	EC ID number of contributing ederal political committee.	C				250.00			
	lame of Employer (for Individual) pectrum Health Medical Group	Occupation (for Individual) Orthopaedic Surgeon			emo Item				
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00						
	ull Name of Individual (Last, First, Middle Initia Bernholt, David, , , MD	Date of	Receipt						
_	failing Address 3126 Chapel Woods Cv	07	/ D D / 20	Y Y Y Y Y 2021					
_	Sity Germantown	State TN	Zip Code 38139		action ID : 109				
	EC ID number of contributing deral political committee.					41.67			
(lame of Employer (for Individual) Campbell Clinic Receipt For:	Occupation (for Individual) Orthopaedic Surgeon			emo Item				
Г	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69						
su	BTOTAL of Receipts This Page (optional)		•			381.67			
то	TAL This Period (last page this line number or	וy)	••••••						

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS				
Α.	Full Name of Individual (Last, First, Middle Init Bettin, Clayton, Charles, , MD,FAAOS	Date of Receipt						
	Mailing Address 5047 Shady Hall Ct	07 / D D / Y Y Y Y Y 20 2021						
	City Memphis	State TN	Zip Code 38117	Transaction ID : 10993661 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		41.67				
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69]				
в.	Full Name of Individual (Last, First, Middle Init Calandruccio, James, H, , MD, FAA Mailing Address Campbell Clinic	Date of Receipt						
	1400 S Germantown Rd	State	Zip Code	07 20 2021 Transaction ID : 10993662				
	Germantown	TN	38138-2205	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		41.67				
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) hopaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69]				
с.	Full Name of Individual (Last, First, Middle Init Crockarell, John, R, , Jr, MD, FA	Date of Receipt						
	Mailing Address 1458 W Poplar Ave Ste 100	07 / D D / Y Y Y Y 20 / 2021						
	Collierville	State TN	Zip Code 38017	Transaction ID : 10993663 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		41.67				
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) Iopaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69]				
⊢	UBTOTAL of Receipts This Page (optional)			125.01				
ΙĨ	OTAL This Period (last page this line number of	only)	•••••••					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 OF 551
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full)			ppaedic SurgeonsPAC of AAOS
	Full Name of Individual (Last, First, Middle Initia			
Α.	Grear, Benjamin, J, , MD,FAAOS			Date of Receipt
	Mailing Address 219 Lagrange Creek Drive			07 20 2021
	City Eads	State TN	Zip Code 38028	Transaction ID : 10993665 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 291.69	
в.	Full Name of Individual (Last, First, Middle Initia Guyton, James, L, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 6422 Massey Estates Cove	07 20 / Y Y Y Y 2021		
	City Memphis	State TN	Zip Code 38120	Transaction ID : 10993666 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼		291.69	
с.	Full Name of Individual (Last, First, Middle Initia Harkess, James, W, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 9566 Fox Hill Circle S		M M / D D / Y Y Y Y 07 20 2021	
	City Germantown	State TN	Zip Code 38139	Transaction ID : 10993667 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	

125.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)...... 1 1 4p 1 1 4p 1 1 4p

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl Heck, Robert, Kurt, , Jr, MD, FA Mailing Address 4938 Barfield Rd City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State TN C Occu Orth	rganization Name Zip Code 38117 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 291.69	Date of Receipt
Full Name of Individual (Last, First, Middl B. Kelly, Derek, Michael, , MD,FAA Mailing Address 1458 W Poplar Ave Suite 100	OS	-	Date of Receipt
City Collierville FEC ID number of contributing federal political committee.	State TN	Zip Code 38017	Transaction ID : 10993669 Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69]
Full Name of Individual (Last, First, Middl CMihalko, Marc, J, , MD, FAAO		rganization Name	Date of Receipt
Mailing Address 4079 Barfield Road			M M / D D / Y Y Y Y 07 20 2021
City Memphis	State TN	Zip Code 38117	Transaction ID : 10993672 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 291.69	Memo Item
SUPTOTAL of Doppinto This Dopp (artists	D		125.01
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num			

	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 39 OF 55 (check only one)
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	y information copied from such Reports and St for commercial purposes, other than using the			
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
١.	Full Name of Individual (Last, First, Middle Initi Murphy, Garnett, Andrew, , MD,FAAOS	ial) or Full O	Organization Name	Date of Receipt
	Mailing Address Campbell Clinic 1400 S Germantown Rd			07 20 / Y Y Y Y 2021
	City Germantown	State TN	Zip Code 38138-2205	Transaction ID : 10993673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)		upation (for Individual) nopaedic Surgeon	Memo Item
	Campbell Clinic Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 291.69	
	Full Name of Individual (Last, First, Middle Initi Richardson, David, R, , MD,FAAOS	ial) or Full O	Organization Name	Date of Receipt
	Mailing Address 636 Center Dr			07 20 2021
	City Memphis	State TN	Zip Code 38112	Transaction ID : 10993675 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	
	Full Name of Individual (Last, First, Middle Initi Rudloff, Matthew, Ian, , MD, FAAC	ial) or Full O	Organization Name	Date of Receipt
	Mailing Address 10211 Ramblewood Dr			07 20 2021
	City Arlington	State TN	Zip Code 38002	Transaction ID : 10993676 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	

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

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 OF 551 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: The second
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the Americ	an Association of Orth	hopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Sawyer, Jeffrey, R, , MD, FAAOS	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 4450 Chickasaw Road			07 20 2021
City Memphis	State TN	Zip Code 38117	Transaction ID : 10993677
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual)		upation (for Individual) nopaedic Surgeon	Memo Item
Campbell Clinic Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 291.69	
Full Name of Individual (Last, First, Middle B. Sheffer, Benjamin, West, , MD,FA		organization Name	Date of Receipt
Mailing Address 281 Ben Avon Way	07 20 2021		
City Memphis	State TN	Zip Code 38111-7702	Transaction ID : 10993678
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69]
Full Name of Individual (Last, First, Middle C. Thompson, Norfleet, Buckner, ,			Date of Receipt
Mailing Address 3784 Highland Park Place			07 20 / Y Y Y Y 2021
City Memphis	State TN	Zip Code 38111	Transaction ID : 10993680 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) Iopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	
SUBTOTAL of Receipts This Page (optional).			125.01

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

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FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)		
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17		
	ny information copied from such Reports and St. for commercial purposes, other than using the			person for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
		e America	an Association of Ort	hopaedic SurgeonsPAC of AAOS		
Α.	Full Name of Individual (Last, First, Middle Initi Throckmorton, Thomas, Ward, , MD,FAA		Drganization Name	Date of Receipt		
	Mailing Address 4901 Fairfield Circle			07 20 Y Y Y Y 2021		
	City Memphis	State TN	Zip Code 38117	Transaction ID : 10993681 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		41.67		
	Name of Employer (for Individual) Campbell Clinic		cupation (for Individual) hopaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69			
в.	Full Name of Individual (Last, First, Middle Initi Warner, William, C, , Jr, MD, FA	al) or Full O	Drganization Name	Date of Receipt		
	Mailing Address 215 East Cherry Circle			07 20 2021		
	City	State	Zip Code	Transaction ID : 10993682		
	Memphis	TN	38117	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		41.67		
	Name of Employer (for Individual) Campbell Clinic		cupation (for Individual) hopaedic Surgeon	Memo Item		
	Receipt For:	Aggregate	Year-to-Date V			
	Other (specify) ▼		, 291.69			
с.	Full Name of Individual (Last, First, Middle Initi Weinlein, John, C, , MD,FAAOS	al) or Full O	Drganization Name	Date of Receipt		
	Mailing Address 633 Valleybrook Dr			07 / D D / Y Y Y Y 20 2021		
	City Memphis	State TN	Zip Code 38120-2707	Transaction ID : 10993683 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		41.67		
	Name of Employer (for Individual) Campbell Clinic		cupation (for Individual) nopaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69			
⊢	CUBTOTAL of Receipts This Page (optional)			125.01		
1.1	OTAL This Period (last page this line number of	····y/······				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE			
ITEMIZED F	RECEIPTS		for each category of the		(check only one)	
			Detailed Summary Page	▲ 11a 13	11b 11c 12 14 15 16 17	
Any information	copied from such Reports and	d Statements ma	ay not be sold or used by any		purpose of soliciting contributions	
					tributions from such committee.	
	DMMITTEE (In Full)					
Political A	Action Committee of	the America	an Association of Orth	opaedic S	urgeonsPAC of AAOS	
Full Name of	Individual (Last, First, Middle	Initial) or Full O	rganization Name			
A. Williams, K	eith, D, , MD, FAAOS	,	0	Date of	Receipt	
Mailing Addre	ss 2336 Pinnacle Creek Dr			M M	/ D D / Y Y Y Y Y	
City		State	Zip Code	07	20 2021	
Germantown		TN	38138		action ID : 10993684 of Each Receipt this Period	
FEC ID numb	per of contributing					
federal politica	0	С			41.67	
Name of Emr	bloyer (for Individual)	000	upation (for Individual)	Me	emo Item	
Campbell Clin	,		opaedic Surgeon			
Receipt For:			Year-to-Date ▼			
Primary		33 - 3 - 4		1		
Other (s	specify) 🔻		291.69			
Full Name of	Individual (Last, First, Middle	Initial) or Full O	rganization Name			
	ivid, Allen, , MD,PhD,FA			Date of	Receipt	
Mailing Addre	ss 201 Pennsylvania Pkwy #10	M M				
0:1		Otata	Zin Oada	07	22 2021	
City Indianapolis		State	Zip Code 46280		action ID : 10993721 of Each Receipt this Period	
· · · · ·	per of contributing	_		Anount	or Each Necerpt this Period	
federal politica	0	С			500.00	
Nome of Emr	alover (for Individual)	0.00	upation (for Individual)		emo Item	
Methodist Spo	oloyer (for Individual) orts Medicine		nopaedic Surgeon			
Receipt For:			Year-to-Date ▼			
Primary		7.99.09u.0		1		
Other (s	specify) 🔻		500.00			
Full Name of	Individual (Last, First, Middle	Initial) or Full O	rganization Name			
	hristopher, J, , MD, FA			Date of	Receipt	
Mailing Addre	ss 180 Newhaven Dr			M		
City		State	Zip Code	07	22 2021 action ID : 10993726	
Fayetteville		GA	30215-2390		of Each Receipt this Period	
FEC ID numb	per of contributing					
federal politica	0	C			250.00	
Name of Emr	bloyer (for Individual)	Occi	upation (for Individual)	Me	emo Item	
Resurgens Or			opaedic Surgeon			
Receipt For:		Aggregate	Year-to-Date ▼			
Primary Other (r			250.00	1		
Other (s	sheena)		7 7 7			
SUBTOTAL of	Receipts This Page (optional).				791.67	
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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS				for each category of the Detailed Summary Page		к only one) 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements r name and	nay addi	not be sold or used by any per ress of any political committee	erson for to solic	r the purpose of soliciting contributions it contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	Amerio	can	Association of Ortho	paed	lic SurgeonsPAC of AAOS
A.	Full Name of Individual (Last, First, Middle Initia Rhoad, Robert, Clark, , MD,FAAOS Mailing Address 6685 Wyman Ln City Cincinnati FEC ID number of contributing federal political committee. Name of Employer (for Individual) Wellington Orthopaedic & Sport Medicin Receipt For: Primary General Other (specify) ▼	State OH C	cupa	anization Name Zip Code 45243 ation (for Individual) aedic Surgeon ar-to-Date ▼ 250.00		ate of Receipt 07 22 2021 Transaction ID : 10993766 mount of Each Receipt this Period 250.00 Memo Item
В.	Full Name of Individual (Last, First, Middle Initia Barber, Thomas, C, , MD,FAAOS Mailing Address 450 East 63rd Street Apartment 7L	al) or Full	Orga	anization Name	- _	ate of Receipt
	City New York City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Kaiser Permanente Medical Center Receipt For: Primary General Other (specify) ▼	0	rthop	Zip Code 10065 ation (for Individual) paedic Surgeon ar-to-Date ▼ 750.00		Transaction ID : 10996727 nount of Each Receipt this Period 250.00 Memo Item
с.	Full Name of Individual (Last, First, Middle Initia Rajani, Rajiv, , , MD,FAAOS Mailing Address 701 Ogden Ln City San Antonio FEC ID number of contributing federal political committee. Name of Employer (for Individual) Univ of TX Health Sciences Ctr SA Receipt For: Primary General Other (specify)	State TX C	ccupa	anization Name Zip Code 78209 ation (for Individual) aedic Surgeon ar-to-Date ▼ 750.00		ate of Receipt 07 23 2021 Transaction ID : 10996728 mount of Each Receipt this Period 250.00 Memo Item
⊢	UBTOTAL of Receipts This Page (optional)					750.00

FOR LINE NUMBER:

PAGE 44 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	ne American Association of O	rthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Ede, David, E, , MD,FAAOS Mailing Address 3 High Meadow Drive City Charleston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Trauma Group Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code WV 25311 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00 750.00	Date of Receipt 07 23 2021 Transaction ID : 10996729 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle In B. Friedmann, Elizabeth, , , MD Mailing Address 2660B Greenbriar Lane	nitial) or Full Organization Name	Date of Receipt
City Annapolis FEC ID number of contributing federal political committee. Name of Employer (for Individual) University of Maryland Receipt For: Primary General Other (specify) ▼	State MD Zip Code 21401 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Transaction ID : 10996730 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle In C. Strauss, Eric, Jason, , MD,FAAC Mailing Address 85 Penn Road City Scarsdale		Date of Receipt 07 23 2021 Transaction ID : 10996733 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York University Receipt For: Primary General Other (specify)	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	250.00
SUBTOTAL of Receipts This Page (optional)		

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FOR LINE NUMBER: PAGE 45 OF 551

ITEMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Brooks, James, Gordon, , Jr, MD,FA	e Initial) or Full C A	organization Name	Date of Receipt
Mailing Address 4964 Mazanec Rd			07 23 2021
City Waco	State TX	Zip Code 76705-6125	Transaction ID : 10996882 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Dallas Bone and Joint		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
B. Novotny, Joseph, A, , MD,FAAOS Mailing Address 13 Norbloom Ave		rganization Name	Date of Receipt
City	State	Zip Code	07 23 2021 Transaction ID : 11035150
Bloomington	IL	61701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Self Employed		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500,00]
Full Name of Individual (Last, First, Middle C. Lenters, Tim, R, , MD,FAAOS	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 653 Bradford Farms Lane	NE		07 23 2021
City Grand Rapids	State MI	Zip Code 49525	Transaction ID : 11035156 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Orthopaedic Assoc of Michigan		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional))		1250.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Use separate schedule(s) for each category of the

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sandmeier, Robert, H, , MD, FAAOS Date of Receipt Α. Mailing Address 2038 NW 127th PI 1 07 23 2021 City Zip Code State Transaction ID: 11035176 OR Portland 97229 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Portland Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gill, Paramjeet, Singh, MD, FAAOS, F Date of Receipt Mailing Address 4105 Stone Valley Oaks Dr 07 2021 23 City State Zip Code Transaction ID : 11035180 CA Alamo 94507 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Fresno Surgical Hospital Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gainor, John, W, MD, FAAOS Date of Receipt Mailing Address PO Box 1200 MM 07 23 2021 City State Zip Code Transaction ID : 11035182 CA Santa Barbara 93102-1200 Amount of Each Receipt this Period FEC ID number of contributing С 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sansum Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ↓ ✗ 11a 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committe	operson for the purpose of soliciting contributions to solicit contributions from such committee. opaedic SurgeonsPAC of AAOS
A .	Full Name of Individual (Last, First, Middle Init Navarro, Ronald, Anthony, , MD,FAAOS Mailing Address 18 Wide Loop Rd	ial) or Full Oi	rganization Name	Date of Receipt
	City Rolling Hills	State CA	Zip Code 90274	07 24 2021 Transaction ID : 11035183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Kaiser Permanente South Bay Receipt For: Primary General Other (specify) ▼	Orth	apation (for Individual) opaedic Surgeon Year-to-Date ▼ 588.00	Memo Item
В.	Full Name of Individual (Last, First, Middle Init Liu, Raymond, W, , MD,FAAOS Mailing Address 22925 Shelburne Road			Date of Receipt
	City Shaker Heights	State OH	Zip Code 44122	Transaction ID : 11035187 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) University Hospitals, Case Medical Cen		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
с.	Full Name of Individual (Last, First, Middle Init Raikin, Steven, M, , MD,FAAOS	ial) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 221 Merion Rd			07 25 2021
	City Merion Station	State PA	Zip Code 19066	Transaction ID : 11035193 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) Rothman Orthopaedic Specialty Hospital Receipt For:	Ortho	pation (for Individual)	Memo Item
	Primary General Other (specify)	Aygregate	Year-to-Date ▼ 1000.00]
s	UBTOTAL of Receipts This Page (optional)			2084.00
т	OTAL This Period (last page this line number of	only)		

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)			
\langle				opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Van Demark, Robert, E, , Jr, MD, FA	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 332 Aspen Circle	1		07 25 2021
	City Sioux Falls	State SD	Zip Code 57105	Transaction ID : 11035196
				Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Sioux Falls Specialty Hospital	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		500.00	1
				1
В.	Full Name of Individual (Last, First, Middle Initia Beltran, Michael, John, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address UC Dept of Orthopaedic Surger 231 Albert Sabin Way Room 55			07 26 2021
	City	State	Zip Code	Transaction ID : 11035203
	Cincinnati	OH	45267-0212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Department of Orthopaedics and Rehabil		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	-
	Primary General	riggiogato		1
	Other (specify) v	L	, 588.00	
C.	Full Name of Individual (Last, First, Middle Initia Schnaser, Erik, Allen, , MD,FAAOS		rganization Name	Date of Receipt
	Mailing Address 75538 Desierto Dr			07 / 26 / Y Y Y Y 2021
	City	State CA	Zip Code	Transaction ID : 11035204
	Indian Wells	CA	92210-8444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Eisenhower Desert Orthopaedic Center	Orth	opaedic Surgeon	
		Aggregate	Year-to-Date V	
	Other (specify)		750.00]
⊢	UBTOTAL of Receipts This Page (optional)			834.00

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ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th
Any information copied from such Reports and Stat or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orth	opaedic SurgeonsPAC of AAOS
A. Full Name of Individual (Last, First, Middle Initial Mitros, Stephen, F, , MD, FAAOS Mailing Address 51045 Erin Glen Dr City Granger	State Zip Code IN 46530	Date of Receipt 07 26 2021 Transaction ID : 11035205 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Mitros Orthopaedics	C Occupation (for Individual) Orthopaedic Surgeon	84.00 Memo Item
Descipt Fam	Aggregate Year-to-Date ▼ 588.00]
Full Name of Individual (Last, First, Middle Initia B. Eckrich, Stephen, G J, , MD,FAAOS Mailing Address 5511 Shooting Star Trail) or Full Organization Name	Date of Receipt
Rapid City FEC ID number of contributing federal political committee.	SD 57702	Transaction ID : 11076590 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Memo Item
C. Full Name of Individual (Last, First, Middle Initial Nagamani, Kevin, K, , MD,FAAOS Mailing Address 11902 E Lake Cr) or Full Organization Name	Date of Receipt
City Greenwood Village	StateZip CodeCO80111	Transaction ID : 11076591 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	84.00
Name of Employer (for Individual) Western Orthopaedics Receipt For: Primary Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 420.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		252.00

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551

IT	EMIZED RECEIPTS		for each cat	te schedule(s) tegory of the mmary Page	(che	eck only 11a 13	y one) 11 14		11c 15	12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r					or the			oliciting	g contribut	tions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Associa	ation of Orthe	opae	dic S	Surge	eons	PA	C of AA	NOS
Α.	Full Name of Individual (Last, First, Middle Initia Kazaglis, Jeffrey, A, , MD, FAAOS Mailing Address 11 Stone Ridge Drive	al) or Full O	rganization Na	me		Date of		ipt 27	/ Y	2021	Y
	City South Barrington	State IL	Zip Code 60010			Trans		ID : 1	107743 ceipt th		
	FEC ID number of contributing federal political committee.	С					y-			500.0	
	Name of Employer (for Individual) Ortho Ilinois		pation (for Ind	,		Me	emo Ite	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	500.00]						
в.	Full Name of Individual (Last, First, Middle Initia Hinchey, John, William, , MD,FAAOS Mailing Address 409 Normandy Ave		rganization Na	me		Date of		D D	/ Y	YY	Y
	City San Antonio	State TX	Zip Code 78209						107768 ceipt th	2021 8 his Period	
	FEC ID number of contributing federal political committee.	C								1000.0	00
	Name of Employer (for Individual) Ortho San Antonio		upation (for Inc	,		Me	emo Ite	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	1000.00]						
С.	Full Name of Individual (Last, First, Middle Initia Pushkarewicz, Michael, J, , MD,FA		rganization Na	me		Date of	Recei	ipt			
	Mailing Address 1510 Braken Ave	State	Zip Code			07	JL	28	/ Y	2021	Y
	Wilmington	DE	19808							is Period	
	FEC ID number of contributing federal political committee.	С					,		y	42.0	00
	Name of Employer (for Individual) First State Orthopaedics Receipt For:	te Orthopaedics Orthopaedic Surgeon					emo Ite	em			
	Primary General Other (specify)	Primary General General									
s	UBTOTAL of Receipts This Page (optional)				•		. ,		,	1542.0	00
Т	OTAL This Period (last page this line number or	nly)							-		

ITEMIZED RECEIPTS for each category of the Detailed Summary Page Ita	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 51 OF 551 (check only one)
ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Ful) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAO A. Carry, Joshua, Layne, ,MD,FAAOS Mailing Address 910 becaraso Drive City La Canada Flinktidg C. Carolan, Cardon of contributing federal political committee. C. Carolan, Cregory, Francis, MD,FAAOS Mailing Address 9105 Boto FC: Lin number of contributing federal political committee. C. Carolan, Cregory, Francis, MD,FAAOS Mailing Address 9105 Boto FC: Lin number of contributing federal political committee. C. Carolan, Cregory, Francis, MD,FAAOS Mailing Address 9106 Botometer Paintave of Employer (for Individual) Coccupation (for Individual) Compared Surgeon Receipt Fo: Primary General C. Carolan, Cregory, Francis, MD,FAAOS Mailing Address 9106 Botometer Paintave FC: Di number of contributing federal political committee. C. Carolan, Cregory, Francis, MD,FAAOS Mailing Address 9106 Botometer Paintave FC: Di number of contributing federal political committee. C. Carolan, Cregory, Francis, MD,FAAOS Mailing Address 906 Meadow Ridge Ct City Bethlehem Paintave G. Carolan, Francis, MD,FAAOS Mailing Address 906 Meadow Ridge Ct City Bethlehem Paintave C. Carolan, Surg Group C. Carolan, Surg General C. Carolan, Surg General C. Carolan, Surg General C. Carolan, Francis, MD,FAAOS Mailing Address 1906 Meadow Ridge Ct City Bethlehem Paintave C. Carolan, Surg Group C. Carolan, Surg General C. Carolan, Surg Gene				X 11a 11b 11c 12
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt A. Gary, Joshua, Layne, , MD, FAAOS Mailing Address 951 Descanso Drive Date of Receipt City La Canada Flintridge CL Zip Code Action Contributing C Address 951 Descanso Drive Transaction D: 11077710 Amount of Each Receipt this Period Period #4.00 FEU Name of Individual (Last, First, Middle Initial) or Full Organization Name Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 5425 Got View Dr C City S588.00 Date of Receipt B. Scales, Darrell, Kevin, , MD,FAAOS Mailing Address 5425 Got View Dr City State Zip Code Mailing Address 5425 Got View Dr C City State Zip Code Mailing Address 5425 Got View Dr C City State Zip Code Receipt For: C Code Transaction D: 11077711 Amount of Each Receipt this Period Receipt For: C City State Zip Code Transaction D: 11077712 Receipt For: C Code Transaction D: 11077711 Amount of Each Receipt this Period <t< th=""><th>or for commercial purposes, other than using</th><th></th><th></th><th></th></t<>	or for commercial purposes, other than using			
A. Gary, Joshua, Layne, , MD,FAAOS Mailing Address 951 Descanso Drive City La Canada Fintridge CA State Zip Code FC: ID number of contributing federal political committee. Name of Employer (for Individual) Occupation (for Individual) Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Scales, Darrell, Kevin, , MD,FAAOS Mailing Address 5425 Golf View Dr City Braselton GA State C G G G G G G G G G G G G G G G G G G				opaedic SurgeonsPAC of AAOS
City State Zip Code 7 28 2021 Transaction ID : 11077710 Amount of Each Receipt this Period Amount of Each Receipt this Period 44.00 FEC ID number of contributing C Agregate Year-to-Date ▼ #4.00 Marino of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Receipt For: Agregate Year-to-Date ▼ #4.00 Primary General Orthopaedic Surgeon B. Scales, Darrell, Kevin, , MD, FAAOS Date of Receipt Maling Address 6425 Golf View Dr Ga City State Zip Code Braselton C Agregate Year-to-Date ▼ FeC: Dumber of contributing Ga Ider of Employer (for Individual) Orthopaedic Surgeon Receipt For: Agregate Year-to-Date ▼ Primary General Other (specify) ▼ State Bethlehem State Receipt Horiz Agregate Year-to-Date ▼ Of	A. Gary, Joshua, Layne, , MD,FAAOS	Initial) or Full C	Organization Name	
FEC ID number of contributing federal political committee. C Addition of Each Receipt fills Felicid Name of Employer (for Individual) Keck School of Medicine of USC Occupation (for Individual) Orthopaedic Surgeon Memo Item Beceipt For: B. Scales, Darrell, Kevin, MD,FAAOS Aggregate Year-to-Date ▼ Date of Receipt O' 28 2021 Maling Address 5425 Golt View Dr C Transaction ID : 11077711 Amount of Each Receipt His Period Maling Address 5425 Golt View Dr C Individual) Orthopaedic Surgeon Receipt For: City Braselion C Aggregate Year-to-Date ▼ Name of Employer (for Individual) Orthopaedic Surgeon Occupation (for Individual) Orthopaedic Surgeon Date of Receipt Receipt For: City Bethelhean Aggregate Year-to-Date ▼ 0 Memo Item Name of Engloyer (for Individual) Orthopaedic Surgeon Occupation (for Individual) Orthopaedic Surgeon Date of Receipt Maling Address 1806 Meadow Ridge Ct 0 0 7 28 2021 City Bethelhean State Zip Code PA 18015 Amount of Each Receipt His Period Fec ID number of contributing federal political committee. C Memo Item 84.00 Name of Employer (for Individual) Othopaedic Surgeon Occupation (for Individual) Orthopaedic Surgeon	City			07 28 2021
Name of Employer (for Individual) Neck School of Medicine of USC Occupation (for Individual) Orthopaedic Surgeon Receipt For: Other (specify) General Other (specify) General Scales, Darrell, Kevin, , MD, FAAOS Mailing Address 5425 Golf View Dr Oity B: Scales, Darrell, Kevin, , MD, FAAOS Mailing Address 5425 Golf View Dr Oity Braseton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northeast Georgia Physicians Group Receipt For: 	FEC ID number of contributing		91011	
Primary General Other (specify) S88.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. Scales, Darrell, Kevin, , MD,FAAOS Mailing Address 5425 Golf View Dr Organization Name City State Zip Code Transaction ID : 11077711 Braselton GA 30517 Transaction ID : 11077711 Amount of Employer (for Individual) Occupation (for Individual) Onthopaedic Surgeon Name of Employer (for Individual) Occupation (for Individual) Other (specify) Other (specify) Aggregate Year-to-Date ▼ Memo Item C. Carolan, Gregory, Francis, MD,FAAOS Name of Employer (for Individual) or Full Organization Name Date of Receipt C. Carolan, Gregory, Francis, MD,FAAOS Mailing Address 1806 Meadow Ridge Ct Transaction ID : 11077712 Mailing Address 1806 Meadow Ridge Ct C Transaction ID : 11077712 Manue of Employer (for Individual) Occupation (for Individual) Memo Item States Otho Surg Group C State Zip Code Mailing Address 1806 Meadow Ridge Ct C Mount of Each Receipt this Period FEC ID number of contributing C	Name of Employer (for Individual) Keck School of Medicine of USC	Orth	nopaedic Surgeon	Memo Item
B. Scales, Darrell, Kevin, , MD, FAAOS Mailing Address 5425 Golf View Dr City Braselton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northeast Georgia Physicians Group Receipt For: Primary General Other (specify) ▼ FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Carolan, Gregory, Francis, , MD,FAAOS Mailing Address 1806 Meadow Ridge Ct City Bethlehem FEC ID number of contributing federal political committee. City Bethlehem FEC ID number of contributing federal political committee. City Bethlehem FEC ID number of contributing federal political committee. Name of Employer (for Individual) St Luke's Otho Surg Group Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Memo Item <	Primary General	Aggregate]
City State Zip Code Braselton GA 30517 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer (for Individual) Northeast Georgia Physicians Group Occupation (for Individual) Othopaedic Surgeon Memo Item Receipt For: Primary General 0 Memo Item Other (specify) Aggregate Year-to-Date Image: Control Comparization Name Date of Receipt City State Zip Code Image: Control Committee Image: Control Committee Name of Employer (for Individual) Orther (specify) Date of Receipt Image: Control Committee City State Zip Code Image: Control Committee Image: Control Committee Image: Control Committee Name of Employer (for Individual) Occupation (for Individual) Occupation (for Individual) Image: Control Committee Image: Control Committee Name of Employer (for Individual) Occupation (for Individual) Image: Control Committee Image: Control Committee Image: Control Committee Name of Employer (for Individual) Occupation (for Individual) Occupation (for Individual) Image: Conte Image: Control Committee <td>B. Scales, Darrell, Kevin, , MD, FAAC</td> <td></td> <td>organization Name</td> <td>M M / D D / Y Y Y Y</td>	B. Scales, Darrell, Kevin, , MD, FAAC		organization Name	M M / D D / Y Y Y Y
federal political committee. 100.00 Name of Employer (for Individual) Northeast Georgia Physicians Group Occupation (for Individual) Orthopaedic Surgeon Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pull Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt C. Carolan, Gregory, Francis, , MD, FAAOS Mailing Address 1806 Meadow Ridge Ct Date of Receipt City Bethlehem State Zip Code PA 18015 Transaction ID : 11077712 Amount of Each Receipt this Period \$4.00 FEC ID number of contributing federal political committee. Occupation (for Individual) Orthopaedic Surgeon Memo Item Name of Employer (for Individual) St Luke's Ortho Surg Group Occupation (for Individual) Other (specify) Occupation (for Individual) Other (specify) Memo Item				Transaction ID : 11077711
Northeast Georgia Physicians Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Carolan, Gregory, Francis, , MD,FAAOS Date of Receipt Mailing Address 1806 Meadow Ridge Ct 01 City State Zip Code Bethlehem PA 18015 FEC ID number of contributing C Aggregate Year-to-Date ▼ Mame of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon St Luke's Ortho Surg Group Aggregate Year-to-Date ▼ Memo Item Receipt For: Aggregate Year-to-Date ▼ Memo Item Other (specify) Aggregate Year-to-Date ▼ 588.00	•	С		100.00
Primary General Other (specify) Image: Specify of the specific the specific the specific the specify of the specific the	Northeast Georgia Physicians Group	Orti	hopaedic Surgeon	Memo Item
C. Carolan, Gregory, Francis, , MD,FAAOS Date of Receipt Mailing Address 1806 Meadow Ridge Ct 07 28 2021 City State Zip Code Transaction ID : 11077712 Bethlehem PA 18015 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) 84.00 St Luke's Ortho Surg Group Occupation (for Individual) Memo Item Primary General Aggregate Year-to-Date ▼ 588.00 Other (specify) 588.00 588.00 268.00	Primary General	Aggregate]
City State Zip Code Bethlehem PA 18015 FEC ID number of contributing C Amount of Each Receipt this Period Gederal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) Memo Item St Luke's Ortho Surg Group Orthopaedic Surgeon Memo Item Primary General General 588.00	c. Carolan, Gregory, Francis, , MD		Organization Name	
FEC ID number of contributing federal political committee. C Affidult of Each Receipt this Period Name of Employer (for Individual) Occupation (for Individual) Memo Item St Luke's Ortho Surg Group Orthopaedic Surgeon Memo Item Receipt For: Aggregate Year-to-Date ▼ 588.00 Other (specify) 588.00 588.00			Zip Code	07 28 2021
St Luke's Ortho Surg Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Other (specify) 588.00	FEC ID number of contributing		18015	
SUBTOTAL of Receipts This Page (optional)	St Luke's Ortho Surg Group Receipt For: Primary General	Orth	nopaedic Surgeon Year-to-Date ▼	Memo Item
	SUBTOTAL of Receipts This Page (optional)			268.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each catego Detailed Summ	jory of the
		used by any person for the purpose of soliciting contributions litical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association	on of Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Torres, Daniel, , , MD, FAAOS Mailing Address 1488 Shelburne Ct City Allentown FEC ID number of contributing federal political committee. Name of Employer (for Individual) Lehigh Valley Practioner Group Receipt For: Primary General Other (specify) ▼	e Initial) or Full Organization Name State Zip Code PA 18104 C Occupation (for Individ Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt Transaction ID : 11077713 Amount of Each Receipt this Period 85.00
Full Name of Individual (Last, First, Middle B. Chandler, David, R, , MD,FAAOS Mailing Address 165 Middle Plantation Ln City Gulf Breeze FEC ID number of contributing federal political committee. Name of Employer (for Individual) Andrews Institute For Orthopaedics & S Receipt For: Primary General Other (specify) ▼		Date of Receipt 07 28 2021 Transaction ID : 11077714 Amount of Each Receipt this Period 84.00 dual)
Full Name of Individual (Last, First, Middle C. Allard, Mark, Michael, , MD,FA Mailing Address 3010 Cortney Circle City Siloam Springs FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)		Date of Receipt Transaction ID : 11077715 Amount of Each Receipt this Period 84.00
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 53 OF 55 (check only one)
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Ort	hopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Porter, Scott, Edward, , MD,MBA,FAA Mailing Address 1420 Jonesville Road	nitial) or Full Organization Name	Date of Receipt
City Simpsonville	State Zip Code SC 29681	07 28 2021 Transaction ID : 11077716
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Prisma Health	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	
Full Name of Individual (Last, First, Middle II McClintock, Kyle, Ross, , DO,MBA Mailing Address 5460 Parkford Circle		Date of Receipt
City Granite Bay	State Zip Code CA 95746	Transaction ID : 11077717 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) The CORE Institute	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name of Individual (Last, First, Middle II Della Rocca, Gregory, John, , MI		Date of Receipt
Mailing Address 1415 Stonehaven Rd	State Zia Cada	07 28 2021
City Columbia	StateZip CodeMO65203	Transaction ID : 11077718 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Univ of Missouri Receipt For:	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)		584.00
TOTAL This Period (last page this line numbe	r only)	

SCHEDULE A (FEC Form 3X) Г

SCHEDULE A (FEC Form 3X	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 54 OF 55 (check only one)	
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
> Political Action Committee of			ppaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Hoedt, Christen, , , MD Mailing Address 973 Vinings Blvd	e Initial) or Full O	rganization Name	Date of Receipt	
City Gallatin	State TN	Zip Code 37066	07 28 2021 Transaction ID : 11077719 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		84.00	
Name of Employer (for Individual) Cooper Orthopaedics Surgery Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00]	
Full Name of Individual (Last, First, Middle Reid , J, Spence, , MD, FAAOS	Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 500 University Drive Department of Orthopaedi			07 / 28 / Y Y Y Y 2021	
City Hershey	State PA	Zip Code 17036	Transaction ID : 11077720 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		84.00	
Name of Employer (for Individual) Penn State		upation (for Individual) nopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00]	
Full Name of Individual (Last, First, Middle Giuseffi, Steven, A, , MD,FAAC	DS	rganization Name	Date of Receipt	
Mailing Address 4784 Enchanted Pines Dr			07 28 2021	
City Rapid City	State SD	Zip Code 57701	Transaction ID : 11077721 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		84.00	
Name of Employer (for Individual) Black Hills Orthopedic and Spine Cente Receipt For:	Orthopedic and Spine Cente Orthopa		Memo Item	
Primary General Other (specify)	Primary General General			
SUBTOTAL of Receipts This Page (optional)		252.00	
TOTAL This Period (last page this line numl	per only)			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	the Americ	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Snyder, Barry, J, , MD,FAAOS Mailing Address 497 Long Ln City Huntingdon Valley FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	State PA C Occ Orti	Drganization Name Zip Code 19006 Lupation (for Individual) hopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Weisman, David, S, , MD, FAAOS Mailing Address 585 Cranbury Rd City		Drganization Name	Date of Receipt
East Brunswick FEC ID number of contributing federal political committee. Name of Employer (for Individual) POA Receipt For:	Ort	08816-4026 Supation (for Individual) hopaedic Surgeon	Transaction ID : 11078140 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle C. Fraipont, Michael, John, , MD, F	Initial) or Full C	Year-to-Date ▼ 1000.00 Drganization Name	Date of Receipt
Mailing Address 5285 La Canada Blvd	70.00		07 27 2021
City La Canada FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	Orth	Zip Code 91011 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 280.00	Transaction ID : 11078141 Amount of Each Receipt this Period 280.00 Memo Item
SUBTOTAL of Receipts This Page (optional).			1530.00
TOTAL This Period (last page this line number			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			y person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Or	thopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Kearns, Richard, J, , MD,FAAOS Mailing Address 8714 Stable Crest Blvd City Houston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Texas Orthopedic Hospital Receipt For: Primary General Other (specify) ▼	State TX C	Drganization Name Zip Code 77024-7031 upation (for Individual) hopaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt
Full Name of Individual (Last, First, Middle In B. Christensen, Alan, W, , MD,FAAOS Mailing Address 1011 Lincoln Circle City Winter Park FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orlando Orthopaedic Center Receipt For: Primary General	State FL Occ Orti	Drganization Name Zip Code 32789 Supation (for Individual) hopaedic Surgeon Year-to-Date ▼	Date of Receipt 07 27 2021 Transaction ID : 11078143 Amount of Each Receipt this Period 1000.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle In C. Metz, Christopher, M, , MD,FAAC Mailing Address 2014 S 6th St City Brainerd FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northern Orthopedics, LTD Receipt For: Primary General Other (specify)	DS State MN C Occ Orth	1000.00 Organization Name Zip Code 56401-4529 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 300.00	Date of Receipt 07 27 2021 Transaction ID : 11078145 Amount of Each Receipt this Period 300.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 57 OF 551 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	the name and address of any political committe	
/		nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Rosen, Craig, H, , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt
Mailing Address 1802 Champlain Dr 	State Zip Code	07 27 2021 Transaction ID : 11078146
Voorhees Township	NJ 08043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Cooper Bone & Joint at Inspira Woodbur	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Tauro, Joseph, C, , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt
Mailing Address 9 Hospital Dr Ste B7		07 27 2021
City Toms River	State Zip Code NJ 08755-6425	Transaction ID : 11078147 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer (for Individual) Ocean County Sports Medicine	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) V	1000.00	
Full Name of Individual (Last, First, Middle Booth, Kevin, Charles, , MD, FA		Date of Receipt
Mailing Address 18331 Golden Oaks Dr		07 27 2021
City Jamestown	State Zip Code CA 95327	Transaction ID : 11078150
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) NCSI	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)		
SUBTOTAL of Receipts This Page (optional).		▶ 1750.00
TOTAL This Period (last page this line number	er only)	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS
A.	Full Name of Individual (Last, First, Middle Initial Quinn, David, E, , MD, FAAOS Mailing Address 41 Thorndale Rd City Slingerlands FEC ID number of contributing federal political committee. Name of Employer (for Individual) Capital Region Orthopaedics Receipt For: Primary General Other (specify) ▼	State NY C Occu Orth	rganization Name Zip Code 12159 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 07 27 2021 Transaction ID : 11078151 Amount of Each Receipt this Period 250.00 Memo Item
В.	Full Name of Individual (Last, First, Middle Initia Woo, Kent, E, , MD, FAAOS Mailing Address 309 McAlpin Dr) or Full Or	rganization Name	Date of Receipt
	City Savannah FEC ID number of contributing federal political committee.	State GA	Zip Code 31406	07 27 2021 Transaction ID : 11078152 Amount of Each Receipt this Period 2000.00
	Name of Employer (for Individual) Optim Orthopedics Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 2000.00	Memo Item
C.	Full Name of Individual (Last, First, Middle Initia Mattingly, David, A, , MD,FAAOS Mailing Address 80 Fernwood Road) or Full Or	rganization Name	Date of Receipt
	City Chestnut Hill FEC ID number of contributing federal political committee.	State MA	Zip Code 02467	Transaction ID : 11078177 Amount of Each Receipt this Period 500.00
	Name of Employer (for Individual) New England Baptist Hospital Receipt For: Primary General Other (specify)	Ortho	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 500.00	Memo Item
s	UBTOTAL of Receipts This Page (optional)		▶	2750.00
Т	OTAL This Period (last page this line number on	ly)		

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check onl 11a 13	y one) 11b 11 14 15	
	y information copied from such Reports and Sta for commercial purposes, other than using the r					iting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orth	opaedic S	SurgeonsF	PAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Kristensen, Ronald, M, , MD,FAAOS Mailing Address 1735 N Claremont Dr	al) or Full O	rganization Name	M M		YYYYY
	City Boise	State	Zip Code 83702		24 saction ID : 1107	
	FEC ID number of contributing federal political committee.	C		Amoun	t of Each Receip	250.00
	Name of Employer (for Individual) St Luke's Boise Orthopedic Clinic Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	M	emo Item	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]		
в.	Full Name of Individual (Last, First, Middle Initia Wright, Craig, , , MD,FAAOS	al) or Full O	rganization Name	Date o	f Receipt	
	Mailing Address 3 Briar Hill Rd			м м 07	/ D D / 16	2021
	City Montclair	State NJ	Zip Code 07042		action ID : 1107 t of Each Receip	
	FEC ID number of contributing federal political committee.	С				250.00
	Name of Employer (for Individual) Resurgens Orthopaedics		upation (for Individual) nopaedic Surgeon	М	emo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]		
<u></u> с.	Full Name of Individual (Last, First, Middle Initia Lajam, Claudette, Malvina, , MD,FA		rganization Name	Date o	f Receipt	
	Mailing Address 30 Knollwood Dr			07	/ D D / 19	2021
	City Larchmont	State NY	Zip Code 10538-1238		saction ID : 1107 t of Each Receip	
	FEC ID number of contributing federal political committee.	C			1250.0	1250.00
	Name of Employer (for Individual) Hosp for Joint Disease	upation (for Individual) opaedic Surgeon	M	Memo Item		
	Receipt For: Primary General Other (specify)	1				
s	UBTOTAL of Receipts This Page (optional)				, , ,	1750.00
т	OTAL This Period (last page this line number or	nly)		. []		F 1 4 1

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 60 OF 551
IT	ITEMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c } \hline & & & & & & & & & & & & & & & & & & $
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
\square	NAME OF COMMITTEE (In Full)			
	Political Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initial Bercik, Michael, J, , Jr, MD,FAA	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 1410 Center Road	1		07 29 2021
	City	State PA	Zip Code 17603	Transaction ID : 11078541
			17603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Thomas Jefferson University	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
— R	Full Name of Individual (Last, First, Middle Initial Parker, John, F, , MD, FAAOS	l) or Full O	rganization Name	Date of Receipt
υ.	Mailing Address 6248 Turnwood			07 21 2021
	City	State	Zip Code	Transaction ID : 11078542
	Jamesville	NY	13078	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Syracuse Orthopedic Specialists		upation (for Individual) nopaedic Surgeon	Memo Item
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		, 250.00	
— c.	Full Name of Individual (Last, First, Middle Initial Jiranek, William, A, , MD,FAAOS,F	l) or Full O	rganization Name	Date of Receipt
•.	Mailing Address 4709 Creekstone Drive			07 22 2021
	City	State	Zip Code	Transaction ID : 11078543
	Durham V		27703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С		84.00
			upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Aggre		Year-to-Date ▼	
	Primary General Other (specify)		588.00	
s	UBTOTAL of Receipts This Page (optional)		•	384.00

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

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 61 OF 551
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Glusenkamp, Nathan, , ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9400 W Higgins Rd			07 / 22 2021
City Rosemont	State IL	Zip Code 60018	Transaction ID : 11078544
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual)		upation (for Individual) of Quality and Registries Officer	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00]
Full Name of Individual (Last, First, Middle B. Mejia, Alfonso, , , MD,MPH,FAA	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5332 South Shore Drive	07 26 2021		
City Chicago	State IL	Zip Code 60615	Transaction ID : 11078546 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Illinois Association of Orthopedic Sur		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1176.00]
Full Name of Individual (Last, First, Middle C. Schmidt, Kenneth, , , MD	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 10811 N 52nd Street			07 / 26 / Y Y Y Y Y 2021
City Scottsdale	State AZ	Zip Code 85254	Transaction ID : 11078547 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) OrthoArizona		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00]
SUBTOTAL of Receipts This Page (optional))	184.00

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
	Statements may not be sold or used by any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Adamson, Kent, R, , MD,FAAOS Mailing Address 225 Via Rancho City San Clemente FEC ID number of contributing federal political committee. Name of Employer (for Individual) COMG Receipt For: Primary General Other (specify)	nitial) or Full Organization Name State Zip Code QC 92672 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00 750.00	Date of Receipt 07 26 2021 Transaction ID : 11078548 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle I B. Robon, Matthew, Joseph, , MD, FA Mailing Address 3464 NE Harrison St		Date of Receipt
City Issaquah FEC ID number of contributing federal political committee. Name of Employer (for Individual) Proliance Orthopedics & Sports Med Receipt For: Primary General	State Zip Code WA 98029 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	07 26 2021 Transaction ID : 11078549 Amount of Each Receipt this Period 250.00 Memo Item
C. C. Langford, Scott, A, , MD,FAAOS Mailing Address 4401 W 87th Terrace		Date of Receipt
City Prairie Village FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rockhill Orthopaedics Receipt For: Primary General Other (specify)	State KS Zip Code 66207 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Transaction ID : 11078551 Amount of Each Receipt this Period 500.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 63 OF 551

ITEMIZED RECEIPTS	Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▼ 11a 11b 11c 12 13 14 15 16 17
	d Statements may not be sold or used by any puthe name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Ortho	ppaedic SurgeonsPAC of AAOS
✓ Full Name of Individual (Last, First, Middle lorio, Richard, , , MD,FAAOS A. Iorio, Richard, , , MD,FAAOS Mailing Address 31 Prince St City Beverly FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General	Initial) or Full Organization Name State Zip Code MA 01915 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 07 28 2021 Transaction ID : 11078552 Amount of Each Receipt this Period 84.00 Memo Item
Ceneral Other (specify) ▼ Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	
B. Waddell, Bradford, Sutton, , MD,F Mailing Address 3421 Marquette St		Date of Receipt
Dallas FEC ID number of contributing federal political committee.	TX 75225	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Carrell Cliic Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Memo Item
C. Lopez, David, Vincent, , MD,FA Mailing Address 27 Courtney Ct		Date of Receipt
City Freehold FEC ID number of contributing federal political committee.	State Zip Code NJ 07728	Transaction ID : 11078554 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Orthopaedic & Sports Medicine Speciali Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 588.00	Memo Item
	er only)	252.00

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ITEMIZED RECEIPTS	for each ca	tegory of the Immary Page	(check only one)	
Any information copied from such Reports and State or for commercial purposes, other than using the na			rson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Political Action Committee of the <i>i</i>	American Associa	ation of Ortho	paedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Initial) A. Greene, Craig, C, , MD,FAAOS Mailing Address 17171 Highland Rd City Baton Rouge FEC ID number of contributing federal political committee.	State Zip Code LA 70810-3	802	Date of Receipt 07 / 30 / 2021 Transaction ID : 11078556 Amount of Each Receipt this Period 250.00	
Other (specify) ▼	Occupation (for Inc Orthopaedic Surge	on 250.00	Memo Item	
Full Name of Individual (Last, First, Middle Initial) B. Su, Edward, T, , MD, FAAOS Mailing Address 11726 Valley Creek Rd City Woodbury FEC ID number of contributing federal political committee.	or Full Organization Na State Zip Code MN 55129	me	Date of Receipt	
Name of Employer (for Individual) Summit Orthopedics	Occupation (for Inc Orthopaedic Surge	on	Memo Item	
Full Name of Individual (Last, First, Middle Initial) C. Maloney, William, J, , MD,FAAOS Mailing Address 990 Waverley Street				
City Palo Alto FEC ID number of contributing federal political committee.	State Zip Code 94301		07 30 2021 Transaction ID : 11079146 Amount of Each Receipt this Period 1000.00	
Name of Employer (for Individual) Stanford Receipt For: Primary General Other (specify)	Occupation (for Inc Orthopaedic Surger Aggregate Year-to-Date	on	Memo Item	
SUBTOTAL of Receipts This Page (optional)			3250.00	

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial Glassman, Steven, D, , MD,FAAOS Mailing Address 12345 Osage Road City Louisville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Norton Healthcare Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code KY 40232 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initia B. Zehr, Robert, J, , MD, FAAOS Mailing Address 4851 Bonita Bay Blvd 1702 City Bonita Springs FEC ID number of contributing federal political committee. Name of Employer (for Individual) Zehr Center for Orthopaedics Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code FL 34134 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 07 / 30 / 2021 Transaction ID : 11079150 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle Initia C. Schueller, Dean, R, , MD,FAAOS Mailing Address 1778 Sheridan City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ann Arbor Orthopedics Receipt For: Primary General Other (specify)	al) or Full Organization Name State Zip Code MI 48104 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 07 / 30 / 2021 Transaction ID : 11079153 Amount of Each Receipt this Period 500.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	r	2500.00

FOR LINE NUMBER: PAGE 66 OF 551

	ZED RECEIPTS		for ea	eparate schedule(s) ch category of the ed Summary Page	(check 1 1	-	<u> </u>	e) 11b 14	11c	1	
Any info or for co	rmation copied from such Reports and Sta mmercial purposes, other than using the r	tements ma name and ac	y not be ddress of	sold or used by any pe f any political committee	rson for to solici	the p t con	ourpo tribu	ose of tions f	solicitin	g conti ch com	ributions mittee
	E OF COMMITTEE (In Full) Itical Action Committee of the	America	an Ass	ociation of Ortho	paedi	c S	urg	eons	sPA	C of	AAOS
A. Broo	lame of Individual (Last, First, Middle Initia ckman, Holly, L, , MD,FAAOS	l) or Full Or	ganizatio	on Name	Da	te of	Rec	eipt			
City	g Address 1200 S Fox Run	State	Zin	Code	- L	07 ^M	/	30	JL	202	1
Mars	eilles	IL		341					110791 eceipt t		riod
	ID number of contributing al political committee.	С								5	00.00
	e of Employer (for Individual) Healthcare		pation (f	or Individual) Surgeon		Me	emo	ltem			
	pt For: Primary General Other (specify) ▼	Aggregate `	Year-to-D	Date ▼	_						
	lame of Individual (Last, First, Middle Initia vinson, Brian, , , MD, FAAOS	l) or Full Or	ganizatio	on Name	Da	te of	Rec	eipt			
	g Address 4413 Highway 15					07	1			202 [,]	ү ү 1
City Silve	⁻ City	State NM	Zip (880	Code 061					110791 eceipt t		riod
	ID number of contributing al political committee.	C						-			00.00
	e of Employer (for Individual) west Bone & Joint Institute		pation (f	ior Individual) Suraeon		Me	emo	Item			
	pt For: Primary General Other (specify) ▼	Aggregate Y	•	5							
	lame of Individual (Last, First, Middle Initia ssidy, Carter, , , MD, FAAOS	tial) or Full Organization Name			Da	te of	Rec	eipt			
Mailin	g Address 4890 Faulkirk Lane				М	08 ^M	1	D D D 01		202	
City Lexir	ngton	State KY	Zip (405	Code 515					110791 eceipt t		riod
	ID number of contributing al political committee.	С				_					85.00
University of Kentucky Res Program			Occupation (for Individual) Orthopaedic Surgeon				emo	ltem			
	pt For: Primary General Other (specify)	Aggregate	Year-to-D	0ate ▼ 680.00							
SUBTO	TAL of Receipts This Page (optional)			•			,		,	15	85.00
TOTAL	This Period (last page this line number or	ıly)		•							

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th
Any information copied from such Reports and or for commercial purposes, other than using the			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Thompson, Matthew, Michael, , MD,FA Mailing Address 1102 Dead Run Dr City		Zip Code	Date of Receipt
Mc Lean FEC ID number of contributing federal political committee.	C	22101-2125	Amount of Each Receipt this Period
Name of Employer (for Individual) Drisko, Fee & Parkins Receipt For: Primary General Other (specify) v	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date V 1000.00	Memo Item
Full Name of Individual (Last, First, Middle I B. Murray, Douglas, H, , MD,FAAOS Mailing Address 4224 Valley Trail Dr	nitial) or Full O	Zip Code	Date of Receipt
Atlanta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Peachtree Orthopedic Clinic Receipt For: Primary General Other (specify) ▼	Orth	30339 upation (for Individual) hopaedic Surgeon Year-to-Date ▼ 500.00	Transaction ID : 11079195 Amount of Each Receipt this Period 500.00 Memo Item
C. Mencio, Gregory, A, , MD,FAAO Mailing Address 906 Riverbend Rd		rganization Name	Date of Receipt
City Nashville FEC ID number of contributing federal political committee.	State TN	Zip Code 37221	Transaction ID : 11079198 Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Vanderbilt Medical Center Receipt For: Primary General Other (specify)	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			2500.00

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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17		
	ny information copied from such Reports and St for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS		
A. Wynder, Steven, G, , MD,FAAOS Mailing Address 5290 W 612 N		ial) or Full Or	rganization Name	Date of Receipt		
	City Huntington	IN	46750	Transaction ID : 11079199		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 84.00		
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item		
	Parkview Ortho Hospital	Orth	opaedic Surgeon			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]		
В.	Full Name of Individual (Last, First, Middle Init Gottschalk, Michael, Brandon, , MD,		ganization Name	Date of Receipt		
	Mailing Address 4799 Olde Village Cv			M M / D D / Y		
	City	State	Zip Code	Transaction ID : 11079200		
	Atlanta	GA	30338-5055	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		250.00		
	Name of Employer (for Individual) Emory University		ipation (for Individual) opaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]		
с.	Full Name of Individual (Last, First, Middle Init Knight, Bradford, S, , MD, FAAOS		rganization Name	Date of Receipt		
	Mailing Address 11701 Pine Tree Dr			08 / D D / Y Y Y Y 08 02 2021		
	City Fairfax	State VA	Zip Code 22033-2712	Transaction ID : 11079202		
		VA	22033-2712	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			250.00		
	Name of Employer (for Individual) Prince William Orthopaedics		pation (for Individual)	Memo Item		
	Boosint For:		Year-to-Date ▼			
	Primary General Other (specify)		750.00	1		
s	UBTOTAL of Receipts This Page (optional)			584.00		
ר	OTAL This Period (last page this line number of	only)				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 69 OF 551 (check only one)
	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any period he name and address of any political committee	to solicit contributions from such committee.
		ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Rana, Adam, J, , MD, FAAOS Mailing Address 12 Landing Woods Ln	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	08 02 2021 Transaction ID : 11079203
Falmouth	ME 04105-1948	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Maine Medical Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name of Individual (Last, First, Middle I Smith, Eric, Louis, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt
Mailing Address 1573 Beacon Street		08 02 2021
City	State Zip Code	Transaction ID : 11079204
Waban	MA 02468	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Boston Medical Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) ▼	672.00	
Full Name of Individual (Last, First, Middle I Dowd, Thomas, Charles, , MD, F		Date of Receipt
Mailing Address 407 Country Ln	08 02 2021	
City San Antonio	StateZip CodeTX78209-2320	Transaction ID : 11079205 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Department of Orthopaedics and Rehabil	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	·	434.00
TOTAL This Period (last page this line numbe	er only)	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 70 OF 55' (check only one)		
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using th				
/		opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Ir Watson, Troy, S, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt		
Mailing Address 75 Kittansett Loop	State Zip Code	08 / D D / Y Y Y Y Y 08 02 2021 Transaction ID : 11079206		
Henderson	NV 89052-6694	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer (for Individual) Desert Orthopaedic Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00]		
Full Name of Individual (Last, First, Middle Ir 3. Williams, Claude, Somers, , MD, F		Date of Receipt		
Mailing Address 1737 Jefferson Avenue		08 02 2021		
City New Orleans	State Zip Code LA 70115	Transaction ID : 11079589 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C			
Name of Employer (for Individual) Southern Orthopaedic Specialists	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Middle Ir Sankar, Wudbhav, N, , MD,FAAC		Date of Receipt		
Mailing Address 534 Montgomery School Ln	ailing Address 534 Montgomery School Ln			
City Wynnewood	StateZip CodePA19096	Transaction ID : 11080876 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer (for Individual) Childrens Hospital of Philadelphia	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00]		
SUBTOTAL of Receipts This Page (optional)	·	1500.00		
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FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 b mark 11 c mark 12 mark 13 mark 12 mark 15 mark 16 mark 17 mark 13 mark 12 mar
An or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Everman, David, Glenn, , MD, FAAOS Mailing Address 57 Bayberry Ln City Myrtle Beach FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	State SC C Occu Orth	rganization Name Zip Code 29572 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 750.00	Date of Receipt 08 / 03 / 2021 Transaction ID : 11080971 Amount of Each Receipt this Period 250.00 Memo Item
В.	Full Name of Individual (Last, First, Middle Initia Rosenwasser, Melvin, Paul, , MD, FA Mailing Address 38 Ludlow Ln		Date of Receipt	
	City Palisades FEC ID number of contributing federal political committee. Name of Employer (for Individual) Columbia University Medical Center Receipt For: Primary General Other (specify) ▼	Orth	Zip Code 10964 upation (for Individual) nopaedic Surgeon Year-to-Date 250.00	Transaction ID : 11082130 Amount of Each Receipt this Period 250.00 Memo Item
C.	Full Name of Individual (Last, First, Middle Initia Stokesbary, Steven, J, , MD,FAAO Mailing Address 627 Arrowhead Ct	rganization Name	Date of Receipt	
	City Dakota Dunes FEC ID number of contributing federal political committee. Name of Employer (for Individual) CNOS Receipt For:	Ortho	Zip Code 57049 upation (for Individual) opaedic Surgeon Year-to-Date ▼	Transaction ID : 11082131 Amount of Each Receipt this Period 84.00 Memo Item
⊢	Primary General Other (specify)		672.00	584.00
T	DTAL This Period (last page this line number o	nly)	····· •	

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Black, David, Albritton, , MD,PhD Mailing Address 12112 Fairway Drive City Little Rock FEC ID number of contributing federal political committee.	e Initial) or Full O State AR	rganization Name Zip Code 72212	Date of Receipt M M 0 0 2021 Transaction ID : 11082132 Amount of Each Receipt this Period
Name of Employer (for Individual) Univ of Arkansas Receipt For:	Aggregate	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 672.00	Memo Item
Full Name of Individual (Last, First, Middle B. Prohaska, Matthew, G, , MD,FAA Mailing Address 69 Griggs Hill Road City Danville FEC ID number of contributing federal political committee. Name of Employer (for Individual) NVRH Orthopaedic Clinic Receipt For: Primary General Other (negative)	AOS State VT C Occu Orth	Zip Code 05828 Upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Date of Receipt
Other (specify) ▼ Full Name of Individual (Last, First, Middle C. Lintecum, Neal, D, , MD, FAAC Mailing Address 789 N 1500 Road City Lawrence FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	State KS C Occu Orth	Zip Code 66049-9194 Upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1600.00	Date of Receipt 08 / 05 / 2021 Transaction ID : 11084075 Amount of Each Receipt this Period 200.00 Memo Item
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	,		► 368.00

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ITEMIZED RECEIPTS			f	Jse separate schedule(s) for each category of the Detailed Summary Page	(che	ck onl 11a 13		e) 11b 14	11c		2 6 1	
	r information copied from such Reports and Sta or commercial purposes, other than using the r											
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Ortho								paedic SurgeonsPAC of AAOS				
Α.	Full Name of Individual (Last, First, Middle Initial) or Ful Ellis, Henry, Bone, , Jr, MD,FAA Mailing Address 2945 Stanford Ave					Date of Receipt						
	City Dallas	State TX		Zip Code 75225					110840		riod	
	FEC ID number of contributing rederal political committee.	С				Amoun			eceipt t	nis Pei	84.00	
ī	Name of Employer (for Individual)	Oc	cupat	tion (for Individual)		М	emo	Item				
	Texas Scottish Rite Sports Medicine	Or	thopa	aedic Surgeon								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 672.00								
B.	Full Name of Individual (Last, First, Middle Initia Brolin, Tyler, James, , MD,FAAOS	-	Orgar	nization Name		Date o	f Red	·				
	Mailing Address 9294 Ingleside Farms Drive Sou	uth					/	05	JL	202		
	Germantown	TN		38139					110840 eceipt t		riod	
	FEC ID number of contributing rederal political committee.	C				250.00						
	Name of Employer (for Individual) Campbell Clinic		•	tion (for Individual) aedic Surgeon		М	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ur-to-Date ▼ 750.00								
	Full Name of Individual (Last, First, Middle Initia Schmale, Gregory, A, , MD, FAAO		Orgai	nization Name		Date o	f Red	ceipt				
	Mailing Address 6515 126th Ave NE					м м 08	/	06	JL	202		
	City Kirkland	State WA		Zip Code 98033				-	110845 eceipt t		riod	
	FEC ID number of contributing ederal political committee.	С				anoun					84.00	
Seattle Children's Ort			•	tion (for Individual) edic Surgeon		M	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 672.00								
รเ	JBTOTAL of Receipts This Page (optional)			····· •				9	9	4	18.00	
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us			berson for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee	of the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Mi Hasan, Syed, Ashfaq, , MD,FAAC Mailing Address 7730 Elmwood Road	ddle Initial) or Full C DS	rganization Name	Date of Receipt
City Fulton	State MD	Zip Code 20759	Transaction ID : 11084518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) University of Maryland School of Medic Receipt For: Primary General	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Memo Item
Uther (specify) ▼ Full Name of Individual (Last, First, Mi	ddle Initial) or Full C	750.00	
B. Burke, Charles, J, , III, MD, F Mailing Address 200 Delafield Rd Ste 4010			Date of Receipt
City Pittsburgh	State PA	Zip Code 15215-3235	Transaction ID : 11084519 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individual) UPMC		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]
Full Name of Individual (Last, First, Mi Archdeacon, Michael, T, , M		organization Name	Date of Receipt
Mailing Address 4538 Philnoll Dr			M M / D D / Y
City Cincinnati	State OH	Zip Code 45247-5079	Transaction ID : 11084520 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) UC Dept of Orthopaedics Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]
SUBTOTAL of Receipts This Page (option	onal)		584.00
TOTAL This Period (last page this line n	umber only)		

FOR LINE NUMBER: PAGE 75 OF 551

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and St for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) Political Action Committee of the	paedic SurgeonsPAC of AAOS							
Α.	Full Name of Individual (Last, First, Middle Initi Gomez, Gregory, , , MD Mailing Address 6201 Moonfield Dr	al) or Full O	rganization Name	Date of Receipt					
				08 06 2021					
	City Huntington Beach	State CA	Zip Code 92648	Transaction ID : 11084521 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) Emanate Health		ipation (for Individual) opaedic Surgeon	Memo Item					
Dessint Far			Year-to-Date ▼ 400.00						
В.	Full Name of Individual (Last, First, Middle Initi Glassner, Philip, Justin, , MD, FAAO Mailing Address 67 Kingwood Stockton Rd	Date of Receipt							
	City	State	Zip Code	Transaction ID : 11084730					
	Stockton	NJ	08559	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) MidJersey Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00						
<u></u> с.	Full Name of Individual (Last, First, Middle Initi Green, Daniel, William, , MD,FAAC		rganization Name	Date of Receipt					
	Mailing Address 535 E 70th St	-		08 / D / Y Y Y Y 2021					
	City New York	State NY	Zip Code 10021	Transaction ID : 11084731					
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Occ Orth Hosp for Special Surgery Orth				Amount of Each Receipt this Period					
			ipation (for Individual) opaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1400.00						
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c			1225.00					

Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s)				(check only one)						
			for each category of the Detailed Summary Page				11b 14	11c		12 16	17	
	ny information copied from such Reports and S for commercial purposes, other than using the							f solicitin				
	NAME OF COMMITTEE (In Full) Political Action Committee of th	e America	an	Association of Orthc	pa	edic Su	urgeon	sPA	C of	[:] AA	OS	
Α.	Full Name of Individual (Last, First, Middle In Mosley, Emmett, Wayne, , MD,FAAOS,		rgar	nization Name		Date of Receipt						
	Mailing Address 220 Thompson PI											
	City Roswell	State GA		Zip Code 30075-3522	_	Transa Amount	ction ID : of Each F			eriod	_	
	FEC ID number of contributing federal political committee.	С					-			84.00	0	
	Name of Employer (for Individual) ASPIRUS		•	ion (for Individual) edic Surgeon		Mer	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 672.00								
в.	Full Name of Individual (Last, First, Middle Ini Kiner, Dirk, W, , MD,FAAOS	tial) or Full O	rgar	nization Name		Date of I	Receipt					
	Mailing Address 449 Canyon Springs Dr					08 07 2021						
	City Hixson	State TN		Zip Code 37343-2387	-	Transa Amount	ction ID : of Each F			eriod		
	FEC ID number of contributing federal political committee.	C								84.00	0	
	Name of Employer (for Individual) Southern Orthopaedic Trauma Surgeons	Occupation (for Individual) Orthopaedic Surgeon				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 672.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini Gallant, Gregory, G, , MD,MBA,F.		rgar	nization Name		Date of I	Receipt					
	Mailing Address 3588 Wellsford Lane					08 ^M	/ D 07		202		Y	
	City Doylestown	State PA		Zip Code 18902	_		ction ID : of Each F		-	eriod	_	
	FEC ID number of contributing federal political committee.					Amount of Each Receipt this Period						
	Name of Employer (for Individual) Rothman Institute		•	ion (for Individual) edic Surgeon		Mei	no Item					
	Receipt For: Aggregate Ye Primary General Other (specify)			r-to-Date ▼ 499.98								
s	UBTOTAL of Receipts This Page (optional)			•••••	-		y .	, ,	2	251.33	3	

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 77 OF 551 (check only one)
		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Political Action Committee of			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full Org Lane, Joseph, M, , MD,FAAOS Mailing Address 535 E 86th St Apt 14F		rganization Name	Date of Receipt
		Zip Code	08 07 2021 Transaction ID : 11084735
New York City	NY	10028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) Hosp for Special Surgery		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	_
Other (specify) ▼		500.00	1
Full Name of Individual (Last, First, Middle Davis, Charles, M, , III, MD,Ph	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 30 Hope Dr EC089			08 07 2021
City	State	Zip Code	Transaction ID : 11084737
Hershey	PA	17033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Penn State Health		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		1000.00]
Full Name of Individual (Last, First, Middle Leddy, Michael, J, , III, MD,FA	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 3444 Masonic Dr			08 08 2021
City Alexandria	State LA	Zip Code 71301	Transaction ID : 11084740
FEC ID number of contributing	_	71301	Amount of Each Receipt this Period
federal political committee.	C		
Name of Employer (for Individual) Central Louisiana Surgical Hospital		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	1
SUBTOTAL of Receipts This Page (optional)			1500.00
TOTAL This Period (last page this line numb	er only)		

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini A. Szczech, Bartlomiej, , , MD, FAAOS Mailing Address 89 Intervale Way City Lake Placid FEC ID number of contributing federal political committee. Name of Employer (for Individual) St Joseph's Hospital Med Ctr Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code NY 12946 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 800.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init B. Mejia, Alfonso, , , MD,MPH,FAA Mailing Address 5332 South Shore Drive	tial) or Full Organization Name State Zip Code	Date of Receipt 08 7 08 7 08 7 2021 Transaction ID : 11084742
Chicago FEC ID number of contributing federal political committee. Name of Employer (for Individual) Illinois Association of Orthopedic Sur	IL 60615 C Occupation (for Individual) Orthopaedic Surgeon	Amount of Each Receipt this Period 84.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1260.00	
C. Drinkwater, Christopher, John, , M Mailing Address 85 Barrington St		Date of Receipt
City Rochester FEC ID number of contributing federal political committee.	State NYZip Code 14607-2240C	Transaction ID : 11084743 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) University of Rochester Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		434.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NU	_				
ITEMIZED RECEIPTS			for each category of the	(check only one)					
			Detailed Summary Page	13	14 15 16 17				
	y information copied from such Reports and Sta				rpose of soliciting contributions				
or	for commercial purposes, other than using the r	name and a	ddress of any political committe	e to solicit contril	outions from such committee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	Amorica	an Association of Orth	onaedic Suu	PAC of AAOS				
	Tollical Action Committee of the	America							
^	Full Name of Individual (Last, First, Middle Initial) or Full Or Cyphers, Stephen, M, , MD,FAAOS Mailing Address 4020 Macpheadris Way City State El Dorado Hills CA		rganization Name	Date of R	aggint				
А.									
				08	08 2021				
			Zip Code	Transact	tion ID : 11084745				
			95762	Amount of	Each Receipt this Period				
	FEC ID number of contributing federal political committee.	ě l			500.00				
	Name of Employer (for Individual)		pation (for Individual)	Mem	o Item				
	El Dorado Multispecialty Medical Group	Orth	opaedic Surgeon						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General	· · ·	500.00	1					
	Other (specify) v		500.00	1					
в.	Full Name of Individual (Last, First, Middle Initia Clain, Michael, R, , MD, FAAOS	al) or Full O	rganization Name	Date of R	eceipt				
	Mailing Address 9 Indian Head Road			08	09 2021				
	City	State	Zip Code	Transaction ID : 11084746					
	Riverside	СТ	06878		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С			84.00				
	Name of Employer (for Individual) Orthopaedic & Neurosurgery Specialists		upation (for Individual) Iopaedic Surgeon	Mem	o Item				
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General			1					
	Other (specify) v		672.00	1					
<u> </u>	Full Name of Individual (Last, First, Middle Initia Silverman, Lance, M, , MD,FAAOS		rganization Name	Date of R	eceipt				
	Mailing Address 2774 W Lake of the Isles Pkwy				09 2021				
	City	State	Zip Code		tion ID : 11084747				
	Minneapolis	MN	55416		Each Receipt this Period				
	FEC ID number of contributing	0							
	federal political committee.				250.00				
			pation (for Individual)	Mem	o Item				
Silverman Orthopaedics Orth		opaedic Surgeon							
	Receipt For: Aggregate		Year-to-Date 🔻						
	Primary General	· · ·	750.00	1					
	Other (specify)		100.00	1					
s	UBTOTAL of Receipts This Page (optional)				834.00				
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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Spieles, Christopher, Joseph, , MD, FAAOS Date of Receipt Α. Mailing Address 649 Parkside Drive 1 2021 08 09 City Zip Code State Transaction ID: 11084882 OH Wauseon 43567 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Norheim, Elizabeth, Picnic, MD, FAAOS Date of Receipt Mailing Address 4535 Homer Street 08 10 2021 City State Zip Code Transaction ID : 11084890 CA Los Angeles 90031 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Kaiser Permanente Downey Medical Cente Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Nahigian, Kevin, K, MD, FAAOS Date of Receipt Mailing Address 85 Red Bay Rd М M 08 11 2021 City Zip Code State Transaction ID : 11087117 SC Elgin 29045 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Carolina Shoulder & Knee Specialists Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 672.00 Other (specify) 1084.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)		e separate schedule(s)	FOR LINE NUMBER: PAGE 81 OF 557 (check only one)				
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NAME OF COMMITTEE (In Full) Political Action Committee of the second sec			opaedic S	SurgeonsPAC of AAOS			
A. Henzes, John, Frank, , III, MD,FA	nitial) or Full Organiz	ation Name	Date of	Receipt			
Mailing Address 203 Squirrel Run	State Z	ip Code	08 Trans	10 2021 action ID : 11087179			
Clarks Green	PA	18411	Amount	t of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C			250.00			
Name of Employer (for Individual) Coordinated Health		n (for Individual) lic Surgeon	M	emo Item			
Receipt For:	Aggregate Year-t	o-Date 🔻					
Primary General Other (specify) ▼		250.00					
Full Name of Individual (Last, First, Middle II B. Guehlstorf, Daniel, W, , MD,FAAO		ation Name	Date of	^r Receipt			
Mailing Address 9083 Kensington Way			M M 08	/ D D / Y Y Y Y Y 10 2021			
City Franklin		ip Code 53132		action ID : 11087181			
FEC ID number of contributing		55152	Amoun	t of Each Receipt this Period			
federal political committee.	C			1000.00			
Name of Employer (for Individual) Orthopedic Surgeons of Wisconsin, SC		n (for Individual) dic Surgeon		emo Item			
Receipt For:	Aggregate Year-t	o-Date 🔻	_				
Other (specify) ▼		, 1000.00					
Full Name of Individual (Last, First, Middle II C. Walker, Robert, N, , MD, FAAOS		ation Name	Date of	Receipt			
Mailing Address 1873 E Parkhurst Ct			M M 08	/ D D / Y Y Y Y 10 2021			
City Eagle		ip Code 83616-6803		t of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С			250.00			
Name of Employer (for Individual) St. Luke's Boise Orthopedic Clinic		n (for Individual) ic Surgeon	М	emo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-t	o-Date ▼ 250.00					
SUBTOTAL of Receipts This Page (optional)			. [.	1500.00			
TOTAL This Period (last page this line numbe	r only)						

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilber, John, Howard, , MD, FAAOS Date of Receipt Α. Mailing Address 14255 County Line Rd 1 2021 08 10 City Zip Code State Transaction ID: 11087187 OH Chagrin Falls 44022 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Case Western Reserve University Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pullekines, Joseph, W, , MD, FAAOS Date of Receipt Mailing Address 262 Long Ridge Rd 08 10 2021 City State Zip Code Transaction ID : 11087191 SC Sunset 29685 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Baptist Southeast Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Diment, Michael, T., MD, FAAOS Date of Receipt Mailing Address 4425 Appomattox Drive М M 08 10 2021 City State Zip Code Transaction ID : 11087193 OH Sylvania 43560 Amount of Each Receipt this Period FEC ID number of contributing С 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Promedica Physicians Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 83 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)				
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements ma g the name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Political Action Committee of	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS				
Full Name of Individual (Last, First, Middle Portland, Gregory, H, , MD,FAAOS	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 666 Garland Ave			M M / D D / Y Y Y Y 08 10 2021				
City Winnetka	State IL	Zip Code 60093	Transaction ID : 11087194 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		300.00				
Name of Employer (for Individual) IBJI		upation (for Individual) nopaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle B. Davis, Paul, Allen, , MD Mailing Address 150 Stoney Creek Drive	e Initial) or Full O	rganization Name	Date of Receipt				
City	State	Zip Code	08 10 2021				
Florence	AL	35633-1581	Transaction ID : 11087195 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		400.00				
Name of Employer (for Individual) Davis Clinic		upation (for Individual) nopaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00					
Full Name of Individual (Last, First, Middle C. Stapor, David, J, , MD,FAAOS		rganization Name	Date of Receipt				
Mailing Address 2076 Hycroft Dr			08 / D D / Y Y Y Y 08 10 2021				
City Pittsburgh	State PA	Zip Code 15241	Transaction ID : 11087199 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		250.00				
Name of Employer (for Individual) Steel Valley Orthopedics		upation (for Individual) opaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]				
SUBTOTAL of Receipts This Page (optiona	l)		950.00				

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER: PAGE 84 OF 551

ITEMIZED RECEIPTS				se separate schedule(s) or each category of the retailed Summary Page	· ·	neck on 11a 13	ly on	e) 11b 14	11c	12 16	17
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	NAME OF COMMITTEE (In Full) Political Action Committee of the	pa	paedic SurgeonsPAC of AAOS								
Α.	Full Name of Individual (Last, First, Middle Initi Smith, William, M, , MD, FAAOS	al) or Full O	III Organization Name				Date of Receipt				
	Mailing Address 6602 DeLynn Dr			Zip Code	_	08 / D D / Y Y Y Y Y 2021					
	City Tifton	State GA		31794					110872 eceipt t	his Peric	od
	FEC ID number of contributing federal political committee.					<u> </u>		,	-	100	0.00
	Name of Employer (for Individual)	Осси	upati	on (for Individual)		N	lemo	Item			
	Titz Regional Health Systems	Orth	nopae	edic Surgeon							
	Receipt For: Primary General	Aggregate	Year	r-to-Date ▼							
	Other (specify) ▼		-	1000.00							
в.	Full Name of Individual (Last, First, Middle Initi Grondel, Robert, Jeffrey, , MD,FAAC		rgan	ization Name		Date c	of Red	ceipt			
	Mailing Address 10561 Jeffreys St Ste 230					08	/	D D D 10	/ Y	y y 2021	Y
	City	State NV		Zip Code 89052					1108720		
	Henderson FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period					
	Name of Employer (for Individual) Orthopedic Institute of Henderson		•	on (for Individual) edic Surgeon		N	lemo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 500.00							
<u> </u>	Full Name of Individual (Last, First, Middle Initi Purtill, James, J, , MD,FAAOS	al) or Full O	rgan	ization Name		Date c	of Red	ceipt			
	Mailing Address 651 Darby Paoli Rd					08 10 / Y Y Y Y 2021					
	City Villanova	State PA		Zip Code 19085					110872		
FEC ID number of contributing federal political committee.						Amour	it of I	Each R	eceipt t	his Peric 100	
Rothman Orthopaedic Specialty Hospital Orthopaedic Specialty Hospital			Occupation (for Individual) Orthopaedic Surgeon				lemo	ltem			
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00										
⊢	UBTOTAL of Receipts This Page (optional)				-	Ľ.	-	5		2500	0.00
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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check or 11a 13	nly one)				
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the	e purpose of solic	iting contributions			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	opaedic	paedic SurgeonsPAC of AAOS						
Α.	Full Name of Individual (Last, First, Middle Initi Mariorenzi, Louis, J, , MD,FAAOS Mailing Address 84 Bay View Dr	al) or Full Or	ganization Name	_	Date of Receipt				
	City	State	Zip Code	Tran	saction ID : 1108	7203			
	Jamestown	RI	02835	Amour	nt of Each Receip	t this Period			
	FEC ID number of contributing federal political committee.	С				1000.00			
	Name of Employer (for Individual)	Occu	pation (for Individual)	N	Memo Item				
	Orthopedic Associates	Ortho	ppaedic Surgeon						
	Receipt For:	Aggregate \	/ear-to-Date ▼						
	Primary General			1					
	Other (specify) ▼		1000.00	J					
В.	Full Name of Individual (Last, First, Middle Initi Dahl, William, John, , MD, FAAOS	al) or Full Or	ganization Name	Date of	of Receipt				
	Mailing Address 69 Ruffed Grouse Dr			08	08 / D D / Y Y Y Y 08 2021				
	City	State	Zip Code	Tran	saction ID : 1108	7204			
	Bridgeport	WV	26330-7989	Amour	nt of Each Receip	t this Period			
	FEC ID number of contributing federal political committee.	С			300.00				
	Name of Employer (for Individual) United Hospital Center		pation (for Individual) opaedic Surgeon	N	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 300.00]					
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi O'Hara, James, P, , MD, FAAOS	al) or Full Or	ganization Name	Date of	of Receipt				
	Mailing Address PO Box 1358			08	M M / D D / Y Y Y Y Y				
	City	State	Zip Code	Tran	saction ID : 1108	7205			
	Point Reyes Station	CA	94956	Amour	nt of Each Receip	t this Period			
	FEC ID number of contributing federal political committee.	С				250.00			
Self Employed Or			pation (for Individual) paedic Surgeon		Viemo Item				
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 250.00]					
s	UBTOTAL of Receipts This Page (optional)				5	1550.00			
т	OTAL This Period (last page this line number of	nly)	•••••••						

FOR LINE NUMBER:

PAGE 86 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t	erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Political Action Committee of t	ppaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle I Kean, Bret, T, , MD, FAAOS Mailing Address 6542 SE Lake Road Suite 201 City Milwaukie FEC ID number of contributing federal political committee. Name of Employer (for Individual) Eastside Orthopaedics & Sports Medicin Receipt For: Primary General Other (specify) ▼	Initial) or Full Organization Name State Zip Code OR 97222 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle B. Marsicano, Joseph, Gerard, , MD, Mailing Address 1412 Crabapple Dr		Date of Receipt
City Manasquan FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brielle Orthopedics Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 08736 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Transaction ID : 11087207 Amount of Each Receipt this Period 1000.00 Memo Item
C. Mudano, Mark, L, , MD,FAAOS Mailing Address 754 Jones Creek City Evans FEC ID number of contributing federal political committee. Name of Employer (for Individual) Washington County Regional Medical Cen	Initial) or Full Organization Name State Zip Code GA 30809-4038 C Occupation (for Individual) Orthopaedic Surgeon	Date of Receipt 08 / 10 / 2021 Transaction ID : 11087213 Amount of Each Receipt this Period 1000.00 Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	2500.00
SUBTOTAL of Receipts This Page (optional).		

SCHEDULE A (FEC Form 3X)			Lise separate soledula(a)	FOR LINE NUMBER: PAGE 87 OF 551	
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)	
			Detailed Summary Page	13 14 15 16 17	
	ny information copied from such Reports and Sta for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full)		duress of any pointear committee		
\rangle		America	an Association of Orth	opaedic SurgeonsPAC of AAOS	
Α.	Full Name of Individual (Last, First, Middle Initi Ebert, Frank, R, , MD,FAAOS	al) or Full O	organization Name	Date of Receipt	
	Mailing Address 612 W Chesapeake Ave	08 / D D / Y Y Y Y Y 08 10 2021			
	City	State MD	Zip Code	Transaction ID : 11087214	
	Towson		21204-6909	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		1000.00	
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item	
	Union Memorial Hospital	Orth	nopaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date V		
	Other (specify) ▼		1000.00	1	
				1	
в.	Full Name of Individual (Last, First, Middle Initi O'Donovan, Terrence, M, , MD, FAA		organization Name	Date of Receipt	
	Mailing Address 615 Maid Marion Hill			M = M / D = D / Y = Y = Y = Y Y 08 10 2021	
	City	State	Zip Code	Transaction ID : 11087215	
	Sherwood Forest	MD	21405	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer (for Individual) Chesapeake Orthopaedics		upation (for Individual) hopaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date V		
	Other (specify) ▼		, 1000.00]	
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Page, Jean-Maurice, , , MD, FAAOS			Date of Receipt	
0.	Mailing Address 405 Ridings Mitchell Creek Rd	08 10 2021			
	City	State	Zip Code	Transaction ID : 11087216	
	London	KY	40741	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer (for Individual) St Joseph Hospital London KY		upation (for Individual) Iopaedic Surgeon	Memo Item	
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify)		250.00	1	
_	UBTOTAL of Receipts This Page (optional)			2250.00	
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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using th				
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he America	n Association of Ortho	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle I A. Goodwiller, Steven, E, , MD, FAAOS Mailing Address 402 W 19th St City Panama City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary	State FL Occu Ortho	ganization Name Zip Code 32405-4602 pation (for Individual) opaedic Surgeon rear-to-Date ▼	Date of Receipt 08 10 2021 Transaction ID : 11087218 Amount of Each Receipt this Period 500.00 Memo Item	
Other (specify) ▼ Full Name of Individual (Last, First, Middle I	Initial) or Full Or	500.00		
B. Elia, Eugene, A, , MD, FAAOS Mailing Address 510 W Darby Rd City Havertown FEC ID number of contributing federal political committee.	State PA	Zip Code 19083-4630	Date of Receipt 08 10 2021 Transaction ID : 11087219 Amount of Each Receipt this Period 1000.00	
Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) V	Ortho	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item	
C. Pring, Maya, , , MD,FAAOS Mailing Address 2528 Denver St				
City San Diego FEC ID number of contributing federal political committee.	State Zip Code CA 92110		Transaction ID : 11087220 Amount of Each Receipt this Period 1000.00	
Name of Employer (for Individual) Rady Children's Hospital Receipt For: Primary General Other (specify)	Ortho	pation (for Individual) ppaedic Surgeon /ear-to-Date ▼ 1000.00	Memo Item	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe			2500.00	

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Concert only one) Image: The second secon
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a	ts may not be sold or used by any pe and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the Ame	erican Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or F A. Clark, Jason, Craig, , MD,FAAOS Mailing Address 3425 8th St City Stat Moline IL FEC ID number of contributing federal political committee. C Name of Employer (for Individual) ORA Orthopedics Receipt For: Aggre Primary General Other (specify) ▼ I	-	Date of Receipt 08 10 2021 Transaction ID : 11087221 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle Initial) or F B. Mitchell, Matthew, E, , MD, FAAOS Mailing Address 3903 Otter	-	Date of Receipt
Casper WY FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Summit Medical Center		Transaction ID : 11087224 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle Initial) or F C. Kahlon, Randeep, S, , MD, FAAOS Mailing Address 35 Harvest Ln City Stat Hockessin DE FEC ID number of contributing federal political committee. C	te Zip Code	Date of Receipt 08 / 12 / 2021 Transaction ID : 11087681 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) First State Orthopaedics Receipt For: Aggre Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon egate Year-to-Date ▼ 250.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		1750.00

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Star r commercial purposes, other than using the	atements may name and ad	not be sold or used by any p dress of any political committee	erson for the purpose of soliciting contributions
	AME OF COMMITTEE (In Full) Political Action Committee of the	America	n Association of Ortho	ppaedic SurgeonsPAC of AAOS
A	ull Name of Individual (Last, First, Middle Initia Kahlon, Randeep, S, , MD,FAAOS	al) or Full Org	ganization Name	Date of Receipt
_	ailing Address 35 Harvest Ln	08 / D D / Y Y Y Y 2021		
	ity lockessin	State DE	Zip Code 19707-2088	Transaction ID : 11087682 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		250.00
Fi	ame of Employer (for Individual) rst State Orthopaedics		pation (for Individual) paedic Surgeon	Memo Item
H [eceipt For: Primary General Other (specify) ▼	Aggregate Y	′ear-to-Date ▼ 500.00]
в. <u>Е</u>	ull Name of Individual (Last, First, Middle Initia Bernard, Johnathan, , , MD, MPH, F ailing Address 21549 Glebe View Dr	al) or Full Org	ganization Name	Date of Receipt
_	ity	State	Zip Code	08 12 2021
	roadlands	VA	20148	Transaction ID : 11087683 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		84.00
	ame of Employer (for Individual) ational Sports Medicine Institute		pation (for Individual) opaedic Surgeon	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	′ear-to-Date ▼ 672.00	
	ull Name of Individual (Last, First, Middle Initia Marinello, Patrick, Gaetano, , MD,		ganization Name	Date of Receipt
Μ	ailing Address 43 Bradhaven Rd	08 / D D / Y Y Y Y 08 12 2021		
	ity Blingerlands	State NY	Zip Code 12159	Transaction ID : 11087684 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		84.00
	ame of Employer (for Individual) he Bone and Joint Center		pation (for Individual) paedic Surgeon	Memo Item
R	eceipt For: Primary General Other (specify)	Aggregate Y	′ear-to-Date ▼ 772.00	
SUE	3TOTAL of Receipts This Page (optional)			418.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 91 OF 551 (check only one)	
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
	Statements may not be sold or used by any per he name and address of any political committee		
Political Action Committee of the		paedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle I Dodds, Julie, A, , MD,FAAOS Mailing Address 2603 90th Ave	nitial) or Full Organization Name	Date of Receipt	
City	State Zip Code	08 12 2021 Transaction ID : 11087685	
Lone Rock FEC ID number of contributing	IA 50559	Amount of Each Receipt this Period 84.00	
federal political committee.	Occupation (for Individual)	Memo Item	
Michigan State University Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00		
Full Name of Individual (Last, First, Middle I Means, Kenneth, Robert, , Jr, MD, Mailing Address 2908 Crabapple Ln		Date of Receipt	
City Ellicott City	State Zip Code MD 21042	08 12 2021 Transaction ID : 11087686	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer (for Individual) Union Memorial Hospital	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		
Braaton, Paul, J, , MD, FAAOS			
Mailing Address 1335 Coffee Rd 	State Zip Code	08 12 2021 Transaction ID : 11087687	
Modesto FEC ID number of contributing federal political committee.	CA 95355	Amount of Each Receipt this Period 84.00	
Name of Employer (for Individual) OrthoMed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 672.00		
SUBTOTAL of Receipts This Page (optional)	·····	418.00	
TOTAL This Period (last page this line numbe	er only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 92 OF 551	
ITEMIZED RECEIPTS			for each category of the	(check only one)	
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline & & & & & & & & & & & & & & & & & & $	
				erson for the purpose of soliciting contributions	
or	for commercial purposes, other than using the	name and a	ddress of any political committe	e to solicit contributions from such committee.	
$ \rangle$	NAME OF COMMITTEE (In Full)	America	an Association of Orth	opaedic SurgeonsPAC of AAOS	
\backslash	Tomical Action Committee of the			opaedic ourgeons-1 Ao of AAOO	
Full Name of Individual (Last, First, Middle Init A. Espinoza, Luis, M, , MD, FAAOS		ial) or Full O	rganization Name	Date of Receipt	
	Mailing Address 5 Savannah Ridge Lane	08 12 2021			
	City	State	Zip Code	Transaction ID : 11087688	
	Metairie	LA	70001	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		84.00	
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item	
	Orthopaedic Center for Sports Medicine	Orth	nopaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date 🔻		
	Primary General	672.00		1	
	Other (specify) v			1	
В.	Full Name of Individual (Last, First, Middle Init Schneider, Scott, B, , MD, FAAOS	ial) or Full O	rganization Name	Date of Receipt	
	Mailing Address 1180 Mary Hill Circle				
	City	State	Zip Code	08 12 2021	
	Hartland	WI	53029	Transaction ID : 11087689 Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	С		250.00	
	Name of Employer (for Individual) Orthopaedic Associates of Wisconsin		upation (for Individual) nopaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		750.00	1	
			, 750.00	1	
с.	Full Name of Individual (Last, First, Middle Init John, Thomas, K, , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt	
	Mailing Address 522 Eastbrook Rd			08 12 2021	
	City	State	Zip Code	Transaction ID : 11087690	
	Ridgewood	NJ	07450-2110	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		84.00	
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item	
	Active Orthopedics and Sports Medicine	Orth	opaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)		672.00	1	
			7	1	
s	UBTOTAL of Receipts This Page (optional)			418.00	

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SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 93 OF 551 (check only one)	
	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	ne American Association of Orth	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Ir Watling, Jonathan, , , MD Mailing Address 65 Starboard Reach	nitial) or Full Organization Name	Date of Receipt	
City	State Zip Code	08 12 2021 Transaction ID : 11087691	
Yarmouth	ME 04096	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer (for Individual) Columbia University	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00]	
Full Name of Individual (Last, First, Middle Ir 3. Mansfield, David, J, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 5019 Montoya Rd		08 12 _2021 _	
City El Paso	State Zip Code TX 79922	Transaction ID : 11087692 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	84.00	
Name of Employer (for Individual) El Paso Orthopaedic Surgery Group	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For:	Aggregate Year-to-Date ▼	_	
Other (specify) ▼	, 672.00]	
. Hogan, Kathleen, Anne, , MD, FA	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hogan, Kathleen, Anne, , MD, FAAOS		
Mailing Address 125 Castle Hill Rd		08 12 2021	
City Windham	StateZip CodeNH03087	Transaction ID : 11087693 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer (for Individual) NH Ortho Ctr	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	1	
SUBTOTAL of Receipts This Page (optional)	· ······	584.00	
TOTAL This Period (last page this line number	r only)		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American	Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Aldrich, Daniel, J, , MD, FAAOS Mailing Address 131 LaFayette Landing City Heath FEC ID number of contributing federal political committee. Name of Employer (for Individual) Lake Pointe Orthopaedics Receipt For: Primary General Other (specify) ▼	State TX C	Zip Code 75032 tion (for Individual) aedic Surgeon	Date of Receipt
Full Name of Individual (Last, First, Middle Krueger, Chad, A, , MD,FAAOS Mailing Address 705 Kyle Dr City Ambler FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify) ▼	State PA C	Zip Code 19002 ation (for Individual) aedic Surgeon	Date of Receipt 08 13 2021 Transaction ID : 11087962 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle James, Jeremy, R, MD,FAAOS Mailing Address 7 Briar Hollow St City Covington FEC ID number of contributing federal political committee. Name of Employer (for Individual) DISC of Louisiana Receipt For: Primary General Other (specify)	State LA Occupa	Zip Code 70433-4511 tion (for Individual) aedic Surgeon	Date of Receipt 08 / 13 / 2021 Transaction ID : 11087965 Amount of Each Receipt this Period 100.00 Memo Item
SUBTOTAL of Receipts This Page (optional).			684.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 95 OF 551		
ITEMIZED RECEIPTS		for each category of the	(check only one)		
		Detailed Summary Page	13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle I A. <u>Tait, Robert, J, , MD,FAAOS</u>	nitial) or Full O	rganization Name	Date of Receipt		
Mailing Address 10561 Jeffreys St Ste 230	Mailing Address 10561 Jeffreys St Ste 230				
City	State NV	Zip Code 89052-4268	Transaction ID : 11087989		
Henderson		69052-4206	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item		
Ortho Institute of Henderson	Orth	opaedic Surgeon			
	Aggregate	Year-to-Date V			
Primary General Other (specify) ▼		250.00]		
			_		
Full Name of Individual (Last, First, Middle I B. Ouzounian, Tye, , , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt		
Mailing Address 17401 Magnolia Blvd	•				
manning massee 17401 magnolia bivu	08 12 2021				
City	State	Zip Code	Transaction ID : 11087990		
Encino	CA	91316	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		1000.00		
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼		1000.00]		
Full Name of Individual (Last, First, Middle I		rganization Name			
C. Sculco, Thomas, P, , MD,FAAOS Mailing Address 132 E 95th St	5		Date of Receipt		
			08 12 2021		
City	State	Zip Code	Transaction ID : 11087991		
New York City	NY	10128	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer (for Individual) Hospital for Special Surgery		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]		
SUBTOTAL of Receipts This Page (optional)			1750.00		

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

FEC Schedule A (Form 3X) Rev. 06/2016

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Lavoie, Stephane, , , MD, FAAOS Mailing Address 101 Lake Harbor Drive City Deland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Florida Orthopedic Receipt For: Primary General Other (specify) ▼	State FL C Occ Orth	Zip Code 32724 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 08 12 2021 Transaction ID : 11087993 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle B. Lagan, Casey, Lee, , MD,FAAOS Mailing Address 8406 Georgetown Dr City Amarillo FEC ID number of contributing federal political committee. Name of Employer (for Individual) Moore County Hospital District Receipt For: Primary General Other (specify) ▼	State TX C Occ Ort	Zip Code 79119 Upation (for Individual) hopaedic Surgeon Year-to-Date V 500.00	Date of Receipt 08 12 2021 Transaction ID : 11087995 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle C. Daluga, Daniel, J, , MD,FAAOS Mailing Address 4601 Penelope Ct City West Lafayette FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	State IN C Occ Ort	Drganization Name Zip Code 47906 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 08 12 2021 Transaction ID : 11087997 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num			► 1000.00

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini A. Mandell, Peter, J, , MD,FAAOS Mailing Address 1720 El Camino Real Suite 120 City Burlingame FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ✓	CA CA CC CA CC Occu	Irganization Name Zip Code 94010 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 5000.00	Date of Receipt
B. Full Name of Individual (Last, First, Middle Ini B. Reilly, John, Patrick, , MD,FAAOS Mailing Address 60 Copperflagg Ln	itial) or Full O	rganization Name	Date of Receipt
City Staten Island FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For:	Orth	Zip Code 10304 upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Transaction ID : 11088000 Amount of Each Receipt this Period 1000.00 Memo Item
Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Ini C. Jobe, Christopher, M, , MD, FAAC Mailing Address 160 W Highland		1000.00 rganization Name	Date of Receipt
City Redlands FEC ID number of contributing federal political committee.	State CA	Zip Code 92373	Transaction ID : 11088002 Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Loma Linda Univ Ortho Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			7000.00

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)	
			Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17	
	y information copied from such Reports and Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)				
				paedic SurgeonsPAC of AAOS	
Α.	Full Name of Individual (Last, First, Middle Initia Courtney, Paul, Maxwell, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt	
	Mailing Address 902 S Front St			08 / D D / Y Y Y Y 08 14 2021	
	City Philadelphia	State PA	Zip Code 19147	Transaction ID : 11088060 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		84.00	
	Name of Employer (for Individual) Rothman Institute		upation (for Individual) opaedic Surgeon	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00		
В.	Full Name of Individual (Last, First, Middle Initia Carter, Ralph, E, , III, MD, F	Date of Receipt			
	Mailing Address 201 Sterling Ln			08 14 2021	
	City	State NC	Zip Code	Transaction ID : 11088061	
	Laurinburg FEC ID number of contributing	C	28352	Amount of Each Receipt this Period	
	federal political committee.		unction (for Individual)	Memo Item	
	Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00		
— C.	Full Name of Individual (Last, First, Middle Initia Brown, Treg, D, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt	
	Mailing Address 110 Sunrise Trail	08 14 2021			
	City Carbondale	State IL	Zip Code 62902	Transaction ID : 11088063 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	Name of Employer (for Individual) The Orthopaedic Institute		upation (for Individual) opaedic Surgeon	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00		
s	UBTOTAL of Receipts This Page (optional)			584.00	
Т	OTAL This Period (last page this line number o	nly)	••••••		

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ITEMIZED RECEIPTS		each category of the hiled Summary Page	(check only one)
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American As	sociation of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Init A. Nelson, Daniel, Richard, , MD, FAAOS Mailing Address 869 E Sawgrass Trl City North Sioux City FEC ID number of contributing federal political committee. Name of Employer (for Individual) CNOS Receipt For: Primary General Other (specify)	State Zip SD 5) Code 57049-5198 (for Individual) c Surgeon	Date of Receipt
Full Name of Individual (Last, First, Middle Init B. Guevara, Benjamin, G, , MD, FAAOS Mailing Address 280 Remington Dr	S	tion Name	Date of Receipt
Mandeville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ochsner Health Center Receipt For: Primary General Other (specify) ▼	LA 7	0448 (for Individual) c Surgeon	Transaction ID : 11088065 Amount of Each Receipt this Period 250,00 Memo Item
Full Name of Individual (Last, First, Middle Init C. Service, Benjamin, , , MD,FAAOS Mailing Address 8710 Crestgate Circle City Orlando FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orlando Health Receipt For: Primary General Other (specify)	State Zip FL 3:	o Code 2819 (for Individual) c Surgeon	Date of Receipt Mom / D D / 2021 Transaction ID : 11088067 Amount of Each Receipt this Period 84.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			1334.00

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 100 OF 551
IT	EMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)	name allu à	uaross of any political committee	
$\left \right\rangle$		America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Grimm, Matthew, R, , MD, FAAOS			Date of Receipt
	Mailing Address 920 Avenue B	08 / D D / Y Y Y Y Y 2021		
	City	State LA	Zip Code 70072	Transaction ID : 11088070
	Marrero		10012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
	Jefferson Orthopaedic Clinic	Orth	opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		672.00]
	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name			Data of Descipt
В.	Forman, Scott, K, , MD, FAAOS			Date of Receipt
	Mailing Address 25 High Water	State	Zip Code	08 16 Y Y Y Y Y 2021
	Newport Coast	CA	92657-2149	Transaction ID : 11088071
	FEC ID number of contributing			Amount of Each Receipt this Period
	federal political committee.	С		250.00
	Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		, 750.00]
_	Full Name of Individual (Last, First, Middle Initi Abbott, James, Douglas, , MD,FAA		rganization Name	Data of Descipt
U.	Mailing Address 4727 Carriage Dr	100		Date of Receipt
	Hanning Floorood 4727 Calliage Di			08 16 2021
	City	State	Zip Code	Transaction ID : 11088072
	Mason	OH	45040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual)	e of Employer (for Individual) Occupation (for Individual)		
	Orthopaedic and Sports Medicine Consul		opaedic Surgeon	—
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		1000.00	1
	Other (specify)	<u> </u>		1
s	UBTOTAL of Receipts This Page (optional)			1334.00

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

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 13 14	11c 12 15 16 17			
Any information copied from suc or for commercial purposes, oth							
NAME OF COMMITTEE (In I Political Action Com		an Association of Orth	opaedic Surgeons	SPAC of AAOS			
A. Wohlrab, Kurt, Patrick, , I		rganization Name	Date of Receipt				
Mailing Address 75 Woodenk	pridge Lane	08 / D D 08 16					
City Pinehurst	State NC	Zip Code 28374-8642	Transaction ID : Amount of Each R				
FEC ID number of contributir federal political committee.	C			1000.00			
Name of Employer (for Indivi Pinehurst Surgical	,	ipation (for Individual) opaedic Surgeon	Memo Item				
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 2000.00]				
Full Name of Individual (Last B. Katz, Danielle, , , MD,I Mailing Address 5122 Reis C		rganization Name	Date of Receipt	/ Y Y Y Y Y			
City Fayetteville	State			2021 11088950			
FEC ID number of contributir federal political committee.				Amount of Each Receipt this Period			
Name of Employer (for Indivi Suny Upstate		upation (for Individual) opaedic Surgeon	Memo Item				
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 1000.00]				
Full Name of Individual (Last C. Wright, Kevin, Earl, ,	, First, Middle Initial) or Full O MD,FAAOS	rganization Name	Date of Receipt				
Mailing Address 303 East 33 11D		08 / D D 16	2021				
City New York	State NY	Zip Code 10016	Transaction ID : Amount of Each R				
FEC ID number of contributir federal political committee.	C			500.00			
Name of Employer (for Indivi Self Employed	,	ipation (for Individual) opaedic Surgeon	Memo Item				
Receipt For: Primary Gene Other (specify)		Year-to-Date ▼ 500.00	1				
SUBTOTAL of Receipts This P	age (optional)			2500.00			
TOTAL This Period (last page	this line number only)						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)		
Any information copied from such Reports and St or for commercial purposes, other than using the			erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e Americar	Association of Ortho	ppaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Initi A. McCulloch, Patrick, T, , MD, FAAOS Mailing Address 307 Buckingham Drive City Venetia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Advanced Ortho & Rehab Receipt For: Primary General Other (specify)	State PA C	Zip Code 15367 ation (for Individual) baedic Surgeon	Date of Receipt		
Full Name of Individual (Last, First, Middle Initi B. Greene, Robert, Neil, , MD,FAAOS Mailing Address 1211 N 16th Ave	ial) or Full Orga	anization Name	Date of Receipt 08 17 2021		
City Yakima FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedics Northwest PLLC Receipt For: Primary General Other (specify) ▼		Zip Code 98902 ation (for Individual) paedic Surgeon ear-to-Date 672.00	Transaction ID : 11089901 Amount of Each Receipt this Period 84.00 Memo Item		
Full Name of Individual (Last, First, Middle Initi C. Olsen, Adam, S, , MD Mailing Address 3686 Washington Street Apt 2520 City Boston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify)	State MA C	Zip Code 02130 ation (for Individual) paedic Surgeon	Date of Receipt 08 17 2021 Transaction ID : 11089902 Amount of Each Receipt this Period 42.00 Memo Item		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of			210.00		

Use separate schedule(s)

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Detailed Summary Page 11a 11b 11c 12 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. 11a 11b 11c 12 NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt A. Jeray, Kyle, James, , MD,FAAOS Mailing Address Dept of Orthopedic Surgery T01 Grove Rd 2nd FI Support Tower Date of Receipt Date of Receipt City State Zip Code SC 29605 FEC ID number of contributing federal political committee. Occupation (for Individual) Occupation (for Individual) Memo Item Greenville Health System Orthopaedic Surgeon Aggregate Year-to-Date ▼ Memo Item Memo Item Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Intervention Intervention Intervention		-	Use separate schedule(s)		(check only one)				
my information copied from such Reports and Statements may not be sold or used by any parcen for the purpose of clocking contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributors from such committee. NAME: OF COMMITTEE (in Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jarax, Kyde, James, MD, FAAOS Date of Receipt Mailing Address Dept of Orthopedic Surgery 701 Corve Rd 2nd Fl Support Tower City State Zip Code Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jarax, Kyde, James, MD, FAAOS Date of Receipt Name of Employer (for Individual) Greenville Heatin System Occupation (for Individual) Orthopaedic Surgeon Date of Receipt Buil Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Urband, Lindsey, ., MD, FAAOS Date of Receipt Mailing Address 1506 Alrond Orchard Lane Surie 403 City State Zip Code State 403 Outprogreate Vest-to-Date ▼ Memo Item Primary General 	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page			— I F		17	
NAME OF COMMITTEE (in Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jerzy, Kyle, James, MD/FAAOS Mailing Address Dept of Orthopaedic Surgery 701 Grows Rd 2nd Fi Support Tower City City State State Commercial committee City Press, MD/FAAOS Mailing Address State City City City City City City City San Diego Mailing Address Stope Amound Orchard Lane Suite 403 City San Diego Primary Ceneral Other (specify) Aggregate Year-to-Date ▼ Primary Ceneral Other (specify) San Diego Primary Ceneral Other (specify) Aggregate Year-to-Date ▼ Primary Ceneral Other (s	Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p Iddress of any political committe	erson for the	purpose of	soliciting	contributi	ions	
Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Jeray, Kyle, James, MD, FAAOS Mailing Address Dept of Orthopedic Surgey Zity City Receipt for City Greenville City Greenville Piel Name of Individual (Last, First, Middle Initial) or Full Organization Name City Greenville Point of contributing City Greenville Point of contributing City Greenville Date of Receipt for Primary General Orthor (specify) * Built Name of Individual (Last, First, Middle Initial) or Full Organization Name Built Name of Individual (Last, First, Middle Initial) or Full Organization Name City State San Diego Cit San Diego Hand Specialitis Occupation (for Individual) Other (specify) Aggregate Year-to-Date V Primary General General Other (specify) Aggr									
A. Jerzy, Kyle, James, MD.FAAOS Date of Roccipit Mailing Address Dept of Orthopedic Surgery City State Zip Code City State Zip Code Creenville C 29005 Name of Employer (for Individual) Occupation (for Individual) Occupation Name Creenville State 250.00 B. Urband, Lindsey, , MD.FAAOS Memo Item B. Urband, Lindsey, , MD.FAAOS Date of Receipt Mailing Address 15066 Almond Orchard Lane State Zip Code State Zip Code 2000 FEC ID number of contributing federal political committee. C Aggregate Year-to-Date ♥ Date of Receipt Other (specify) ♥ Ca 92131 FEC ID number of contributing federal political committee. C Aggregate Year-to-Date ♥ Maing Address 2007 Duncaster C1 Other (specify) ♥ Gareral Occupation (for Individual) Ontopaedic Surgeon Receipt For: Prioritie General Occupation (for Individual) Ontopaedic Surgeon Date of Receipt Receipt For: Prioritie Aggregate Yea-to-Date ♥ Transaction ID : 1109272 Transaction ID : 1109273 Full Name of Individual (Last, First, Middle I		the Americ	an Association of Orth	opaedic S	Surgeon	sPAC	of AA	OS	
Toti Grove Rd 2nd Fi Support Tower. 08 01 2021 Gity State 290.00 FEC. ID number of contributing federal political committee. C 280.00 Name of Employer for Individual) Occupation (for Individual) 0rthopaadic Surgeon Receipt For: Aggregate Year-to-Date ▼ 08 Ptil Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt B. Urband, Lindsey,, MD,FAAOS Malling Address 15066 Almond Orchard Lane Suite 403 State Zip Code San Diego State Zip Code San Diego State Zip Code San Diego Hand Specialists Occupation (for Individual) Orther (specify) ▼ Aggregate Year-to-Date ▼ Primary General Othopaadic Surgeon Receipt For: Receipt Individual) Orthopaadic Surgeon Receipt For: Aggregate Year-to-Date ▼ Transaction D: 11090272 And Maling Address 9207 Duncaster Ct Aggregate Year-to-Date ▼ Date of Receipt Individual Other (specify) ▼ State Zip Code 37027 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Individual Other (specify) ▼ General Othopaedic Surgeon Recipt Fo		Initial) or Full C	organization Name	Date o	f Receipt				
Greenville SC 29605 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer (for Individual) Greenville Health System Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt B. Urband, Lindsey,, MD, FAAOS Maling Address 15068 Amond Orchard Lane Suite 403 Date of Receipt Maling Address 15068 Amond Orchard Lane Suite 403 C 92131 FEC ID number of contributing federal political committee. C 1000000000000000000000000000000000000						D / Y		Y	
FEC ID number of contributing federal political committee. C 250.00 Name of Employer (for Individual) Greenville Health System Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: B. Urband, Lindsey,, MD,FAAOS Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 15066 Almond Orchard Lane Suite 403 C Date of Receipt City San Diego State Suite 403 Zip Code CA 92131 FEC ID number of contributing federal political committee. C Memo Item Name of Employer (for Individual) San Diego Hand Specialists Occupation (for Individual) Orthopaedic Surgeon Date of Receipt Receipt For: Primary C. Engstrom, Stephen, Matthew, , MD, FAAOS Aggregate Year-to-Date ▼ Memo Item Mailing Address 12020 Duncester Ct C State Tan Saction ID : 11090273 Date of Receipt Mailing Address 12020 Duncester Ct C State Tan Saction ID : 11090273 Amount of Each Receipt this Period FeC ID number of contributing federal political committee. C State Tan Saction ID : 11090273 Amount of Each Receipt this Period Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address 12020 Duncester Ct State Tan Saction ID : 11090273	-			Trans	action ID :	11090195			
rederal political committee.	Greenville	SC	29605	Amoun	t of Each F	Receipt this	Period		
Greenville Health System Orthopaedic Surgeon Receipt For:	•	С					250.0	0	
Primary General Durber dispectivy 250.00 B. Urband, Lindsey, ., MD, FAAOS Malling Address 15066 Almond Orchard Lane Date of Receipt San Diego CA 92131 Transaction ID: 11090272 Amount of Each Receipt for: Berlinder (specify) Berlinder (specify) Aggregate Year-to-Date ▼ Name of Employer (for Individual) Occupation (for Individual) Occupation Name Berlinder (specify) Receipt For: Aggregate Year-to-Date ▼ 672,00 Memo Item Primary General Other (specify) Date of Receipt Ctiv San Diego Hand Occupation (for Individual) Memo Item San Diego Hand General Occupation (for Individual) Memo Item San Diego Hand General Occupation Name Englistration Name C. Englistration Aggregate Year-to-Date ▼ 672,00 Date of Receipt Brentwood TN 37027 Amount of Each Receipt Ibis Period 84.00 FEC. ID number of contributing federal political committee. C State Zip Code Transaction ID: 11090273 Mailing Address g207 Duncaster Ct C C			, ,	M	emo Item				
□ Other (specify) ▼ 250.00 B. Urband, Lindsey, . , MD,FAAOS Date of Receipt Mailing Address 15066 Almond Orchard Lane Suite 403 Date of Receipt City State Zip Code San Diego CA 92131 FEC ID number of contributing federal political committee. C 44.00 Name of Employer (for Individual) San Diego Hand Specialists Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Aggregate Year-to-Date ▼ 672,00 Date of Receipt Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt C. Engstrom, Stephen, Matthew, , MD, FAAOS Mailing Address 9207 Duncaster Ct Date of Receipt this Period City State Zip Code Transaction ID : 11090273 Mailing Address 9207 Duncaster Ct 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 84.00 84.00 Name of Employer (for Individual) Vanderbit Univ-Vanderbilt Ortho Inst Occupation (for Individual) Orthopaedic Surgeon Memo Item Name of Employer (for Individual) Vanderbit Univ-Vanderbilt Ortho Inst Optiopaedic Surgeon Memo Item Memo Item		Aggregate	Year-to-Date V						
B. Urband, Lindsey, , , MD, FAAOS Mailing Address 15066 Almond Orchard Lane Suite 403 City San Diego FEC ID number of contributing federal political committee. Name of Employer (for Individual) San Diego Hand Specialists Primary General Other (specify) ▼ City Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Transaction ID: 11090272 Address 9207 Duncaster Ct 672,00 City State Transaction ID: 11090273 Mailing Address 9207 Duncaster Ct 04 / 2021 City State Transaction ID: 11090273 Mailing Address 9207 Duncaster Ct 08 / 04 / 2021 City State Transaction ID: 11090273 Mailing Address 9207 Duncaster Ct 08 / 04 / 2021 City State Transaction ID: 11090273 Mailing Address 9207 Duncaster Ct 08 / 04 / 2021 FEC ID number of contributing federal political committee. 01 / 02 / 2021 Name of Employer (for Individual) 0ccupation (for Individual) Vanderbill Univ-Vanderbill Ortho Inst Aggregate Year-to-Date ▼ Primary General 672,00				1					
Suite 403 Q8 Q4 2021 City State Zip Code 92131 Transaction ID : 11090272 FEC ID number of contributing federal political committee. C 92131 Amount of Each Receipt this Period Name of Employer (for Individual) San Diego Hand Specialists Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 672,00 Date of Receipt City State Zip Code Transaction ID : 11090273 Mailing Address 9207 Duncaster Ct 08 04 2021 City State Zip Code Transaction ID : 11090273 Amount of Each Receipt this Period 622.00 04 2021 FEC ID number of contributing federal political committee. C 84.00 04 2021 Name of Employer (for Individual) Vanderbilt Univ-Vanderbilt Otho Inst Occupation (for Individual) Othopaedic Surgeon Memo Item 84.00 Memo Item 672.00 Memo Item 84.00 142.00 142.00	Full Name of Individual (Last, First, Middle B. Urband, Lindsey, , , MD,FAAOS				f Receipt				
San Diego CA 92131 Amount of Each Receipt It his Period FEC ID number of contributing federal political committee. C 84.00 Mount of Each Receipt It his Period Name of Employer (for Individual) San Diego Hand Specialists Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Aggregate Year-to-Date ▼ Image: Common Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address g207 Duncaster Ct City State Zip Code Transaction ID : 11090273 Greeipt For: City State Zip Code Transaction ID : 11090273 Mawn of Employer (for Individual) Occupation (for Individual) Mount of Each Receipt Mount of Each Receipt Vanderbilt Univ-Vanderbilt Ortho Inst Occupation (for Individual) Orthopaedic Surgeon Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Memo Item Name of Employer (for Individual) Occupation (for Individual) Memo Item Memo Item Vanderbilt Univ-Vanderbilt Ortho Inst Aggregate Year-to-Date ▼ Memo Item Memo Item	Suite 403	1						Y	
FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) San Diego Hand Specialists Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 672.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address 9207 Duncaster Ct 04 / 2021 City Brentwood State Zip Code Tw 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Vanderbit Univ-Vanderbit Ortho Inst Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Primary General Aggregate Year-to-Date ▼ Memo Item Primary General Aggregate Year-to-Date ▼ Memo Item									
federal political committee. B4.00 Name of Employer (for Individual) San Diego Hand Specialists Occupation (for Individual) Orthopaedic Surgeon Memo Item Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Memo Item C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address 9207 Duncaster Ct 04 / 2021 City Brentwood TN 37027 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Vanderbit Univ-Vanderbit Ortho Inst Receipt For: Primary General Other (specify) Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ Memo Item	*	CA	92131	Amoun	t of Each F	Receipt this	Period		
San Diego Hand Specialists Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Other (specify) ▼ 672,00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name 672,00 C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address g207 Duncaster Ct 08 / 04 / 2021 City State Zip Code Brentwood TN 37027 FEC ID number of contributing C 84.00 federal political committee. 0 Name of Employer (for Individual) Occupation (for Individual) Vanderbilt Univ-Vanderbilt Ontho Inst Aggregate Year-to-Date ▼ Primary General 672.00	•	C		84.00					
Primary General Other (specify) ▼ Primary General 672.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address 9207 Duncaster Ct 08 / 04 / 2021 City State Zip Code Brentwood TN 37027 FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) Memo Item Vanderbilt Univ-Vanderbilt Ortho Inst Aggregate Year-to-Date ▼ Memo Item Primary General 672.00 672.00	Name of Employer (for Individual) San Diego Hand Specialists		· · · · ·	М	emo Item				
Other (specify) ▼ 672,00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address g207 Duncaster Ct 08 04 2021 City State Zip Code Transaction ID : 11090273 Brentwood TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) 84.00 Vanderbilt Univ-Vanderbilt Ortho Inst Orthopaedic Surgeon Memo Item Receipt For: Aggregate Year-to-Date ▼ 672.00 48.00		Aggregate	Aggregate Year-to-Date ▼						
C. Engstrom, Stephen, Matthew, , MD, FAAOS Date of Receipt Mailing Address g207 Duncaster Ct Date of Receipt City State Zip Code Brentwood TN 37027 FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) 04 / 2021 Vanderbilt Univ-Vanderbilt Ortho Inst Occupation (for Individual) Memo Item Primary General Aggregate Year-to-Date ▼ Memo Item Other (specify) 672.00 672.00 418.00			, 672.00]					
City State Zip Code Transaction ID : 11090273 Brentwood TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) 84.00 Vanderbilt Univ-Vanderbilt Ortho Inst Occupation (for Individual) Memo Item Primary General 672.00 672.00				Date o	f Receipt				
Brentwood TN 37027 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 84.00 Name of Employer (for Individual) Occupation (for Individual) Memo Item Vanderbilt Univ-Vanderbilt Ortho Inst Occupation (for Individual) Memo Item Primary General 672.00 672.00								Y	
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federal political committee. 0 84.00 Name of Employer (for Individual) 0ccupation (for Individual) 0rthopaedic Surgeon Vanderbilt Univ-Vanderbilt Ortho Inst 0rthopaedic Surgeon Memo Item Receipt For: Aggregate Year-to-Date ▼ 672.00 Other (specify) 672.00 418.00			37027	Amoun	t of Each F	Receipt this	Period		
Vanderbilt Univ-Vanderbilt Ortho Inst Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Other (specify) 672.00	•	С	C			, , ,	84.0	00	
Primary General Other (specify) 672.00	Vanderbilt Univ-Vanderbilt Ortho Inst				emo Item				
Other (specify)		Aggregate	Year-to-Date V						
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	SUBTOTAL of Receipts This Page (optional)				y		418.0	0	

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FEC Schedule A (Form 3X) Rev. 06/2016

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ITEMIZED RECEIPTS	for each category of t Detailed Summary Pa	
		y any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of	Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini A. Hettrich, Carolyn, , , MD,MPH,FAA Mailing Address 28A Miller Hill Rd City Dover FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	ial) or Full Organization Name State Zip Code MA 02030-2332 C Occupation (for Individual) Orthopaedic Surgeon Orthopate Vear-to-Date ▼ Aggregate Year-to-Date ▼ 672	Date of Receipt 08 05 2021 Transaction ID : 11090274 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Ini B. Sheehan, John, P, , MD,FAAOS Mailing Address 6621 Cuming St	· · · · ·	Date of Receipt
City Omaha FEC ID number of contributing federal political committee. Name of Employer (for Individual) Boys Town Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code NE 68132 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11090275 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Ini C. Abdelshahed, Mina, , , MD,FAAOS Mailing Address 1450 Dunn Parkway City Mountainside FEC ID number of contributing federal political committee. Name of Employer (for Individual) Union County Ortho Receipt For: Primary General Other (specify)		Date of Receipt Date of Receipt 09 2021 Transaction ID : 11090276 Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		

Use separate schedule(s)

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)		
			ay not be sold or used by any p	13 14 15 16 17 person for the purpose of soliciting contributions		
	for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
А.	Full Name of Individual (Last, First, Middle Init Chutkan, Norman, Barrington, , MD,FAA		Drganization Name	Date of Receipt		
	Mailing Address 1 E Lexington Ave Unit 1404			M M / D D / Y		
	City Phoenix	State AZ	Zip Code 85012	Transaction ID : 11090278 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		84.00		
	Name of Employer (for Individual) The CORE Institute		upation (for Individual) hopaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]		
в.	Full Name of Individual (Last, First, Middle Init Ritchie, William, L, , MD,MBA,FAA	Date of Receipt				
	Mailing Address 2100 Louisiana Blvd Ste 410	01-1-	75 0.44	M = M / D = D / Y = Y = Y = Y 08 09 2021		
	City Albuquerque	State NM	Zip Code 87110	Transaction ID : 11090279 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer (for Individual) New Mexico Orthopaedics		cupation (for Individual) hopaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]		
С.	Full Name of Individual (Last, First, Middle Init Tobin, Richard, W, , MD, FAAOS	ial) or Full C	Drganization Name	Date of Receipt		
	Mailing Address 3415 Eagle Crest Rd NW			08 / 09 / Y Y Y Y 08 09 2021		
	City Salem	State OR	Zip Code 97304	Transaction ID : 11090280 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		500.00		
	Name of Employer (for Individual) Self Employed	Orth	cupation (for Individual) nopaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]		
F	UBTOTAL of Receipts This Page (optional)			834.00		
11	OTAL This Period (last page this line number of	oniy)				

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini More, Robert, Cameron, , MD, FAAOS Mailing Address 8100 Wescott Drive Suite 101 City Flemington	tial) or Full Organization Name State Zip Code NJ 08822	Date of Receipt 08 09 2021 Transaction ID : 11090281 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) MidJersey Orthopaedics Receipt For: □ Primary □ General Other (specify) ▼	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00	Memo Item
Full Name of Individual (Last, First, Middle Init B. Cimino, William, Gerard, , MD,FAAC Mailing Address 52 Beach Road Suite 207 City Fairfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Beach Road Orthopaedics Receipt For: Primary General Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle Ini C. Parsley, Brian, S, , MD,FAAOS,F Mailing Address 302 Pine Shadows Dr Suite 2400 City Houston FEC ID number of contributing federal political committee. Name of Employer (for Individual) UT Health Physicians Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code TX 77056 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00	Date of Receipt Model 13 2021 Transaction ID : 11090284 Amount of Each Receipt this Period 84.00 84.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		▶ 252.00

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ITEMIZED RECEIPTS	for each	category of the Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee	of the American Assoc	ciation of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, M A. Damalas, Dino, , , MBA Mailing Address 9400 W Higgins Rd City	State Zip Coc	de	Date of Receipt
Rosemont FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C Occupation (for I		Amount of Each Receipt this Period 84.00 Memo Item
AAOS Receipt For: Primary General Other (specify) ▼	Chief Operating Aggregate Year-to-Date		
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fragomen, Austin, Thomas, , MD,FAAOS Mailing Address 48-25 64th St		
City Woodside FEC ID number of contributing federal political committee.	State Zip Coo NY 11377		Transaction ID : 11090286 Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Hospital for Special Surgery Receipt For: Primary General Other (specify) ▼	Occupation (for Orthopaedic Sur Aggregate Year-to-Date	geon	Memo Item
C. Full Name of Individual (Last, First, M Winston, Jonathan, , , MD Mailing Address 4534 Shadowbrook (Name	Date of Receipt
City Bettendorf FEC ID number of contributing	State Zip Coo IA 52722		Transaction ID : 11090335 Amount of Each Receipt this Period
FEC ID Humber of Contributing federal political committee. Image: Second State of Employer (for Individual) ORA Orthopaedics Receipt For: Image: Primary Content of Employer (specify)	C Occupation (for I Orthopaedic Surg Aggregate Year-to-Date	geon	Memo Item
ORA Orthopaedics Receipt For: Primary General	Orthopaedic Surg	geon → ▼ 672.00	Memo Item

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only 11a 13	one) 11b 11c 14 15	12 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements ma	y not be sold or used by any pe ddress of any political committee	erson for the p to solicit con	ourpose of solicitir tributions from suc	g contributions ch committee.		
	NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS							
Α.	Full Name of Individual (Last, First, Middle Initia Tyndall, William, A, , MD,FAAOS Mailing Address 123 Brittany Ln	rganization Name	Date of Receipt					
	City Hollidaysburg	State PA	Zip Code 16648		action ID : 110919 of Each Receipt 1			
	FEC ID number of contributing federal political committee.	C				84.00		
	Name of Employer (for Individual) University Orthopedics Receipt For:	Orth	Ipation (for Individual) opaedic Surgeon	Me	mo Item			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00					
В.	Full Name of Individual (Last, First, Middle Initia Woodcock, Jessica, A, , MD,FAAOS Mailing Address 738 Newman Rd	al) or Full Or	rganization Name	Date of	Receipt	YYYY		
	City New Bern	StateZip CodeNC28562			08 19 2021 Transaction ID : 11091995 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С			84.0			
	Name of Employer (for Individual) Carolina Orthopedics and Sports Medici		upation (for Individual) opaedic Surgeon	Me	mo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 672.00					
с.			rganization Name	Date of	Receipt			
	Mailing Address 405 NW A St 1101 Horsebarn Road City	State	Zip Code	08 Transa	/ 19 / 19 / 19 / 19 / 19 / 19 / 19 / 19	2021 96		
	Bentonville	AR	72712	Amount	of Each Receipt 1	his Period		
	FEC ID number of contributing federal political committee.		, , , , ,	84.00				
Mercy Clinic Orthopedics Orthop			pation (for Individual) opaedic Surgeon	Me	emo Item			
	Aggregate Year-to-Date ▼ Primary General Other (specify) General 672.00							
s	UBTOTAL of Receipts This Page (optional)		•		, , , ,	252.00		
т	OTAL This Period (last page this line number of	nly)	•			46		

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Winder, Carey, E, , MD,FAAOS Mailing Address 866 Woodgate Blvd City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer (for Individual) Baton Rouge Orthopedic Clinic Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code LA 70808 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00 1000.00	Date of Receipt 08 / 17 / 2021 Transaction ID : 11092456 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle In B. Carreira, Dominic, S, , MD,FAAOS Mailing Address 155 Braxton Way	Date of Receipt	
City Roswell FEC ID number of contributing federal political committee. Name of Employer (for Individual) Broward HIth Dist Ctr Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code GA 30075 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 400.00	Transaction ID : 11092470 Amount of Each Receipt this Period 400.00 Memo Item
Full Name of Individual (Last, First, Middle In C. Russell, George, V, , Jr, MD, MBA Mailing Address 244 North Natchez Drive City Madison FEC ID number of contributing federal political committee. Name of Employer (for Individual) Univ of Mississippi Med Ctr Receipt For: Primary General Other (specify)		Date of Receipt 08 / 17 / 2021 Transaction ID : 11092471 Amount of Each Receipt this Period 90.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		1490.00

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IT	EMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)				
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orthe	opaedic SurgeonsPAC of AAOS				
Α.	Full Name of Individual (Last, First, Middle Initia Hrasky, Gregory, M, , MD,FAAOS Mailing Address PO Box 2767	l) or Full O	rganization Name	Date of Receipt				
		08 19 2021						
	City Scottsdale	State AZ	Zip Code 85252	Transaction ID : 11092623				
		/ L=	00202	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		1005.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	Cactus Pediatric Orthopaedics	Orth	opaedic Surgeon					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Other (specify) ▼		1005.00]				
— B	Full Name of Individual (Last, First, Middle Initia Hilibrand, Alan, S, , MD, MBA, F	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 225 North Latches Lane	08 20 2021						
	City	State	Zip Code	Transaction ID : 11092883				
	Merion Station	PA	19066	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1000.00				
	Name of Employer (for Individual) Rothman Orthopaedic Specialty Hospital		upation (for Individual) Iopaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]				
<u> </u>	Full Name of Individual (Last, First, Middle Initia Chapman, Cary, B, , MD,FAAOS	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 10903 Blue Palm Street	08 21 / Y Y Y Y 2021						
	City	State FL	Zip Code 33324	Transaction ID : 11092885				
	Plantation		33324	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		84.00				
	Name of Employer (for Individual) Miami Orthopedics & Sports Medicine In		ipation (for Individual) opaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 672.00	1				
⊢	UBTOTAL of Receipts This Page (optional)			2089.00				

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IT.			Use separate schedule(s)	(check only one)					
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions					
\setminus	NAME OF COMMITTEE (In Full)								
	Political Action Committee of the	paedic SurgeonsPAC of AAOS							
Α.	Full Name of Individual (Last, First, Middle Initi LeGrand, Alexander, Benton, , MD, FAAG		rganization Name	Date of Receipt					
	Mailing Address 1450 Ellis St Ste 201			08 / D D / Y Y Y Y 21 2021					
	City	State MT	Zip Code 59715	Transaction ID : 11092886					
	Bozeman		59715	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item					
	Bridger Orthopedics and Sports Medicin	Orth	opaedic Surgeon						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		500.00						
	Other (specify) ▼		500.00						
В.	Full Name of Individual (Last, First, Middle Initi StoeckI, Andrew, , , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 90 Fairlawn Dr			08 21 2021					
	City	State	Zip Code	Transaction ID : 11092887					
	Amherst	NY	14226	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		83.00					
	Name of Employer (for Individual) Excelsior Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item					
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General								
	Other (specify) v		664.00						
с.	Full Name of Individual (Last, First, Middle Initi Stronach, Benjamin, M, , MD,FAA		rganization Name	Date of Receipt					
	Mailing Address 16 Piedmont Ln			08 / D D / Y Y Y Y 21 2021					
	City	State	Zip Code	Transaction ID : 11092888					
	Little Rock	AR	72223-2232	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		250.00					
	Name of Employer (for Individual)	Οςςι	upation (for Individual)	Memo Item					
	Univ of Arkansas	Orth	opaedic Surgeon						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General		750.00						
	Other (specify)		750.00						
s	UBTOTAL of Receipts This Page (optional)		•	833.00					
т	OTAL This Period (last page this line number o	nly)	····· •						

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Ortho	paedic SurgeonsPAC of AAOS
✓ Full Name of Individual (Last, First, Middle I A. Oberste, David, Jason, , MD, FAAOS Mailing Address 4504 Rockbridge Hollow City Tallahassee FEC ID number of contributing federal political committee. Name of Employer (for Individual) Tallahassee Orthopedic Clinic III PL Receipt For: Primary General Other (specify)	nitial) or Full Organization Name State Zip Code FL 32309 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle I B. Sherbondy, Paul, Strawn, , MD, FA Mailing Address 507 Beaumont Dr	nitial) or Full Organization Name	Date of Receipt
City State College FEC ID number of contributing federal political committee. Name of Employer (for Individual) Penn State Health Receipt For: Primary General Other (specify) ▼	State Zip Code PA 16801-8311 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00	Transaction ID : 11092892 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle I C. Kirol, Bernard, G, , MD, FAAOS Mailing Address 338 Turnwall Ln City Elgin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Midlands Orthopaedics, PA Receipt For: Primary General Other (specify)	Nitial) or Full Organization Name State Zip Code SC 29045-9507 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 600.00 00	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	er only)	409.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Orthe	opaedic SurgeonsPAC of AAOS
A. Full Name of Individual (Last, First, Middle In Veitch, Andrew, John, , MD,FAAOS Mailing Address 13416 Desert Zinnia Ct NE City Albuquerque	itial) or Full Organization Name State Zip Code NM 87111	Date of Receipt 08 22 2021 Transaction ID : 11092895 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	84.00 Memo Item
University of New Mexico, Dept of Orth Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00	
Full Name of Individual (Last, First, Middle In B. Hire, Justin, M, , MD,FAAOS Mailing Address 3100 Crestwood Lane		Date of Receipt
City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Dwight David Eisenhower Army Medical C Receipt For: Primary General	State Zip Code MO 65203 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11092896 Amount of Each Receipt this Period 42.00 Memo Item
C. Kayal, Robert, A, , MD,FAAOS Mailing Address 1044 Dogwood Trail		Date of Receipt
City Franklin Lakes FEC ID number of contributing federal political committee.	State Zip Code NJ 07417	Transaction ID : 11092898 Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		626.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hunt, Stephen, Austin, , MD, FAAOS Date of Receipt Α. Mailing Address 7 Pheasant Run Dr 1 2021 08 23 City Zip Code State Transaction ID: 11092899 NJ **Basking Ridge** 07920 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon **Tri-County Orthopaedics** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Friedmann, Elizabeth, , , MD Date of Receipt Mailing Address 2660B Greenbriar Lane 08 2021 23 City State Zip Code Transaction ID : 11092901 MD Annapolis 21401 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Maryland Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 672.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Vaccaro, Alexander, , , MD, MBA, PhD Date of Receipt Mailing Address 1840 Aloha Lane MM 08 23 2021 City Zip Code State Transaction ID : 11092903 PA Gladwyne 19035 Amount of Each Receipt this Period FEC ID number of contributing С 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rothman Orthopaedic Specialty Hospital Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1334.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Lang, Christopher, John, , MD, FAAC Mailing Address 1215 W Chaucer Ave City Spokane FEC ID number of contributing federal political committee. Name of Employer (for Individual) Spokane Orthopedics, PLLC Receipt For: Primary General Other (specify) ▼	State WA C Occo Orth	rganization Name Zip Code 99208 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle Burt, Charles, F, , MD, FAAOS Mailing Address 2725 S 144th St Ste 212 City Omaha FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoNebraska Receipt For: Primary General Other (specify) ▼	State NE C Occ Ort	Image: symplectic sympl	Date of Receipt
Full Name of Individual (Last, First, Middle C. Masters, Lisa, N, , Mailing Address 255 Birkdale Drive City Fayetteville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Bank of America Receipt For: Primary General Other (specify)	State GA C Occu Lay	rganization Name Zip Code 30215 upation (for Individual) Board Member Year-to-Date ▼ 1500.00	Date of Receipt 08 23 2021 Transaction ID : 11093201 Amount of Each Receipt this Period 1500.00 1500.00 Memo Item 1500.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			2500.00

Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17				
Ar or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committe	operson for the purpose of soliciting contributions to solicit contributions from such committee.				
A .	Full Name of Individual (Last, First, Middle Init Navarro, Ronald, Anthony, , MD,FAAOS Mailing Address 18 Wide Loop Rd		rganization Name	Date of Receipt				
	City Rolling Hills	State CA	Zip Code 90274	Transaction ID : 11093202 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		84.00				
	Name of Employer (for Individual) Kaiser Permanente South Bay Receipt For: Primary General Other (specify) ▼	Orth	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 672.00	Memo Item				
в.	Full Name of Individual (Last, First, Middle Init Gerlinger, COL. (ret) Tad, L, , MD,F/ Mailing Address 596 Provident Ave City	Date of Receipt						
	Winnetka	State IL	Zip Code 60093	Transaction ID : 11093203 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) Midwest Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]				
с.	Full Name of Individual (Last, First, Middle Init Grimm, Bennett, Douglas, , MD, F		rganization Name	Date of Receipt				
	Mailing Address 1000 Springdale Rd NE			08 / D D / Y Y Y Y 2021				
	City Atlanta	State GA	Zip Code 30306	Transaction ID : 11093204 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual) Resurgens Orthopaedics Receipt For:			upation (for Individual) opaedic Surgeon Year-to-Date ▼	Memo Item				
	Primary General Other (specify)		1000.00]				
s	UBTOTAL of Receipts This Page (optional)			834.00				
Т	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 117 OF 551			
ITEMIZED RECEIPTS			for each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Ar	ny information copied from such Reports and Sta	tements ma	y not be sold or used by any p				
	for commercial purposes, other than using the r						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	۸ ۱					
	Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS			
<u>/</u>	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name				
Α.	Mulliken, Brian, D, , MD, FAAOS	Date of Receipt					
	Mailing Address 35 Brett Manor Ct						
	City	State	Zip Code	08 24 2021 Transaction ID : 11093678			
	Hunt Valley	MD	21030	Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	С		250.00			
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item			
	University of Maryland		opaedic Surgeon				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	· · · ·	250.00				
	Other (specify) ▼		200.00				
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name				
В.	Cambareri, John, J, , MD, FAAOS	Date of Receipt					
	Mailing Address 222 Feldspar Dr	08 24 2021					
	City	State Zip Code					
	Syracuse	NY	13219	Transaction ID : 11093684 Amount of Each Receipt this Period			
	FEC ID number of contributing						
	federal political committee.	С		500.00			
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item			
	Syracuse Ortho Specialists, PC		opaedic Surgeon				
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Other (specify) ▼		500.00	1			
			500.00	1			
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name				
C.	, , , , , ,			Date of Receipt			
	Mailing Address 356 Warren Ave			08 24 2021			
	City	State	Zip Code	Transaction ID : 11093685			
	Cincinnati	ОН	45220	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		500.00			
	federal political committee.	U					
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item			
	Cincinnati Childrens Medical	Orth	opaedic Surgeon				
	Receipt For:	Aggregate	Year-to-Date ▼	_			
	Other (specify)		500.00	1			
Γ							
s	UBTOTAL of Receipts This Page (optional)			1250.00			
F							

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

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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 118 OF 551
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and St for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Beltran, Michael, John, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address UC Dept of Orthopaedic Surge	ry		M M / D D / Y Y Y Y Y
	231 Albert Sabin Way Room 55 City	53 State	Zip Code	08 26 2021
	Cincinnati	OH	45267-0212	Transaction ID : 11093905 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Department of Orthopaedics and Rehabil	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		672.00]
в.	Full Name of Individual (Last, First, Middle Initi Mitros, Stephen, F, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 51045 Erin Glen Dr	M M / D D / Y		
	City	State	Zip Code	Transaction ID : 11093906
	Granger	IN	46530	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Mitros Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼		672.00]
с.	Full Name of Individual (Last, First, Middle Initi Eckrich, Stephen, G J, , MD,FAAC	al) or Full O S	rganization Name	Date of Receipt
	Mailing Address 5511 Shooting Star Trail			M = M / D = D / Y = Y = Y = Y Y 08 27 2021
	City Rapid City	State SD	Zip Code 57702	Transaction ID : 11094282
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 84.00
	Name of Employer (for Individual) Self Employed		upation (for Individual)	Memo Item
	Receipt For:		opaedic Surgeon Year-to-Date ▼	
	Primary General Other (specify)	Aggregate	672.00]
s	UBTOTAL of Receipts This Page (optional)			252.00

FOR LINE NUMBER: PAGE 119 OF 551

ITE	MIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page) _–	heck on X 11a 13	ly on	e) 11b 14	11c	12		
	information copied from such Reports and Sta r commercial purposes, other than using the n											
	AME OF COMMITTEE (In Full) Political Action Committee of the	America	an	Association of Ortho	pa	edic S	Surę	geons	sPA	C of	AAOS	
A	ull Name of Individual (Last, First, Middle Initia Baker, Donald, Earl, , MD, FAAOS ailing Address 215 Little Creek Road	l) or Full O	rgar	nization Name		Date c		ceipt		Y	V	
_	· · · · · · · · · · · · · · · · · · ·	04-44-		7 octo		08		27	/ T	202	1	
	ity 'lowood	State MS		Zip Code 39232					1109428 eceipt th		iod	
	EC ID number of contributing deral political committee.	С						y 1		2	50.00	
	ame of Employer (for Individual)		•	ion (for Individual)		N	1emo	Item				
	erit Health Orthopedics	Orth	iopa	edic Surgeon								
K	eceipt For:	Aggregate	Yea	r-to-Date 🔻								
	Primary General Other (specify) ▼		-	750.00								
	ull Name of Individual (Last, First, Middle Initia Nagamani, Kevin, K, , MD,FAAOS	l) or Full O	rgar	ization Name		Date o	of Red	ceipt				
	ailing Address 11902 E Lake Cr				08 27 2021							
C	ity	State Zip Code				Trans	sactio	on ID : '	1109428	34		
G	ireenwood Village	CO	O 80111					Amount of Each Receipt this Period				
	EC ID number of contributing deral political committee.	С		[.		<u>, , , , , , , , , , , , , , , , , , , </u>			84.00			
	ame of Employer (for Individual) lestern Orthopaedics	Occu Orth		N	1emo	Item						
R	eceipt For:	Aggregate	Yea	r-to-Date ▼								
	Primary General Other (specify) ▼		504.00									
C	ull Name of Individual (Last, First, Middle Initia Gramstad, Gregory, D, , MD, FAAC		rgar	ization Name		Date o	of Red	ceipt				
M	ailing Address 6702 SW Canyon Crest Dr					M 08	/	D D 27	/ Y	2021		
	ity Portland	State OR		Zip Code 97225				-	110942			
F	EC ID number of contributing deral political committee.	С				Amount of Each Receipt this Period			50.00			
Name of Employer (for Individual) Rebound Orthopedics & Neurosurgery			•	ion (for Individual) edic Surgeon		N	/lemo	ltem				
R	eceipt For: Primary General Other (specify)	Aggregate	gate Year-to-Date ▼ 500.00									
SUI	STOTAL of Receipts This Page (optional)			•	-	[.		,	. ,	58	34.00	
то	TAL This Period (last page this line number on	ıly)						,			-	

Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			Detailed Summary Page	13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			
\setminus	NAME OF COMMITTEE (In Full)	A		
/	Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
<u> </u>	Full Name of Individual (Last, First, Middle Initi		Organization Name	
Α.	Pushkarewicz, Michael, J, , MD, FAAOS, I	F		Date of Receipt
	Mailing Address 1510 Braken Ave			08 28 / Y Y Y Y
	City	State	Zip Code	Transaction ID : 11094587
	Wilmington	DE	19808	Amount of Each Receipt this Period
	FEC ID number of contributing	С		42.00
	federal political committee.	•		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	First State Orthopaedics	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		336.00	1
				1
	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Proanization Name	
В.	Gary, Joshua, Layne, , MD, FAAOS		J	Date of Receipt
	Mailing Address 951 Descanso Drive			M M / D D / Y Y Y Y
			1	08 28 2021
	City	State	Zip Code	Transaction ID : 11094588
	La Canada Flintridge	CA	91011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Keck School of Medicine of USC		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General			1
	Other (specify) v		, 672.00	
с.	Full Name of Individual (Last, First, Middle Initi Scales, Darrell, Kevin, , MD, FAAO		Organization Name	Date of Receipt
	Mailing Address 5425 Golf View Dr			08 28 2021
	City	State	Zip Code	Transaction ID : 11094589
	Braselton	GA	30517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual)	000	upation (for Individual)	Memo Item
	Northeast Georgia Physicians Group		nopaedic Surgeon	
	Receipt For:	1	Year-to-Date ▼	-
	Primary General			1
	Other (specify)		400.00	
_				
s	UBTOTAL of Receipts This Page (optional)			226.00
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т	OTAL This Period (last page this line number of	only)	••••••	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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X 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carolan, Gregory, Francis, , MD, FAAOS Date of Receipt Α. Mailing Address 1806 Meadow Ridge Ct 1 08 28 2021 City Zip Code State Transaction ID: 11094590 PA **Bethlehem** 18015 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon St Luke's Ortho Surg Group Receipt For: Aggregate Year-to-Date ▼ Primary General 672.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Torres, Daniel, , , MD, FAAOS Date of Receipt Mailing Address 1488 Shelburne Ct 08 2021 28 City State Zip Code Transaction ID : 11094591 PA Allentown 18104 Amount of Each Receipt this Period FEC ID number of contributing С 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Lehigh Valley Practioner Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 680.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Chandler, David, R, , MD, FAAOS Date of Receipt Mailing Address 165 Middle Plantation Ln М M 08 28 2021 City State Zip Code Transaction ID : 11094592 FL Gulf Breeze 32561 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Andrews Institute For Orthopaedics & S Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 672.00 Other (specify) 253.00 SUBTOTAL of Receipts This Page (optional).....

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Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: The second			
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Political Action Committee of t	he Americ	an Association of Ort	hopaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Middle I A. Allard, Mark, Michael, , MD,FAAOS	nitial) or Full C	Organization Name	Date of Receipt			
Mailing Address 3010 Cortney Circle						
City Siloam Springs	State AR	Zip Code 72761	Transaction ID : 11094593 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		84.00			
Name of Employer (for Individual) Self Employed		upation (for Individual) hopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Receipt For: Aggregate Year-to-Date ▼ Primary General					
B. Huddleston, Paul, M, , MD, FAAOS						
Mailing Address 31219 Lakeview Ave	Ototo	Zin Onde	08 28 2021			
City Red Wing	State MN	Zip Code 55066	Transaction ID : 11094594 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
Name of Employer (for Individual) Mayo Clinic		cupation (for Individual) hopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00				
Full Name of Individual (Last, First, Middle I C. Tracey, Robert, W, , MD,FAAOS	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tracev. Robert. W MD.FAAOS					
Mailing Address 1100 Walker Road			M M / D D / Y Y Y Y 08 28 2021			
City Great Falls	State VA	Zip Code 22066	Transaction ID : 11094595 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
Name of Employer (for Individual) Walter Reed National Military Medical		upation (for Individual) nopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00				
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·		584.00			

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

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SCHEDULE A (FEC Form 3X)		llea caparata cabadula(a)	FOR LINE NUMBER: PAGE 123 OF 551					
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)					
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS					
Full Name of Individual (Last, First, Middle Ir Connair, Michael, P, , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 24 Old Hartford Turnpike			08 28 2021					
City	State	Zip Code	Transaction ID : 11094596					
Hamden	СТ	06517	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
Self Employed		nopaedic Surgeon	_					
Receipt For: Primary General	Aggregate	Year-to-Date V	-					
Other (specify) ▼		750.00						
Full Name of Individual (Last, First, Middle Ir B. Porter, Scott, Edward, , MD,MBA,F		rganization Name	Date of Receipt					
Mailing Address 1420 Jonesville Road			08 28 2021					
City	State	Zip Code	Transaction ID : 11094597					
Simpsonville	SC	29681	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		84.00					
Name of Employer (for Individual) Prisma Health		upation (for Individual) nopaedic Surgeon	Memo Item					
Receipt For:	1	Year-to-Date ▼						
Primary General Other (specify) ▼		672.00]					
Full Name of Individual (Last, First, Middle Ir C. Hoedt, Christen, , , MD	hitial) or Full O	rganization Name	Date of Receipt					
Mailing Address 973 Vinings Blvd			08 28 2021					
City	State	Zip Code	Transaction ID : 11094598					
Gallatin	TN	37066	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	°		84.00					
Name of Employer (for Individual) Cooper Orthopaedics Surgery		upation (for Individual) opaedic Surgeon	Memo Item					
Receipt For:		Year-to-Date ▼						
Primary General Other (specify)		672.00]					
SUBTOTAL of Receipts This Page (optional)	1		418.00					

TOTAL This Period (last page this line number only)...... I I APR I I APR I I APR I

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▼ 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Orth	nopaedic SurgeonsPAC of AAOS					
A. Reid, J, Spence, , MD,FAAOS Mailing Address 500 University Drive Department of Orthopaedic		Organization Name	Date of Receipt					
City Hershey	State PA	Zip Code 17036	Transaction ID : 11094599 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		84.00					
Name of Employer (for Individual) Penn State Receipt For:	Ort	upation (for Individual) hopaedic Surgeon	Memo Item					
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00						
Full Name of Individual (Last, First, Middle B. Giuseffi, Steven, A, , MD,FAAOS	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 4784 Enchanted Pines Dr	State	Zip Code	08 / D D / Y Y Y Y Y 08 28 2021					
Rapid City	State	57701	Transaction ID : 11094600 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		84.00					
Name of Employer (for Individual) Black Hills Orthopedic and Spine Cente		cupation (for Individual) hopaedic Surgeon	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672,00						
Full Name of Individual (Last, First, Middle C. Ono, Craig, M, , MD,FAAOS,F	Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 1015 Wilder Avenue Apartment 1203 City	State	Zip Code	08 / 28 / 2021					
Honolulu	HI	96822	Transaction ID : 11094606 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		1000.00					
Name of Employer (for Individual) Shriners Hospital for Children Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00						
SUBTOTAL of Receipts This Page (optional))		▶ 1168.00					
TOTAL This Period (last page this line numb	per only)							

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	K 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma	y not be sold or used by any p ddress of any political committe	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Lewis, Valerae, O, , MD, FAAOS Mailing Address 2719 Barbara Ln	e Initial) or Full Oi	ganization Name	Date of Receipt
City Houston	State TX	Zip Code 77005-3419	Transaction ID : 11094608 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) MD Anderson Cancer Ctr		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
B. Seaberg, John, Paul, , MD, FAA Mailing Address 2422 Blue Bonnet Blvd		ganization Name	Date of Receipt
City Houston	State TX	Zip Code 77030	Transaction ID : 11094616
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Houston Methodist Orthopedics and Spor		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 500.00]
Full Name of Individual (Last, First, Middle C. Brecht, Julius, Stephen, , MD,		ganization Name	Date of Receipt
Mailing Address 131 Tennyson Drive			08 / D D / Y Y Y Y 27 2021
City Longmeadow	State MA	Zip Code 01106	Transaction ID : 11095162 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) New England Ortho Surgeons		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)		1000.00

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

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FOR LINE NUMBER: PAGE 126 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th				
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)			hopaedic SurgeonsPAC of AAOS				
Full Name of Individual (Last, First, Middle A. Bernholt, David, , , MD	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 3126 Chapel Woods Cv	08 27 2021						
City Germantown	State TN	Zip Code 38139	Transaction ID : 11095175 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		41.67				
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 333.36					
B. Bettin, Clayton, Charles, , MD,FA Mailing Address 5047 Shady Hall Ct		rganization Name	Date of Receipt				
City	State	Zip Code	08 27 2021				
Memphis	TN	38117	Transaction ID : 11095176 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		41.67				
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333,36					
Full Name of Individual (Last, First, Middle C. Calandruccio, James, H, , MD,		rganization Name	Date of Receipt				
Mailing Address Campbell Clinic 1400 S Germantown Rd			08 / 27 / Y Y Y Y 2021				
City Germantown	State TN	Zip Code 38138-2205	Transaction ID : 11095177 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		41.67				
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) opaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 333.36					
SUBTOTAL of Receipts This Page (optional)			125.01				

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) 11

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 127 OF 551 (check only one)				
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)						
		ppaedic SurgeonsPAC of AAOS				
Full Name of Individual (Last, First, Middle I Crockarell, John, R, , Jr, MD, FA Mailing Address 1458 W Poplar Ave	nitial) or Full Organization Name	Date of Receipt				
Ste 100 City	State Zip Code	08 27 2021 Transaction ID : 11095178				
Collierville	TN 38017	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	41.67				
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36					
Full Name of Individual (Last, First, Middle I B. Grear, Benjamin, J, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 219 Lagrange Creek Drive		M M / D D / Y				
City Eads	StateZip CodeTN38028	Transaction ID : 11095180 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	41.67				
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify) ▼	333.36					
Full Name of Individual (Last, First, Middle I Guyton, James, L, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 6422 Massey Estates Cove	Mailing Address 6422 Massey Estates Cove					
City Memphis	StateZip CodeTN38120	Transaction ID : 11095181 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	41.67				
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 333.36					
SUBTOTAL of Receipts This Page (optional)	·····	. 125.01				
TOTAL This Period (last page this line numbe	r only)					

FOR LINE NUMBER:

PAGE 128 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	
		any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	ne American Association of C	Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Harkess, James, W, , MD,FAAOS Mailing Address 9566 Fox Hill Circle S City Germantown FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	nitial) or Full Organization Name State Zip Code TN 38139 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 333.36	Date of Receipt 08 / 27 / 2021 Transaction ID : 11095182 Amount of Each Receipt this Period 41.67 Memo Item
Full Name of Individual (Last, First, Middle In B. Heck, Robert, Kurt, , Jr, MD, FA Mailing Address 4938 Barfield Rd		Date of Receipt
City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General	State TN Zip Code 38117 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	08 27 2021 Transaction ID : 11095183 Amount of Each Receipt this Period 41.67 Memo Item
C. Kelly, Derek, Michael, , MD,FAA Mailing Address 1458 W Poplar Ave Suite 100 City Collierville FEC ID number of contributing federal political committee.		Date of Receipt 08 / 27 / 2021 Transaction ID : 11095184 Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 333.36	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 129 OF 551

ITEMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	In Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, MiddleA.Mihalko, Marc, J, , MD, FAAOS	Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 4079 Barfield Road			08 27 2021
City Memphis	State TN	Zip Code 38117	Transaction ID : 11095187 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36	
B. Hull Name of Individual (Last, First, Middle B. Murphy, Garnett, Andrew, , MD,F Mailing Address Campbell Clinic		ganization Name	Date of Receipt
1400 S Germantown Rd City	State	Zip Code	08 27 2021 Transaction ID : 11095188
Germantown	TN	38138-2205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 333.36	
Full Name of Individual (Last, First, Middle C. Richardson, David, R, , MD,FA		ganization Name	Date of Receipt
Mailing Address 636 Center Dr			08 / D D / Y Y Y Y 08 27 2021
City Memphis	State TN	Zip Code 38112	Transaction ID : 11095190 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 333.36	
SUBTOTAL of Receipts This Page (optional))		▶ 125.01

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

FEC Schedule A (Form 3X) Rev. 06/2016

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 130 OF 55 (check only one)
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
A.	Full Name of Individual (Last, First, Middle In Rudloff, Matthew, Ian, , MD, FAAOS	itial) or Full O	rganization Name	Date of Receipt
	Mailing Address 10211 Ramblewood Dr			08 27 2021
	City Arlington	State TN	Zip Code 38002	Transaction ID : 11095191 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Campbell Clinic Receipt For: Primary General Other (specify) ▼		opaedic Surgeon Year-to-Date ▼ 333.36	-
3.	Full Name of Individual (Last, First, Middle In Sawyer, Jeffrey, R, , MD, FAAOS	itial) or Full O	rganization Name	Date of Receipt
	Mailing Address 4450 Chickasaw Road			08 27 2021
	City Memphis	State TN	Zip Code 38117	Transaction ID : 11095192 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36]
	Full Name of Individual (Last, First, Middle In Sheffer, Benjamin, West, , MD,FA	itial) or Full O AOS	rganization Name	Date of Receipt
	Mailing Address 281 Ben Avon Way			08 27 2021
	City Memphis	State TN	Zip Code 38111-7702	Transaction ID : 11095193 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 333.36]

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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 131 OF

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thompson, Norfleet, Buckner, , MD, FAAOS Date of Receipt Α. Mailing Address 3784 Highland Park Place 1 08 27 2021 City Zip Code State Transaction ID: 11095196 TN Memphis 38111 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Campbell Clinic Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Throckmorton, Thomas, Ward, , MD, FAAOS Date of Receipt Mailing Address 4901 Fairfield Circle 08 2021 27 City State Zip Code Transaction ID : 11095197 ΤN Memphis 38117 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Campbell Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 333.36 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Warner, William, C, Jr, MD, FA Date of Receipt Mailing Address 215 East Cherry Circle М M 08 27 2021 City State Zip Code Transaction ID : 11095198 ΤN Memphis 38117 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Campbell Clinic** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 125.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	person for the purpose of soliciting contributions
the American Association of Orth	opaedic SurgeonsPAC of AAOS
Initial) or Full Organization Name State TN Zip Code 38120-2707 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 333.36	Date of Receipt 08 / 27 / 2021 Transaction ID : 11095199 Amount of Each Receipt this Period 41.67 Memo Item
Initial) or Full Organization Name State Zip Code TN 38138 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 333.36	Date of Receipt 08 27 2021 Transaction ID : 11095200 Amount of Each Receipt this Period 41.67 Memo Item
	Date of Receipt 08 27 2021 Transaction ID : 11095227 Amount of Each Receipt this Period 1000.00 Memo Item
	Detailed Summary Page Id Statements may not be sold or used by any plite name and address of any political committee the American Association of Orthomatical or Full Organization Name State Zip Code TN 38120-2707 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ Aggregate Year-to-Date 333.36 Initial) or Full Organization Name 333.36 Initial) or Full Organization Name 333.36 C 0ccupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ State Zip Code TN 38138 C 333.36 Initial) or Full Organization Name Initial State Initial) or Full Organization Name Initial State Initial) or Full Organization Name Initial State

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one)
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American	Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Hazel, Robert, Mark, , MD, FAAOS Mailing Address 1812 Valley Rd NE City Gainesville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	State GA C Occupa	Zip Code 30501 ation (for Individual) aedic Surgeon	Date of Receipt
Full Name of Individual (Last, First, Middle B. Kofoed, John, Charles, , MD, FA/ Mailing Address 2619 Seminole Ct City Fairfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Sutter Medical Group Receipt For: Primary	AOS State CA Occupa	Zip Code 94534-7871 ation (for Individual) paedic Surgeon	Date of Receipt
Other (specify) ▼ Full Name of Individual (Last, First, Middle C. Kress, Kenneth, J, , MD,FAAO Mailing Address 655 Blakenham Ct City Alpharetta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northside Hospital Receipt For: Primary General	S State GA C Occupa	Zip Code 30022 ation (for Individual) aedic Surgeon ar-to-Date V	Date of Receipt 08 / 27 / 2021 Transaction ID : 11095230 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			1589.00

	Use separate schedule(s)	FOR LINE NUMBER: PAGE 134 OF 55 (check only one)
	for each category of the Detailed Summary Page	× 11a 11b 11c 12 13 14 15 16 17
		e to solicit contributions from such committee.
e America	an Association of Ortho	opaedic SurgeonsPAC of AAOS
itial) or Full Or	rganization Name	Date of Receipt
		08 27 2021
State TX	Zip Code 75790-3890	Transaction ID : 11095231 Amount of Each Receipt this Period
С		750.00
	,	Memo Item
]
itial) or Full Or S	rganization Name	Date of Receipt
		08 27 2021
State OK	Zip Code 74137	Transaction ID : 11095232 Amount of Each Receipt this Period
С		1000.00
		Memo Item
Aggregate	Year-to-Date ▼ 1000.00]
itial) or Full Or OS	ganization Name	Date of Receipt
		08 / D D / Y Y Y Y Y 2021
OR	2ip Code 97229	Transaction ID : 11095246 Amount of Each Receipt this Period
С		500.00
	ipation (for Individual) opaedic Surgeon	Memo Item
	e name and average name and average for the second	for each category of the Detailed Summary Page Statements may not be sold or used by any pename and address of any political committee itial) or Full Organization Name State Zip Code TX ZipCode TX ZipCode Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date State Zip Code 750.00 itial) or Full Organization Name State Zip Code Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date State Zip Code OK 74137 Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 1000.00 itial) or Full Organization Name 1000.00 State Zip Code OR 97229

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	y information copied from such Reports and St for commercial purposes, other than using the											
\setminus	NAME OF COMMITTEE (In Full)	_										
	Political Action Committee of the	e Americ	an Ass	ociation of Ortho	paed	ic S	urge	ons-	PA(C of A	AAOS	
-	Full Name of Individual (Last, First, Middle Initi	al) or Full C	Organizatio	on Name	_							
Α.	Knowlan, Robert, V, , MD,FAAOS						Receip					
	Mailing Address 2266 Morgan Ave N				- N	08	/ D	30	/ Y	2021		
	City	State		Code	1	ransa	action	ID : 1′	109549)7		
	West Lakeland	MN	55	082	An	nount	of Eac	h Red	ceipt th	nis Perio	bd	
	FEC ID number of contributing federal political committee.	С								50	0.00	
	·				47	1				_		
	Name of Employer (for Individual)		•	or Individual)		Me	mo Ite	m				
	St Croix Orthopaedics Receipt For:		nopaedic :	-	_							
	Primary General	Aggregate Year-to-Date ▼										
	Other (specify) ▼	L	-	500.00								
	Full Name of Individual (Last First Middle Init	al) or Full C	Vragnizatio	n Namo								
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Layfield, Richard, , , III, MD,FA				Da	ate of	Receip	ot				
	Mailing Address 14605 Potomac Branch Drive, Ste 30					08	/ D	31	/ Y	2021	Ý	
	City	State	Zip	Code	- Т	ransa	action		109558			
	Woodbridge	VA	22	91						nis Perio	od	
	FEC ID number of contributing federal political committee.	C				250.00						
	Name of Employer (for Individual) Nova Orthopedic and Spine		upation (1 hopaedic	or Individual) Surgeon		Me	emo Ite	m				
	Receipt For:	Aggregate	e Year-to-Date ▼									
	Primary General Other (specify) ▼			250.00								
			,	200.00								
с.	Full Name of Individual (Last, First, Middle Initi Cassidy, Carter, , , MD, FAAOS	al) or Full C	Organizatio	on Name	Da	ate of	Receip	ot				
	Mailing Address 4890 Faulkirk Lane				Ν	M = M	/ D	D	/ Y	YYY	Y	
	City State Zip Code				- 4	09 France	otion	01	100560	2021		
	City Lexington	KY	405						109560 ceipt th	nis Perio	od	
	FEC ID number of contributing											
	federal political committee.	С					y	-	9	8	5.00	
	Name of Employer (for Individual)	Occ	upation (f	or Individual)	- E	Me	emo Ite	m				
	University of Kentucky Res Program	Orth	nopaedic S	Surgeon								
	Receipt For: Primary General	Aggregate	Year-to-D	Date 🔻								
	Other (specify)			765.00								
				- 495								
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т	OTAL This Period (last page this line number of	only)							-		-	

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PAGE 136 OF

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
	Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Manson, Theodore, Thomas, , MD,FAAC		rganization Name	Date of Receipt
	Mailing Address 1401 Muirfield Close			08 / D D / Y Y Y Y Y 2021
	City Bel Air	State MD	Zip Code 21015	Transaction ID : 11095636 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) University of Maryland		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
в.	Full Name of Individual (Last, First, Middle Initi Hall, Christian, Carson, , MD, FAAO		rganization Name	Date of Receipt
	Mailing Address 870 Westover Lane			08 / D D / Y Y Y Y 2021
	City York	State PA	Zip Code 17403	Transaction ID : 11095637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Wellspan Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
с.	Full Name of Individual (Last, First, Middle Initi Singer, Daniel, I, , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 1401 South Beretania St Suite 750 City	State	Zip Code	08 / 07 / 2021 Transaction ID : 11095639
	Honolulu	HI	96814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		400.00
	Name of Employer (for Individual) Orthopedic Associates of Hawaii Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00]
s	UBTOTAL of Receipts This Page (optional)			1900.00
т	OTAL This Period (last page this line number of	only)		

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	
			13 14 15 16 17	
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Political Action Committee (of the Americ	an Association of Orth	nopaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Mid	dle Initial) or Full C	Irganization Name		
A. Kwong, Louis, M, , MD,FAAOS			Date of Receipt	
Mailing Address Box 422			09 02 2021	
1000 W Carson St	State	Zip Code	Transaction ID : 11095911	
Torrance	CA	90509	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		250.00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Harbor-UCLA Medical Center	Orth	nopaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date ▼		
Other (specify) V		750.00		
Full Name of Individual (Last, First, Mid		Organization Name		
-	Wynder, Steven, G, , MD,FAAOS			
Mailing Address 5290 W 612 N	State	Zip Code	09 / 02 / Y Y Y Y 2021	
Huntington	IN	46750	Transaction ID : 11095912 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		84.00	
Name of Employer (for Individual) Parkview Ortho Hospital		upation (for Individual) hopaedic Surgeon	Memo Item	
Receipt For:	Aggregate	Year-to-Date V		
Primary General Other (specify) ▼		, 336.00		
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brophy, Robert, H, , MD,FAAOS			
Mailing Address 7 Maryhill Dr			M M / D D / Y Y Y Y 09 02 2021	
City St Louis	State MO	Zip Code 63124	Transaction ID : 11095913	
		03124	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		250.00	
Name of Employer (for Individual) Washington University Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]	
SUBTOTAL of Receipts This Page (option	nal)		584.00	
TOTAL This Period (last page this line nu	mber only)			

FOR LINE NUMBER:

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Any information copied from such Reports and Statement or for commercial purposes, other than using the name a NAME OF COMMITTEE (In Full) Political Action Committee of the Ame Full Name of Individual (Last, First, Middle Initial) or F A. Rana, Adam, J, , MD, FAAOS Mailing Address 12 Landing Woods Ln	nd address of any political committee	e to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle Initial) or F Rana, Adam, J, , MD, FAAOS	ull Organization Name	Date of Receipt
A. Rana, Adam, J, , MD, FAAOS		
City State Falmouth ME FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Maine Medical Center Receipt For: Aggre Primary General Other (specify) ✓	a Zip Code 04105-1948 Occupation (for Individual) Orthopaedic Surgeon gate Year-to-Date ▼ 1000.00	09 02 2021 Transaction ID : 11095914 Amount of Each Receipt this Period 100.00 100.00 Memo Item
Full Name of Individual (Last, First, Middle Initial) or F B. Smith, Eric, Louis, , MD,FAAOS Mailing Address 1573 Beacon Street City State	ull Organization Name	Date of Receipt
Waban MA FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Boston Medical Clinic C	02468 Occupation (for Individual) Orthopaedic Surgeon gate Year-to-Date ▼ 756.00	Transaction ID : 11095915 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Initial) or F White, Daniel, W, , MD,FAAOS Mailing Address 1225 W 30th Street City State Casper WY FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Summit Medical Center Summit Medical Center	e Zip Code	Date of Receipt 09 02 2021 Transaction ID : 11095952 Amount of Each Receipt this Period 1000.00 Memo Item
Descipt For	gate Year-to-Date ▼ 1000.00	1184.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 139 OF 55 (check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 13 14 15	12 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	Iress of any political committee	e to solicit contributions from su	ch committee.
Political Action Committee of			opaedic SurgeonsPA	C of AAOS
Full Name of Individual (Last, First, Middle MacDonald, Kevin, , , MD,FAAOS	Initial) or Full Org	anization Name	Date of Receipt	
Mailing Address 528 32nd Ave S City	State	Zip Code	09 03 Transaction ID : 110961	2021 59
Seattle	WA	98144	Amount of Each Receipt	this Period
FEC ID number of contributing federal political committee.	С			1000.00
Name of Employer (for Individual) Virginia Mason Medical Center		ation (for Individual) baedic Surgeon	Memo Item	
Receipt For:	Aggregate Ye	ear-to-Date V		
Other (specify) ▼		1000.00]	
Full Name of Individual (Last, First, Middle A. Halsey, David, A, , MD, FAAOS	Initial) or Full Org	anization Name	Date of Receipt	
Mailing Address PO Box 9000 #132			M M / D D / 09 03	2021
City Edgartown	State MA	Zip Code 02539	Transaction ID : 110961	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt	250.00
Name of Employer (for Individual) Martha's Vineyard Hospital		ation (for Individual) paedic Surgeon	Memo Item	
Receipt For:	Aggregate Ye	ear-to-Date V		
Other (specify)		750.00]	
Full Name of Individual (Last, First, Middle Buchowski, Jacob, M, , MD,MS		anization Name	Date of Receipt	
Mailing Address 27 Rio Vista Dr			M M / D D / 09 03	2021
City Saint Louis	State MO	Zip Code 63124	Transaction ID : 110961 Amount of Each Receipt	
FEC ID number of contributing federal political committee.	C			250.00
Name of Employer (for Individual) Washington University		ation (for Individual) paedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 350.00	1	
SUBTOTAL of Receipts This Page (optional)				1500.00
TOTAL This Period (last page this line numb	er only)			

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Roberson, Rowland, M, , MD, FAAOS	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 641 N Lamar Blvd			08 / D D / Y Y Y Y 2021
	City Oxford	State MS	Zip Code 38655-3235	Transaction ID : 11096210 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Specialty Orthopedic Group Receipt For: Primary General	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Memo Item
	Other (specify) ▼	L	672.00	
в.	Full Name of Individual (Last, First, Middle Init Lisella, Jordan, Mills, , MD, FAAOS Mailing Address 14 Turner Lane	ial) or Full O	rganization Name	Date of Receipt
	City Loudonville	State NY	Zip Code 12211	Transaction ID : 11096211
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]
с.	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Zanaros, George, , , MD,FAAOS			Date of Receipt
	Mailing Address 16 Shaker Bay Rd			M M / D D / Y
	City Latham	State NY	Zip Code 12110	Transaction ID : 11096212 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 672.00]
s	UBTOTAL of Receipts This Page (optional)			252.00
Т	OTAL This Period (last page this line number of	only)	••••••	

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 a mark
Any information copied from such Reports and or for commercial purposes, other than using th		
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Liss, Frederic, E, , MD, FAAOS Mailing Address 554 Church Road City Malvern FEC ID number of contributing federal political committee.	State Zip Code PA 19355	Date of Receipt 08 16 2021 Transaction ID : 11096213 Amount of Each Receipt this Period 2500.00 Mame Item
Name of Employer (for Individual) The Rothman Institute Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2500.00	Memo Item
Full Name of Individual (Last, First, Middle In B. Smith, Scott, A, , MD,FAAOS Mailing Address 200 Clovis Dr City	State Zip Code	Date of Receipt 08 Transaction ID : 11096214
Georgetown FEC ID number of contributing federal political committee. Name of Employer (for Individual) Texas Orthopedics Round Rock Receipt For: Primary General Other (specify) ▼	TX 78628 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Amount of Each Receipt this Period
Full Name of Individual (Last, First, Middle In C. Bercik, Michael, J, , Jr, MD,FAA Mailing Address 1410 Center Road City Lancaster FEC ID number of contributing federal political committee. Name of Employer (for Individual) Thomas Jefferson University Receipt For: Primary General	hitial) or Full Organization Name State Zip Code PA 17603 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 08 20 2021 Transaction ID : 11096216 Amount of Each Receipt this Period 50.00 Memo Item
Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	-	2800.00

SCHEDULE A (FEC Form 3X)		Lice constate cohodula(a)	FOR LINE NUMBER: PAGE 142 OF 551	
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)	
		Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and	Statements ma	Leven av not be sold or used by any p	erson for the purpose of soliciting contributions	
or for commercial purposes, other than using t				
NAME OF COMMITTEE (In Full)				
Political Action Committee of t	he America	an Association of Orthe	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle A. Lopez, Peter, V, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 3140 South Waverly Park	Mailing Address 3140 South Waverly Park			
City	State	Zip Code	Transaction ID : 11096217	
Tampa	FL	33629	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		250.00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
OrthoCare Florida	Orth	nopaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date V		
Primary General		500.00	1	
Other (specify) v		500.00	1	
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name		
Jiranek, William, A, , MD,FAAOS,F			Date of Receipt	
Mailing Address 4709 Creekstone Drive	Mailing Address 4709 Creekstone Drive			
City	State	Zip Code	Transaction ID : 11096218	
Durham	VA	27703	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		84.00	
Name of Employer (for Individual) Duke University		upation (for Individual) nopaedic Surgeon	Memo Item	
Receipt For:	Aggregate	Year-to-Date V		
Primary General Other (specify) ▼		, 672.00]	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Glusenkamp, Nathan, , ,			Date of Receipt	
Mailing Address 9400 W Higgins Rd				
City	State	Zip Code	Transaction ID : 11096219	
Rosemont	IL	60018	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		50.00		
Name of Employer (for Individual) AAOS	Occupation (for Individual) Chief Quality and Registries Officer		Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00]	
SUBTOTAL of Receipts This Page (optional).			384.00	

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

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 143 OF 5
ITEMIZED RECEIPTS			for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and State	ements ma	y not be sold or used by any p	
	for commercial purposes, other than using the na			
\backslash	NAME OF COMMITTEE (In Full)			
	Political Action Committee of the	America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Ľ	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	
Α.	Mejia, Alfonso, , , MD,MPH,FAA	Date of Receipt		
	Mailing Address 5332 South Shore Drive			
	City	State	Zip Code	08 24 2021
	City Chicago	IL	60615	Transaction ID : 11096221
	FEC ID number of contributing			Amount of Each Receipt this Period
	federal political committee.	С		84.00
	Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item
	Illinois Association of Orthopedic Sur		opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) v		1344.00	1
	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	
В.	Schmidt, Kenneth, , , MD		-	Date of Receipt
	Mailing Address 10811 N 52nd Street			
	City	State	Zip Code	08 24 2021
	Scottsdale	AZ	85254	Transaction ID : 11096222 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	OrthoArizona		iopaedic Surgeon	-
		Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		400.00	1
			400.00	-
_	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	
C.	Iorio, Richard, , , MD,FAAOS			Date of Receipt
	Mailing Address 31 Prince St			08 30 / Y Y Y Y 2021
	City	State	Zip Code	Transaction ID : 11096228
	Beverly	MA	01915	Amount of Each Receipt this Period
	FEC ID number of contributing	С		84.00
	federal political committee.			
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item
	Brigham and Women's Hospital		opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Other (specify)		672.00	
Γ				040.00
5	SUBTOTAL of Receipts This Page (optional)		•••••••	218.00
1				

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ITEMIZED RECEIPTS	for each categor Detailed Summa	ry of the
		sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association	n of Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Epps, Howard, R, , MD,FAAOS Mailing Address 1936 Wroxton Road City Houston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Baylor College of Medicine Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code TX 77005 C Occupation (for Individu Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt Date of Receipt 08 30 2021 Transaction ID : 11096230 Amount of Each Receipt this Period 250.00 Memo Item 750.00
Full Name of Individual (Last, First, Middle B. Waddell, Bradford, Sutton, , MD,F Mailing Address 3421 Marquette St City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carrell Cliic Receipt For: Other (specify)		Date of Receipt 08 / 30 / 2021 Transaction ID : 11096231 Amount of Each Receipt this Period 1al) 672.00
Full Name of Individual (Last, First, Middle C. Lopez, David, Vincent, , MD,FA. Mailing Address 27 Courtney Ct City Freehold FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Sports Medicine Speciali Receipt For: Primary General Other (specify)		Date of Receipt Date of Receipt Constrained Date of Receipt Constrained Date of Receipt Date of Receip
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number		

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	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initia A. Greenwald, Alan, G, , MD,FAAOS Mailing Address 14780 Tieton Dr City Yakima FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedics Northwest Receipt For:	al) or Full Organization Name State Zip Code WA 98908 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt
Primary General Other (specify) ▼	500.00]
Full Name of Individual (Last, First, Middle Initia B. Morgan, Randall, C, , Jr, MD,FAA Mailing Address 7913 Rio Bella PI City University Park FEC ID number of contributing federal political committee.	al) or Full Organization Name State Zip Code FL 34201	Date of Receipt 09 0 2021 Transaction ID : 11096251 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Memo Item
C. Savoie, Felix, H, , III, MD,FA Mailing Address 80 Audubon Blvd		Date of Receipt
City New Orleans FEC ID number of contributing federal political committee.	State Zip Code LA 70118	Transaction ID : 11096281 Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) Tulane University School of Medicine Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 5000.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		2000.00

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17	
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	opaedic SurgeonsPAC of AAOS	
Α.	Full Name of Individual (Last, First, Middle Init Mangone, Peter, George, , MD,FAAOS	ial) or Full C	Organization Name	Date of Receipt	
	Mailing Address 392 Racquet Club Road			09 / D D / Y Y Y Y 2021	
	City Asheville	State NC	Zip Code 28803	Transaction ID : 11096283 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		1000.00	
	Name of Employer (for Individual) Blue Ridge Bone & Joint Clinic		upation (for Individual) hopaedic Surgeon	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]	
в.	Full Name of Individual (Last, First, Middle Init Caggiano, Nicholas, M, , MD, FAAO Mailing Address 862 Meinecke Ave Suite 100		Organization Name	Date of Receipt	
	City	State	Zip Code	Transaction ID : 11096294	
	San Luis Obispo	CA	93405	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer (for Individual) St. Luke's Ortho Surgery Residency		cupation (for Individual) hopaedic Surgeon	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]	
с.	Full Name of Individual (Last, First, Middle Init Ayers, Michael, E, , MD,FAAOS	ial) or Full C	Organization Name	Date of Receipt	
	Mailing Address 2 Prospect Ave	• · · · · · · · · · · · · · · · · · · ·			
	City Scituate	State MA	Zip Code 02066-4321	Transaction ID : 11097162 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	South Shore Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]	
s	UBTOTAL of Receipts This Page (optional)		•	2250.00	
т	OTAL This Period (last page this line number of	only)	••••••		

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 147 OF 551 (check only one)			
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any political committee				
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Ortho	ppaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Middle I Stokesbary, Steven, J, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt			
Mailing Address 627 Arrowhead Ct	State Zip Code	09 04 2021			
Dakota Dunes	SD 57049	Transaction ID : 11097163 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	84.00			
Name of Employer (for Individual) CNOS	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00				
Full Name of Individual (Last, First, Middle I Black, David, Albritton, , MD,PhD	nitial) or Full Organization Name	Date of Receipt			
Mailing Address 12112 Fairway Drive		09 04 2021			
City Little Rock	State Zip Code AR 72212	Transaction ID : 11097164 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	84.00			
Name of Employer (for Individual) Univ of Arkansas	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00				
Full Name of Individual (Last, First, Middle I Prohaska, Matthew, G, , MD,FA		Date of Receipt			
Mailing Address 69 Griggs Hill Road	Mailing Address 69 Griggs Hill Road				
City Danville	StateZip CodeVT05828	Transaction ID : 11097165 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	84.00			
Name of Employer (for Individual) NVRH Orthopaedic Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00				
SUBTOTAL of Receipts This Page (optional)	·····	. 252.00			
TOTAL This Period (last page this line numbe	er only)				

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	ED RECEIPTS		for each category of the Detailed Summary Page	(check only 11a 13	y one) 11b 14	11c 15	12 16 17		
	nation copied from such Reports and Stai mercial purposes, other than using the n								
	OF COMMITTEE (In Full) cal Action Committee of the	America	n Association of Orthe	opaedic S	Surgeon	sPA	C of AAOS		
A. Schm	me of Individual (Last, First, Middle Initia idt, Todd, A, , MD,FAAOS Address 2865 Lake Park Drive	I) or Full Org	ganization Name		Date of Receipt				
City Jonest	poro	State GA	Zip Code 30236		action ID : t of Each F				
	number of contributing political committee.	С					250.00		
Name of OrthoA	- Com	Ortho	oation (for Individual) paedic Surgeon ⁄ear-to-Date ▼	M	emo Item				
	rimary General hther (specify) ▼		750.00]					
Full Na B. Linte	me of Individual (Last, First, Middle Initia cum, Neal, D, , MD, FAAOS	I) or Full Org	ganization Name	Date of	f Receipt				
Mailing	Address 789 N 1500 Road	м м 09	/ D D) / Y	2021				
City Lawrer	ice	State KS	Zip Code 66049-9194		action ID : t of Each F				
	number of contributing political committee.	С					200.00		
Name Self Em	of Employer (for Individual) ployed		pation (for Individual) opaedic Surgeon	M	emo Item				
	: For: rimary General ther (specify) ▼	y General Aggregate Year-to-Date ▼							
	me of Individual (Last, First, Middle Initia Henry, Bone, , Jr, MD,FAA	l) or Full Org	ganization Name	Date of	f Receipt				
	Address 2945 Stanford Ave	м м 09	/ D D		2021				
City Dallas		State TX	Zip Code 75225		action ID : t of Each F				
	number of contributing political committee.		y	. ,	84.00				
Texas	of Employer (for Individual) Scottish Rite Sports Medicine		pation (for Individual) paedic Surgeon	М	Memo Item				
	: For: rimary General Wher (specify)	Aggregate Y	′ear-to-Date ▼ 756.00]					
SUBTOT	AL of Receipts This Page (optional)				, , , , , , , , , , , , , , , , , , ,	. ,	534.00		
TOTAL T	his Period (last page this line number on	lly)							

FOR LINE NUMBER:

PAGE 149 OF

551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Farber, Daniel, C, , MD,FAAOS Mailing Address 300 Fairhill Rd City Wynnewood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Penn Medicine Orthopaedics Receipt For: Primary General Other (specify) ▼	State PA C Occu Orth	rganization Name Zip Code 19096-1804 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 750.00	Date of Receipt 09 / 06 / 2021 Transaction ID : 11097169 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle I B. Early, John, S, , MD,FAAOS Mailing Address 8210 Walnut Hill Ln Ste 130 City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual) Texas Orthopaedic Associates Receipt For: Primary General Other (specify) ▼	State TX C	rganization Name Zip Code 75231 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 750.00	Date of Receipt 09 06 2021 Transaction ID : 11097170 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle I Bear, Brian, Jeffrey, , MD,FAAO Mailing Address 1621 National Avenue City Rockford FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ortholllinois Receipt For: Primary General Other (specify)	State IL Occu Orth	rganization Name Zip Code 61103 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 750.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			750.00

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER: PAGE 150 OF 551

ITE	MIZED RECEIPTS		Use separate scr for each category Detailed Summar	of the	(check only 11a 13	/ one) 11b 14	11c 15	12 16	17
or fo	information copied from such Reports and Sta or commercial purposes, other than using the IAME OF COMMITTEE (In Full)	atements ma name and ad	ay not be sold or use ddress of any politic	ed by any pers al committee t	son for the o solicit cor	purpose of atributions	soliciting	g contribu h commit	utions Itee.
	Political Action Committee of the	America	an Associatior	of Orthop	baedic S	urgeon	sPA	C of A	AOS
A	ull Name of Individual (Last, First, Middle Initia Pierce, Troy, D, , MD,FAAOS	al) or Full Or	rganization Name		Date of	Receipt			
_	Aailing Address 4012 Edgewater PI SE	State	Zip Code					2021	Y
	Mandan	ND	58554			action ID : of Each F			ł
	EC ID number of contributing ederal political committee.	С					-	250	.00
Г	Jame of Employer (for Individual) The Bone & Joint Center		upation (for Individua opaedic Surgeon	al)	Me	emo Item			
ŀ	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	750.00					
B	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Schmale, Gregory, A, , MD, FAAOS				Date of	Receipt			
_	Aailing Address 6515 126th Ave NE				09 / 06 / Y Y Y Y 2021				Y
	City Kirkland	State WA	Zip Code 98033			action ID : of Each F			ł
	EC ID number of contributing ederal political committee.	С			84.00			.00	
S	Name of Employer (for Individual) Seattle Children's		upation (for Individua nopaedic Surgeon	al)	Me	emo Item			
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	756.00					
	ull Name of Individual (Last, First, Middle Initia Burke, Charles, J, , III, MD, F	al) or Full Or	rganization Name		Date of	Receipt			
_	Aailing Address 200 Delafield Rd Ste 4010				09	/ 06		y y 2021	Ŷ
	City Pittsburgh	State PA	Zip Code 15215-3235			action ID : of Each F			ł
	EC ID number of contributing ederal political committee.	Occupation (for Individual) Orthopaedic Surgeon					, , , , , , , , , , , , , , , , , , ,	84	.00
ι	lame of Employer (for Individual) JPMC					emo Item			
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	756.00					
SU	BTOTAL of Receipts This Page (optional)			····· ►				418	.00

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

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100

SCHEDULE A (FEC Form 3X)		separate schedule(s)	FOR LINE NUMBER: PAGE 151 OF 551		
ITEMIZED RECEIPTS	for e	each category of the	(check only one)		
	Deta	ailed Summary Page	X 11a 11b 11c 12 13 14 15 16		
Any information copied from such Reports	and Statements may not b	be sold or used by any r	person for the purpose of soliciting contribution		
			e to solicit contributions from such committee		
NAME OF COMMITTEE (In Full)					
Political Action Committee	of the American As	sociation of Orth	opaedic SurgeonsPAC of AAC		
Full Name of Individual (Last, First, Mic	dle Initial) or Full Organiza	tion Name			
A. Gomez, Gregory, , , MD			Date of Receipt		
Mailing Address 6201 Moonfield Dr	Jailing Address 6201 Moonfield Dr				
<u></u>	04-4-	Cada	09 06 2021		
City Huntington Beach		o Code 02648	Transaction ID : 11097175		
		2010	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer (for Individual)	Occupation	(for Individual)	Memo Item		
Emanate Health	Orthopaedi	c Surgeon			
Receipt For:	Aggregate Year-to	-Date 🔻			
Other (apositi)		450.00			
Other (specify)		400.00	4		
Full Name of Individual (Last, First, Mid B. Brady, Drew, A, , MD, FAAOS	dle Initial) or Full Organiza	tion Name	Date of Receipt		
	Mailing Address 6 North Buckridge Drive				
City	State	o Code	09 06 2021		
Greenville	·	9807-2271	Transaction ID : 11097553 Amount of Each Receipt this Period		
FEC ID number of contributing					
federal political committee.	C		1000.00		
Name of Employer (for Individual) First State Orthopaedics	Occupation Orthopaedi	(for Individual) c Surgeon	Memo Item		
Receipt For:	Aggregate Year-to	-Date 🔻			
Primary General					
Other (specify) v		1000.00	4		
Full Name of Individual (Last, First, Mic C. Duggan, John, P, , Jr, MD, F/		tion Name	Date of Receipt		
Mailing Address 30 Meadows End					
			09 06 2021		
City		Code	Transaction ID : 11097555		
Georgetown	TX 7	8628-0906	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		500.00		
Name of Employer (for Individual)		(for Individual)	Memo Item		
Wellstone Receipt For:	Orthopaedic				
Receipt For:	Aggregate Year-to	-Date V	_		
Other (specify)		500.00			
			-		
	1				
SUBTOTAL of Receipts This Page (option	nal)		1550.00		

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 152 OF

	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions be to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS					
Full Name of Individual (Last, First, Middl Szczech, Bartlomiej, , , MD, FAAOS		rganization Name	Date of Receipt					
Mailing Address 89 Intervale Way			M M / D / Y					
City Lake Placid	State NY	Zip Code 12946	Transaction ID : 11097911 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
Name of Employer (for Individual) St Joseph's Hospital Med Ctr Receipt For:	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Memo Item					
Primary General Other (specify) ▼		900.00]					
Full Name of Individual (Last, First, Middl B. Mejia, Alfonso, , , MD,MPH,FAA	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 5332 South Shore Drive			M M / D D / Y					
City Chicago	State IL	Zip Code 60615	Transaction ID : 11097912 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		84.00					
Name of Employer (for Individual) Illinois Association of Orthopedic Sur		upation (for Individual) nopaedic Surgeon	Memo Item					
Receipt For: A Primary General Other (specify) ▼		Year-to-Date ▼ 1428.00]					
Full Name of Individual (Last, First, Middl C. Gray, F, Scott, , MD,FAAOS	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 25 Olmstead Lane			M M / D D / Y Y Y Y 09 08 2021					
City Ridgefield	State CT	Zip Code 06877	Transaction ID : 11097914 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
Name of Employer (for Individual) Connecticut Family Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00]					
SUBTOTAL of Receipts This Page (optiona	I)		284.00					
TOTAL This Period (last page this line num	ber only)							

FOR LINE NUMBER:

PAGE 153 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Ort	hopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl A. Law, Brian, C, , MD,FAAOS Mailing Address 541 E Erie Street Unit 314 City Milwaukee	e Initial) or Full Organization Name State Zip Code WI 53202	Date of Receipt 09 / 07 / 2021 Transaction ID : 11098306 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Medical College of Wisconsin Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Memo Item
Full Name of Individual (Last, First, Middl B. Green, Daniel, William, , MD,FA. Mailing Address 535 E 70th St		Date of Receipt
City New York FEC ID number of contributing federal political committee.	State Zip Code NY 10021	Transaction ID : 11098310 Amount of Each Receipt this Period 175.00
Name of Employer (for Individual) Hosp for Special Surgery Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1575.00	Memo Item
Full Name of Individual (Last, First, Middl C. Mosley, Emmett, Wayne, , MD Mailing Address 220 Thompson Pl		Date of Receipt
City Roswell FEC ID number of contributing federal political committee.	State Zip Code GA 30075-3522	Transaction ID : 11098312 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) ASPIRUS Receipt For:	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Memo Item
	1)	509.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(Check only one) Image: Mark 11a 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Kiner, Dirk, W, , MD,FAAOS Mailing Address 449 Canyon Springs Dr City Hixson FEC ID number of contributing federal political committee. Name of Employer (for Individual) Southern Orthopaedic Trauma Surgeons Receipt For: Primary General	State TN Zip Code 37343-2387 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 09 / 07 / 2021 Transaction ID : 11098315 Amount of Each Receipt this Period 84.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle I B. Hsu, Joseph, R, , MD,FAAOS Mailing Address 2816 Hedgewyk PI	nitial) or Full Organization Name	Date of Receipt
City Charlotte FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carolinas Medical Center Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code NC 28211 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Mmm / D D Y
Full Name of Individual (Last, First, Middle I Gallant, Gregory, G, , MD,MBA,I Mailing Address 3588 Wellsford Lane	FAA	Date of Receipt
City Doylestown FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify)	State PA Zip Code 18902 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 583.31	Transaction ID : 11098330 Amount of Each Receipt this Period 83.33 Memo Item
SUBTOTAL of Receipts This Page (optional)		417.33

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 155 OF 55' (check only one)			
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11			
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Political Action Committee of the source of the	e name and address of any political committee				
Full Name of Individual (Last, First, Middle Ir					
Clain, Michael, R, , MD, FAAOS Mailing Address 9 Indian Head Road		Date of Receipt			
City	State Zip Code	09 09 2021 Transaction ID : 11099333			
Riverside	CT 06878	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	84.00			
Name of Employer (for Individual) Orthopaedic & Neurosurgery Specialists	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00]			
Full Name of Individual (Last, First, Middle Ir Armstrong, April, D, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt			
Mailing Address 30 Hope Drive Bldg A, Suite 2900, EC089		M M / D D / Y Y Y Y 09 09 2021			
City Hershey	StateZip CodePA17033	Transaction ID : 11099334 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	125.00			
Name of Employer (for Individual) Penn State Health Milton S. Hershey Me	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00]			
Full Name of Individual (Last, First, Middle Ir . Mott, Michael, P, , MD, FAAOS	itial) or Full Organization Name	Date of Receipt			
Mailing Address 11193 Maple Ridge Drive	Mailing Address 11193 Maple Ridge Drive				
City Plymouth	StateZip CodeMI48170	Transaction ID : 11101341 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	200.00			
Name of Employer (for Individual) Henry Ford Hospital, K-12	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00]			
SUBTOTAL of Receipts This Page (optional)	······	409.00			
TOTAL This Period (last page this line number	only)				

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IT	EMIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page	L `	heck only one) 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an	Association of Ortho	ра	edic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Jester, Adam, F, , MD, FAAOS Mailing Address 8420 Boxwood Dr	al) or Full O	rgar	nization Name	_	Date of Receipt
						09 11 2021
	City Tampa	State FL		Zip Code 33615		Transaction ID : 11103034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	Ì			500.00
	Name of Employer (for Individual)	Осси	upat	ion (for Individual)		Memo Item
	Orthopaedic Medical Group of Tampa Bay	Orth	nopa	edic Surgeon		
	Receipt For:	Aggregate	Yea	r-to-Date ▼		
	Primary General Other (specify) ▼		-	500.00		
В.	Full Name of Individual (Last, First, Middle Initi Nahigian, Kevin, K, , MD, FAAOS	al) or Full O	rgar	nization Name		Date of Receipt
	Mailing Address 85 Red Bay Rd					09 11 2021
	City	State Zip Code				Transaction ID : 11103035
	Elgin	SC		29045		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C				84.00
	Name of Employer (for Individual) Carolina Shoulder & Knee Specialists		•	ion (for Individual) nedic Surgeon	_	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 756.00		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Flanagin, Brody, A, , MD,FAAOS	al) or Full O	rgar	nization Name		Date of Receipt
	Mailing Address 10021 Dahman Circle					09 / D D / Y Y Y Y 09 11 2021
	City Dallas	State TX		Zip Code 75238		Transaction ID : 11103038
	FEC ID number of contributing federal political committee.					Amount of Each Receipt this Period
Name of Employer (for Individual) Orthopedic Associates of Dallas			•	ion (for Individual) edic Surgeon		Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 1000.00		
s	UBTOTAL of Receipts This Page (optional)			•	-	1584.00
Т	OTAL This Period (last page this line number o	nly)		••••••		

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(Check only one) Image: Mark 11a 11a 11b 11c 12 13 14 15 16 17
	Statements may not be sold or used by any pe ne name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Kennedy, Thomas, C, , MD,FAAOS Mailing Address 1106 Pecks Canyon City Yakima FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedics Northwest PLLC Receipt For: Primary General Other (specify) ▼	nitial) or Full Organization Name State Zip Code WA 98908 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle I B. Bernard, Johnathan, , , MD, MPH, Mailing Address 21549 Glebe View Dr	F	Date of Receipt
City Broadlands FEC ID number of contributing federal political committee. Name of Employer (for Individual) National Sports Medicine Institute Receipt For: Primary General Other (specify) ▼	State Zip Code VA 20148 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 756.00	Transaction ID : 11103041 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle I C. Marinello, Patrick, Gaetano, , MI Mailing Address 43 Bradhaven Rd		Date of Receipt
City Slingerlands FEC ID number of contributing federal political committee.	State Zip Code NY 12159	Transaction ID : 11103042 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) The Bone and Joint Center Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 856.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe		1168.00

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 158 OF 55 (check only one)	
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
Political Action Committee of t		opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle I Dodds, Julie, A, , MD,FAAOS Mailing Address 2603 90th Ave	nitial) or Full Organization Name	Date of Receipt	
City Lone Rock	State Zip Code IA 50559	09 12 2021 Transaction ID : 11103043	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00	
Name of Employer (for Individual) Michigan State University	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 856.00]	
Full Name of Individual (Last, First, Middle I Braaton, Paul, J, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 1335 Coffee Rd Ste 100		09 / D D / Y Y Y Y 2021	
City Modesto	StateZip CodeCA95355	Transaction ID : 11103044 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	84.00	
Name of Employer (for Individual) OrthoMed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00]	
Espinoza, Luis, M, , MD, FAAOS	· · · · · · · · · · · · · · · · · · ·		
Mailing Address 5 Savannah Ridge Lane		09 / 12 / Y Y Y Y	
City Metairie	StateZip CodeLA70001	Transaction ID : 11103045 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	84.00	
Name of Employer (for Individual) Orthopaedic Center for Sports Medicine	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 756.00	1	
SUBTOTAL of Receipts This Page (optional)	·	252.00	
TOTAL This Period (last page this line numbe	er only)		

FEC Schedule A (Form 3X) Rev. 06/2016

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		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	n Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I John, Thomas, K, , MD,FAAOS Mailing Address 522 Eastbrook Rd City Ridgewood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Active Orthopedics and Sports Medicine Receipt For:	State NJ C Occup Ortho	Zip Code 07450-2110 Dation (for Individual) ppaedic Surgeon	Date of Receipt
Primary General Other (specify) ▼		′ear-to-Date ▼ 756.00]
Full Name of Individual (Last, First, Middle I B. Mansfield, David, J, , MD,FAAOS Mailing Address 5019 Montoya Rd			Date of Receipt
City El Paso FEC ID number of contributing federal political committee. Name of Employer (for Individual) El Paso Orthopaedic Surgery Group Receipt For: Primary General	Ortho	Zip Code 79922 pation (for Individual) paedic Surgeon /ear-to-Date ▼	Transaction ID : 11103047 Amount of Each Receipt this Period 84.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle I C. Krueger, Chad, A, , MD,FAAOS Mailing Address 705 Kyle Dr City		ganization Name	Date of Receipt 09 13 2021 Transaction ID : 11105846
Ambler FEC ID number of contributing federal political committee. Name of Employer (for Individual)	PA C Occup	19002	Amount of Each Receipt this Period 84.00 Memo Item
Rothman Institute Receipt For: Primary General Other (specify)		paedic Surgeon /ear-to-Date ▼ 756.00]
SUBTOTAL of Receipts This Page (optional)			252.00

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		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of th	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Hogan, MaCalus, Vinson, , MD,MBA,F Mailing Address 106 Field Brook Lane City Gibsonia FEC ID number of contributing federal political committee.		rganization Name Zip Code 15044	Date of Receipt 09 13 2021 Transaction ID : 11105847 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) University of Pittsburgh Medical Cente Receipt For:	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 750.00	Memo Item
Full Name of Individual (Last, First, Middle In B. James, Jeremy, R, , MD,FAAOS Mailing Address 7 Briar Hollow St City Covington FEC ID number of contributing federal political committee. Name of Employer (for Individual) DISC of Louisiana Receipt For: Primary General Other (specify) ▼	State LA C Occu Ortt	rganization Name Zip Code 70433-4511 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 900.00	Date of Receipt
Full Name of Individual (Last, First, Middle In Espiritu, Michael, T, , MD,FAAOS Mailing Address 7 Spanish Bay City North Sioux City FEC ID number of contributing federal political committee. Name of Employer (for Individual) CNOS Receipt For: Primary General Other (specify)	S State SD C Occu Orth	rganization Name Zip Code 57049 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 300.00	Date of Receipt 09 13 2021 Transaction ID : 11106879 Amount of Each Receipt this Period 300.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			650.00

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Ful		dureas of any political commute	
		an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, F McLaughlin, Jeffrey, , , MD	FAAOS	rganization Name	Date of Receipt
Mailing Address 2700 W Ninth / Suite 125	-	7.0.4	09 / D D / Y Y Y Y 2021
City Oshkosh	State WI	Zip Code 54904	Transaction ID : 11106966 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer (for Individu Kennedy Ctr for Hip & Knee, SC	,	upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2250.00	
	ivet Middle Initial) or Full O	version News	
B. Woods, Barrett, Ivory, , I	MD,FAAOS	rganization Name	Date of Receipt
Mailing Address 623 Park Place	State	Zip Code	09 13 2021
Galloway	NJ	08205	Transaction ID : 11107044 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individu Rothman Institute	,	upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, F C. Courtney, Paul, Maxwe		rganization Name	Date of Receipt
Mailing Address 902 S Front St			09 / 14 / Y Y Y Y 2021
City Philadelphia	State PA	Zip Code 19147	Transaction ID : 11107045 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individu Rothman Institute	,	upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 756.00]
SUBTOTAL of Receipts This Pag	e (optional)		3084.00
TOTAL This Period (last page thi	s line number only)		

FOR LINE NUMBER:

PAGE 162 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(cneck only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Init A. Brenneman, Rodney, E, , MD, FAAOS Mailing Address 1218 Cameron Drive City Manheim FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Associates of Lancaster Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code PA 17545 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init B. Service, Benjamin, , , MD,FAAOS Mailing Address 8710 Crestgate Circle City Orlando FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orlando Health Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code FL 32819 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 504.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init C. Halperin, Lawrence, S, , MD,FAAG Mailing Address 408 Spring Valley Ln City Altamonte Springs FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orlando Orthopaedic Center Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		▶ 1584.00

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FOR LINE NUMBER: PAGE 163 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Political Action Committee of	the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Urband, Lindsey, , , MD, FAAOS	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 15066 Almond Orchard La Suite 403	ane		M M / D D / Y Y Y Y Y 09 03 2021
City San Diego	State CA	Zip Code 92131	Transaction ID : 11107898 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) San Diego Hand Specialists		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1172.00]
B. Full Name of Individual (Last, First, Middle Robbe, Frederick, G, , III, MD, FA Mailing Address 8400 Shiloh Church Rd		rganization Name	Date of Receipt
City	State	Zip Code	Transaction ID : 11108267
Hopkinsville FEC ID number of contributing federal political committee.	С	42240	Amount of Each Receipt this Period
Name of Employer (for Individual) WKOSM		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 250.00]
Full Name of Individual (Last, First, Middle C. Grimm, Matthew, R, , MD, FAA		rganization Name	Date of Receipt
Mailing Address 920 Avenue B			09 16 / Y Y Y Y 2021
City Marrero	State LA	Zip Code 70072	Transaction ID : 11108271 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Jefferson Orthopaedic Clinic		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 756.00]
SUBTOTAL of Receipts This Page (optional	l)		▶ 834.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) 11

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 164 OF 551 (check only one)	
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using th			
		ppaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle II Winder, Carey, E, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 866 Woodgate Blvd City	State Zip Code	09 14 2021 Transaction ID : 11108278	
Baton Rouge	LA 70808	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer (for Individual) Baton Rouge Orthopedic Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		
Full Name of Individual (Last, First, Middle II Kofoed, John, Charles, , MD, FAA		Date of Receipt	
Mailing Address 2619 Seminole Ct		09 / 14 / 2021	
City Fairfield	State Zip Code CA 94534-7871	Transaction ID : 11108284 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	89.00	
Name of Employer (for Individual) Sutter Medical Group	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 801.00		
Full Name of Individual (Last, First, Middle II De Campos, Juliet, M, , MD,FAA	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name De Campos, Juliet, M, , MD,FAAOS		
Mailing Address 3400 Oakmont Drive		09 / 14 / 2021	
City Pensacola	StateZip CodeFL32503-6969	Transaction ID : 11108285 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer (for Individual) Andrews Institute Baptist Healthcare	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional)	·····	1589.00	
TOTAL This Period (last page this line numbe	r only)		

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED	RECEIPTS		Use separate schedule(s) for each category of the	(check only	one)		12	
			Detailed Summary Page	11a	110	11c 15	12	17
	n copied from such Reports and Sta sial purposes, other than using the							
	COMMITTEE (In Full)							
/	Action Committee of the			paedic S	urgeon	sPA	C of A	AOS
	of Individual (Last, First, Middle Initia ohn, Anthony, , MD,FAAOS	al) or Full O	rganization Name	Date of	Date of Receipt			
	ress 1367 Washington Ave, Suite 20	00	M M 09					
City Albany		State NY	Zip Code 12206		action ID : of Each F			
	nber of contributing cal committee.	С					1000.	00
Capital Regi	nployer (for Individual) on Orthopaedics		upation (for Individual) Iopaedic Surgeon	Me	emo Item			
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 1000.00					
	of Individual (Last, First, Middle Initia Kirk, , , MD,FAAOS	al) or Full O	rganization Name	Date of	Receipt			
Mailing Add	ress 2725 S 144th St Ste 212		09 14 YYYY 2021					
City		State	Zip Code		action ID :			
Omaha		NE	68144	Amount	of Each F	Receipt th	nis Period	
	nber of contributing cal committee.	С					500.	00
Name of Er OrthoNebras	nployer (for Individual) ska		upation (for Individual) nopaedic Surgeon	Me	emo Item			
Receipt For		Aggregate	Year-to-Date ▼	_				
Other	ry General (specify) ▼		, 500.00					
	of Individual (Last, First, Middle Initia Jonathan, E, , MD, FAAOS		rganization Name	Date of	Receipt			
Mailing Add	ress 2725 S 144th St Ste 212		м м 09	/ D 14		y y 2021	Y	
City Omaha		State NE	Zip Code 68144		action ID : of Each F		-	
	nber of contributing cal committee.	uting			,	. ,	500.	_
OrthoNebra			upation (for Individual) opaedic Surgeon	Me	emo Item			
Receipt For Primate Other		Aggregate	Year-to-Date ▼ 500.00					
SUBTOTAL o	f Receipts This Page (optional)		▶		, ,	9	2000.	00
TOTAL This F	Period (last page this line number o	nly)	····· •		-			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	-	NUMBER: PAGE 166 C)F 551
IT	EMIZED RECEIPTS		for each category of the	(check onl		
			Detailed Summary Page	▲ 11a 13	11b 11c 12 14 15 16	17
Ar	ny information copied from such Reports and Sta	atements ma	ay not be sold or used by any n			
	for commercial purposes, other than using the					
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	· ·				
$ \rangle$	Political Action Committee of the	America	an Association of Orth	opaedic S	SurgeonsPAC of A	AOS
<u> </u>	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name			
Α.	Bernholt, David, , , MD	,	• •••	Date o	f Receipt	
	Mailing Address 3126 Chapel Woods Cv			M		Y
	City	Stato	Zin Codo	09	14 2021	
	City Germantown	State TN	Zip Code 38139		saction ID : 11108301	
			1	Amoun	t of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С			41.	67
	Name of Employer (for Individual)	Осси	upation (for Individual)	м	emo Item	
	Campbell Clinic	Orth	opaedic Surgeon			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		375.03	1		
		<u> </u>		-		
P	Full Name of Individual (Last, First, Middle Initia Bettin, Clayton, Charles, , MD,FAAO		rganization Name	Date of	f Receipt	
В.	Mailing Address 5047 Shady Hall Ct				·	Y
					14 2021	
	City	State	Zip Code		action ID : 11108302	
	Memphis	TN	38117	Amoun	t of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С			41.	67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual)	М	emo Item	
	Receipt For:		nopaedic Surgeon	_		
	Primary General	Aggregate	Year-to-Date V			
	Other (specify) ▼		375.03	1		
	Full Name of Individual (Last, First, Middle Initia		rganization Name			
C.	, , , , ,	AOS		Date o	f Receipt	
	Mailing Address Campbell Clinic			M M 09	/ D D / Y Y Y 14 2021	Y
	1400 S Germantown Rd City	State	Zip Code		saction ID : 11108303	
	Germantown	TN	38138-2205		t of Each Receipt this Period	
	FEC ID number of contributing	C			· · · · · · · · ·	_
	federal political committee.	С			41.	07
	Name of Employer (for Individual)		upation (for Individual)	м	lemo Item	
	Campbell Clinic		opaedic Surgeon			
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary General	· · ·	375.03	1		
	Other (specify)			J		
s	UBTOTAL of Receipts This Page (optional)				125.	01
\vdash	· · · · · · · · · · · · · · · · · · ·				, , , , , , , , , , , , , , , , , , , ,	

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 167 OF

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ ▲ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
		e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Crockarell, John, R, , Jr, MD, FA	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 1458 W Poplar Ave Ste 100			09 14 Y Y Y Y 2021
	City Collierville	State TN	Zip Code 38017	Transaction ID : 11108304 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.03	
в.	Full Name of Individual (Last, First, Middle Initi Grear, Benjamin, J, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 219 Lagrange Creek Drive			09 / 14 / 2021
	City Eads	State TN	Zip Code 38028	Transaction ID : 11108306 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.03	
<u> </u>	Full Name of Individual (Last, First, Middle Initi Guyton, James, L, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 6422 Massey Estates Cove			09 / 14 / Y Y Y Y 2021
	City Memphis	State TN	Zip Code 38120	Transaction ID : 11108307 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.03	
s	UBTOTAL of Receipts This Page (optional)			125.01
Т	OTAL This Period (last page this line number c	only)	••••••	

SCHEDULE A (FEC Form 3)	- Us	e separate schedule(s)	FOR LINE NUMBER: PAGE 168 OF 55 (check only one)
ITEMIZED RECEIPTS		each category of the tailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
Political Action Committee o			ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl Heck, Robert, Kurt, , Jr, MD, FA Mailing Address 4938 Barfield Rd	e Initial) or Full Organiz	zation Name	Date of Receipt
City	State	lip Code	09 14 2021 Transaction ID : 11108308
Memphis	TN	38117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		n (for Individual) dic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 375.03]
Full Name of Individual (Last, First, Middl B. Harkess, James, W, , MD,FAAC		zation Name	Date of Receipt
Mailing Address 9566 Fox Hill Circle S			09 14 2021
City Germantown	State Z	⁷ ip Code 38139	Transaction ID : 11108309
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Campbell Clinic		n (for Individual) dic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 375.03]
. Kelly, Derek, Michael, , MD,FA	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kelly, Derek, Michael, , MD,FAAOS		
Mailing Address 1458 W Poplar Ave Suite 100			09 / D D / Y Y Y Y 2021
City Collierville	State Z TN	lip Code 38017	Transaction ID : 11108310 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		n (for Individual) lic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 375.03]
SUBTOTAL of Receipts This Page (optional	l)		125.01
TOTAL This Period (last page this line num	ber only)		

FOR LINE NUMBER: PAGE 169 OF 551

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)			ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Mihalko, Marc, J, , MD, FAAOS	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4079 Barfield Road			09 14 2021
	City Memphis	State TN	Zip Code 38117	Transaction ID : 11108313 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic	· · · ·	pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 375.03	
в.	Full Name of Individual (Last, First, Middle Init Murphy, Garnett, Andrew, , MD,FAA		ganization Name	Date of Receipt
	Mailing Address Campbell Clinic 1400 S Germantown Rd			09 14 2021
	City Germantown	State TN	Zip Code 38138-2205	Transaction ID : 11108314 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ , 375.03	
с.	Full Name of Individual (Last, First, Middle Init Richardson, David, R, , MD,FAAO		ganization Name	Date of Receipt
	Mailing Address 636 Center Dr			09 / 14 / Y Y Y Y Y 09 14
	City Memphis	State TN	Zip Code 38112	Transaction ID : 11108316 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			41.67
	Name of Employer (for Individual) Campbell Clinic		pation (for Individual) paedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 375.03]
s	UBTOTAL of Receipts This Page (optional)			125.01

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

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	ppaedic SurgeonsPAC of AAOS
✓ Full Name of Individual (Last, First, Middle Initia A. Rudloff, Matthew, Ian, , MD, FAAOS Mailing Address 10211 Ramblewood Dr City Arlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	I) or Full Organization Name State Zip Code TN 38002 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 375.03 375.03	Date of Receipt 09 14 2021 Transaction ID : 11108317 Amount of Each Receipt this Period 41.67 Memo Item
Full Name of Individual (Last, First, Middle Initia B. Sawyer, Jeffrey, R, , MD, FAAOS Mailing Address 4450 Chickasaw Road	I) or Full Organization Name	Date of Receipt
City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State Zip Code TN 38117 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11108318 Amount of Each Receipt this Period 41.67 Memo Item
Full Name of Individual (Last, First, Middle Initia C. Sheffer, Benjamin, West, , MD,FAA Mailing Address 281 Ben Avon Way City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)		Date of Receipt 09 14 2021 Transaction ID : 11108319 Amount of Each Receipt this Period 41.67 Memo Item
SUBTOTAL of Receipts This Page (optional)		125.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thompson, Norfleet, Buckner, , MD, FAAOS Date of Receipt Α. Mailing Address 3784 Highland Park Place 1 09 14 2021 City Zip Code State Transaction ID : 11108321 TN Memphis 38111 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Campbell Clinic Receipt For: Aggregate Year-to-Date ▼ Primary General 375.03 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Throckmorton, Thomas, Ward, MD, FAAOS Date of Receipt Mailing Address 4901 Fairfield Circle 09 2021 14 City State Zip Code Transaction ID : 11108322 ΤN Memphis 38117 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Campbell Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 375.03 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Warner, William, C, Jr, MD, FA Date of Receipt Mailing Address 215 East Cherry Circle М M 09 14 2021 City State Zip Code Transaction ID: 11108323 ΤN Memphis 38117 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Campbell Clinic** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 375.03 Other (specify) 125.01 SUBTOTAL of Receipts This Page (optional).....

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Weinlein, John, C, , MD,FAAOS Mailing Address 633 Valleybrook Dr City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic	State TN C	Zip Code 38120-2707	Date of Receipt 09 / 14 / 2021 Transaction ID : 11108324 Amount of Each Receipt this Period 41.67 Memo Item
Campbell Clinic Receipt For: Primary General Other (specify) V		Year-to-Date ▼ 375.03]
Full Name of Individual (Last, First, Middle I B. Williams, Keith, D, , MD, FAAOS Mailing Address 2336 Pinnacle Creek Dr City Germantown FEC ID number of contributing federal political committee.	Initial) or Full O State TN C	rganization Name Zip Code 38138	Date of Receipt
Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 375.03	Memo Item
C. Full Name of Individual (Last, First, Middle I McCulloch, Patrick, T, , MD, FAA Mailing Address 307 Buckingham Drive	Date of Receipt		
City Venetia FEC ID number of contributing	State PA	Zip Code 15367	Transaction ID : 11108913 Amount of Each Receipt this Period 84.00
federal political committee. Name of Employer (for Individual) Advanced Ortho & Rehab Receipt For: Primary General Other (specify)	Occu	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 756.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			167.34

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Greene, Robert, Neil, , MD,FAAOS Mailing Address 1211 N 16th Ave City Yakima FEC ID number of contributing federal political committee.	State WA	Zip Code 98902	Date of Receipt
Name of Employer (for Individual) Orthopedics Northwest PLLC Receipt For: Primary General Other (specify) ▼	Aggregate	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 756.00	Memo Item
Full Name of Individual (Last, First, Middle Ir B. Olsen, Adam, S, , MD Mailing Address 3686 Washington Street Apt 2520 City Boston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	State MA C Occu Orth	Zip Code 02130 Upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 378.00	Date of Receipt
Full Name of Individual (Last, First, Middle Ir C. Winston, Jonathan, , , MD Mailing Address 4534 Shadowbrook Court City Bettendorf FEC ID number of contributing federal political committee. Name of Employer (for Individual) ORA Orthopaedics Receipt For: Primary General Other (specify)	State IA C Occu Orth	rganization Name Zip Code 52722 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 756.00	Date of Receipt 09 / 18 / 2021 Transaction ID : 11111788 Amount of Each Receipt this Period 84.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			210.00

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only 11a 13	one) 11b 11c 14 15	12 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may	y not be sold or used by any pe ddress of any political committee	erson for the p to solicit con	ourpose of solicitin tributions from suc	g contributions h committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic S	urgeonsPA	C of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Tyndall, William, A, , MD,FAAOS Mailing Address 123 Brittany Ln	al) or Full Or	ganization Name	Date of	Receipt	2021
	City Hollidaysburg	State PA	Zip Code 16648		action ID : 111117 of Each Receipt t	89
	FEC ID number of contributing federal political committee.	С				84.00
	Name of Employer (for Individual) University Orthopedics Receipt For:	Ortho	pation (for Individual) opaedic Surgeon	Me	mo Item	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 756.00			
в.	Full Name of Individual (Last, First, Middle Initia Woodcock, Jessica, A, , MD,FAAOS Mailing Address 738 Newman Rd	al) or Full Or	ganization Name	Date of	/	YYYY
	City New Bern	State NC	Zip Code 28562		19 action ID : 111117 of Each Receipt t	
	FEC ID number of contributing federal political committee.	С				84.00
	Name of Employer (for Individual) Carolina Orthopedics and Sports Medici		ipation (for Individual) opaedic Surgeon	Me	mo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 756.00			
с.			ganization Name	Date of	Receipt	
	Mailing Address 405 NW A St 1101 Horsebarn Road City	State	Zip Code	09 Transa	/ 19 / 19 action ID : 111117	2021 91
	Bentonville	AR	72712	Amount	of Each Receipt t	his Period
	FEC ID number of contributing federal political committee.	С				84.00
	Name of Employer (for Individual) Mercy Clinic Orthopedics Receipt For:	Ortho	pation (for Individual) opaedic Surgeon	Me	emo Item	
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 906.00			
s	UBTOTAL of Receipts This Page (optional)				, , ,	252.00
т	OTAL This Period (last page this line number of	nly)			-grgr	46

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
			13 14 15 16 17 berson for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	the name and a	address of any pointear committee	
	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Gombera, Mufaddal, M, , MD, FAAO	Date of Receipt		
Mailing Address 323 Hunters Trail			09 20 2021
City Houston	State TX	Zip Code 77024	Transaction ID : 11111794 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Texas Orthopedic Hospital		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
Full Name of Individual (Last, First, Middle	e Initial) or Full C	Proanization Name	
B. Abrutyn, David, A, , MD, FAAOS			Date of Receipt
Mailing Address 20 Pitney Court	09 / 20 / Y Y Y Y 2021		
City Basking Ridge	State NJ	Zip Code 07920	Transaction ID : 1111795 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Summit Health Management		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
Full Name of Individual (Last, First, Middle C. Levine, Marc, J, , MD,FAAOS	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 120 Tinari Drive			09 20 2021
City Richboro	State PA	Zip Code 18954	Transaction ID : 11112324
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Trenton Orthopaedic Group	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line num	ber only)		

FOR LINE NUMBER: PAGE 176 OF 551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Init A. Shen, Wen, , , MD,FAAOS Mailing Address 33 Pond Hills Ct City Pleasant Valley	tial) or Full Organization Name State Zip Code NY 12569	Date of Receipt 09 / 21 / 2021 Transaction ID : 11112325
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Associates of Dutchess Coun Receipt For: Primary General Other (specify) ▼	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 252.00	Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Init B. Chapman, Cary, B, , MD,FAAOS Mailing Address 10903 Blue Palm Street	tial) or Full Organization Name	Date of Receipt
City Plantation FEC ID number of contributing federal political committee. Name of Employer (for Individual) Miami Orthopedics & Sports Medicine In Receipt For: Primary General Other (specify) ▼	State Zip Code FL 33324 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 756.00	Transaction ID : 11112326 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Init C. Stoeckl, Andrew, , , MD, FAAOS Mailing Address 90 Fairlawn Dr City Amherst FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State Zip Code NY 14226 C Occupation (for Individual)	Date of Receipt 09 21 2021 Transaction ID : 11112327 Amount of Each Receipt this Period 83.00 Memo Item
Excelsior Orthopedics Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 747.00	251.00
TOTAL This Period (last page this line number		

Use separate schedule(s)

FOR LINE NUMBER:

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IT.	ITEMIZED RECEIPTS Use separate schedule(s) for each category of the		(check only one)		
11	EIVILLED REGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)				
$\left \right\rangle$	· · · · ·	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS	
Α.	Full Name of Individual (Last, First, Middle Init Sherbondy, Paul, Strawn, , MD, FAAOS	tial) or Full O	rganization Name	Date of Receipt	
	Mailing Address 507 Beaumont Dr			M M / D D / Y Y Y Y 09 22 2021	
	City State College	State PA	Zip Code 16801-8311	Transaction ID : 11112675 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		84.00	
	Name of Employer (for Individual) Penn State Health		upation (for Individual) nopaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		756.00		
в.	Full Name of Individual (Last, First, Middle Init Kirol, Bernard, G, , MD, FAAOS	tial) or Full O	rganization Name	Date of Receipt	
	Mailing Address 338 Turnwall Ln			09 22 2021	
	City	State	Zip Code	Transaction ID : 11112677	
	Elgin	SC	29045-9507	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		75.00	
	Name of Employer (for Individual) Midlands Orthopaedics, PA		upation (for Individual) nopaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date 🔻		
	Primary General Other (specify) ▼		, 675.00		
<u>с.</u>	Full Name of Individual (Last, First, Middle Ini Veitch, Andrew, John, , MD,FAAC		rganization Name	Date of Receipt	
	Mailing Address 13416 Desert Zinnia Ct NE			09 / D / Y Y Y Y 22 2021	
	City	State	Zip Code	Transaction ID : 11112678	
	Albuquerque	NM	87111	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		84.00	
	Name of Employer (for Individual) University of New Mexico, Dept of Orth		upation (for Individual) opaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date 🔻		
	Other (specify)		756.00		
s	UBTOTAL of Receipts This Page (optional)		•••••	243.00	

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

PAGE 178 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Init Hire, Justin, M, , MD,FAAOS Mailing Address 3100 Crestwood Lane City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Dwight David Eisenhower Army Medical C Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code MO 65203 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 378.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init B. Styron, Joseph, F, , MD, PhD, F Mailing Address 14244 Calderdale Ln City Strongsville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Cleveland Clinic Foundation Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code OH 44136 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init C. Robinson, Brian, , , MD, FAAOS Mailing Address 4413 Highway 15 City Silver City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Southwest Bone & Joint Institute Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code NM 88061 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00 00	Date of Receipt Mon / 22 2021 Transaction ID : 11112681 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		▶ 1292.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 179 OF 551	
ITEMIZED RECEIPTS		for each category of the	(check only one)	
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports	and Statements ma	ay not be sold or used by any	person for the purpose of soliciting contributions	
			ee to solicit contributions from such committee.	
	<i>.</i>			
Political Action Committee	of the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Mi	ddle Initial) or Full C	rganization Name		
A. Popa, Anca, , , MD,FAAOS	,	3	Date of Receipt	
Mailing Address 71 Norwood Ave	M = M / D = D / Y = Y = Y = Y			
City	State	Zip Code	09 02 2021	
Montclair	NJ	07043	Transaction ID : 11112715	
			Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		300.00	
	0.00	unation (for Individual)	Memo Item	
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Mento item	
Receipt For:	I			
Primary General	Aggregale	Year-to-Date ▼	-	
Other (specify)		300.00		
Full Name of Individual (Last, First, Mi B. Newson, Graham, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 317 Massachusetts Ave NE				
Ste 100			09 02 2021	
City	State	Zip Code	Transaction ID : 11112716	
Washington	DC	20002-5769	Amount of Each Receipt this Period	
FEC ID number of contributing	С		500.00	
federal political committee.				
Name of Employer (for Individual) AAOS		upation (for Individual)	Memo Item	
Receipt For:		ector, Office of Government Rela	itio	
Primary General	Aggregate	Year-to-Date ▼		
Other (specify) ▼		1600.00		
			-	
Full Name of Individual (Last, First, Mi		rganization Name		
C. Herzka, Andrea, , , MD,FAA	05		Date of Receipt	
Mailing Address 160 SW Parkside Ln			09 02 2021	
City	State	Zip Code	Transaction ID : 11112717	
Portland	OR	97205-5852	Amount of Each Receipt this Period	
FEC ID number of contributing	С		500.00	
federal political committee.	0			
Name of Employer (for Individual)	e of Employer (for Individual) Occupation (for Individual)			
OHSU Center For Health & Healing	Orth	opaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date V		
Other (specify)		500.00		
		Apr. Apr. An.		
SUBTOTAL of Receipts This Page (optic	nal)		1300.00	

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 180 OF 551 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Igram, Cassim, M, , MD,FAAOS	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 3014 Woodland Ridge Dr N	E		M M / D D / Y Y Y Y 09 02 2021
City Iowa City	State IA	Zip Code 52240-7900	Transaction ID : 11112718
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual)		upation (for Individual)	Memo Item
University of Iowa Hosp & Clinics Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 2100.00]
Full Name of Individual (Last, First, Middle B. Barton, Shane, , , MD,MPH,FAA	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 11 Cliffewood Place			
City Shreveport	State LA	Zip Code 71106	Transaction ID : 11112719 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Louisiana State University Health Shre		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle I C. Prud'homme, Bonhomme, Josep			Date of Receipt
Mailing Address One Medical Center Drive PO Box 9196 City	State	Zip Code	09 / 02 / 2021 Transaction ID : 11112721
Morgantown	WV	26508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer (for Individual) West Virginia University Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1300.00]
SUBTOTAL of Receipts This Page (optional)			1400.00

TOTAL This Period (last page this line number only)...... I I APR I I APR I I APR I

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 181 OF 551 (check only one)		
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
	Statements may not be sold or used by any p he name and address of any political committee			
Political Action Committee of t		opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle I Haus, Mary, , , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt		
Mailing Address 110 Alyssum Drive	State Zip Code	09 / 02 / 2021 Transaction ID : 11112722		
Butler	PA 16001	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer (for Individual) Ohio Valley Medical Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Middle I Rekant, Mark, S, , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt		
Mailing Address 36 Cove Rd		09 02 2021		
City	State Zip Code NJ 08057	Transaction ID : 11112724		
Moorestown FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer (for Individual)	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	500.00	1		
Full Name of Individual (Last, First, Middle Castello, Paul, H, , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt		
	Mailing Address 377 Broken Arrow Rd			
City Nipomo	StateZip CodeCA93444	Transaction ID : 11112725 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer (for Individual) Central Coast Orthopedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00]		
SUBTOTAL of Receipts This Page (optional).	·····	2500.00		
TOTAL This Period (last page this line number	er only)			

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Hayden, Shawn, A, , MD,FAAOS Mailing Address 5124 Marble Falls Ln	nitial) or Full Or	ganization Name	Date of Receipt
City	State	Zip Code	09 02 2021 Transaction ID : 11112726
Plano	ТХ	75093-7545	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Self Employed		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
B. Star, Andrew, M, , MD,FAAOS Mailing Address 1223 Marietta Drive	nitial) or Full Or	ganization Name	Date of Receipt
		1	09 02 2021
City	State	Zip Code	Transaction ID : 11112727
Ambler	PA	19002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Orthopaedicare		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle I C. Klatt, Brian, A, , MD,FAAOS	nitial) or Full Or	ganization Name	Date of Receipt
Mailing Address 5200 Centre Ave Suite 415			09 / 02 / Y Y Y Y 09 02 2021
City Pittsburgh	State PA	Zip Code 15232	Transaction ID : 11112729
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Shadyside Med Ctr		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)			2000.00

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

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IT	EMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)			
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS			
Α.	Full Name of Individual (Last, First, Middle Initia Bredthauer, Bryan, D, , MD,FAAOS Mailing Address 9814 Harney Pkwy North	al) or Full Oi	rganization Name	Date of Receipt			
	City Omaha	State NE	Zip Code 68114	09 02 2021 Transaction ID : 11112731 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		500.00			
	Name of Employer (for Individual) OrthoNebraska Receipt For:	Orth	upation (for Individual) lopaedic Surgeon	Memo Item			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00				
B.	Full Name of Individual (Last, First, Middle Initia Herzka, Andrea, , , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt			
	Mailing Address 160 SW Parkside Ln	09 / D D / Y Y Y Y 02 / 2021					
	Portland	State OR	Zip Code 97205-5852	Transaction ID : 11112732 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		500.00			
	Name of Employer (for Individual) OHSU Center For Health & Healing		upation (for Individual) nopaedic Surgeon	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
<u>с.</u>		ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Muzzonigro, Thomas, S. , MD.FAAOS					
	Mailing Address 5017 Karrington Dr			09 / D D / Y Y Y Y 2021			
	City Gibsonia	State PA	Zip Code 15044	Transaction ID : 11112735 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		100.00			
	Name of Employer (for Individual) Tri Rivers Musculoskeletal Centers		upation (for Individual) opaedic Surgeon	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00				
s	UBTOTAL of Receipts This Page (optional)		•••••	1100.00			
Т	OTAL This Period (last page this line number o	nly)					

SCHEDULE A (FEC Form 3X) Г

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 184 OF 55 (check only one)
	Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Political Action Committee of the	e name and address of any political committee	
Full Name of Individual (Last, First, Middle In A. Kelly, Jon, P, , MD,FAAOS Mailing Address 2777 Jefferson Street Suite 100 City Carlsbad FEC ID number of contributing federal political committee. Name of Employer (for Individual) Jon P Kelly A Medical Corporation Receipt For: Primary General	itial) or Full Organization Name State Zip Code C 92008 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 09 02 2021 Transaction ID : 11112738 Amount of Each Receipt this Period 256.41 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle In Strauss, Michael, B, , MD,FAAOS Mailing Address 12490 W Fielding Cir Apt 411 City Playa Vista	256.41 itial) or Full Organization Name State Zip Code CA 90094	Date of Receipt 09 02 2021 Transaction ID : 11112739 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Memorial Care Long Beach Medical Cente Receipt For:	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 250.00	250.00
Full Name of Individual (Last, First, Middle In Koh, Jason, L, , MD,MBA,FAA Mailing Address 308 Woodley Road City Winnetka FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northshore Hospital Receipt For: Primary General Other (specify)	itial) or Full Organization Name State Zip Code IL 60093 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 09 2021 Transaction ID : 11112741 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		1506.41

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	n Association of Orth	opaedic SurgeonsPAC of AAOS
A. Full Name of Individual (Last, First, Middle Polly, David, W, , Jr, MD,FAA Mailing Address 7405 Hyde Park Dr City Minneapolis	Initial) or Full Or State MN	ganization Name Zip Code 55439-1741	Date of Receipt
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Univ of Minnesota Receipt For: Primary General Other (specify) ▼	Orth	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	
B. Full Name of Individual (Last, First, Middle Yucha, David, , , MD, FAAOS Mailing Address 24 Colonial Drive	Initial) or Full Or	ganization Name	Date of Receipt
City West Chester FEC ID number of contributing federal political committee.	State PA	Zip Code 19382	Transaction ID : 11112746 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Premier Orthopaedic & Sports Med Receipt For: Primary General Other (specify) ▼	Orth	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Memo Item
C. Urband, Lindsey, , , MD,FAAOS Mailing Address 15066 Almond Orchard La	Date of Receipt		
Suite 403 City San Diego FEC ID number of contributing	State CA	Zip Code 92131	09 03 2021 Transaction ID : 11112747 Amount of Each Receipt this Period
federal political committee. Name of Employer (for Individual) San Diego Hand Specialists		pation (for Individual) ppaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1256.00]
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			1334.00

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IT	EMIZED RECEIPTS		l f	Jse separate schedule(s) or each category of the Detailed Summary Page	L `	heck only one) 11a 11b 11c 12 13 14 15 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay n Iddre	ot be sold or used by any pe ess of any political committee	ersor to s	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an	Association of Orthc	pa	edic SurgeonsPAC of AAOS		
A.	Full Name of Individual (Last, First, Middle Initia Yates, Adolph, J, , Jr, MD,FAA Mailing Address 52 Mallard Drive	nization Name		Date of Receipt				
		State		Zip Code		09 / 03 / 2021		
	City Pittsburgh	PA		15238	_	Transaction ID : 11112748 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С				150.00		
	Name of Employer (for Individual)		•	tion (for Individual)		Memo Item		
	Univ of Pittsburgh Med Ctr	Ortr	nopa	aedic Surgeon	_			
		Aggregate	Yea	ur-to-Date ▼				
	Primary General Other (specify) ▼		-	1150.00				
в.	Full Name of Individual (Last, First, Middle Initia Cooper, Scott, Snow, , MD,FAAOS	al) or Full O	rgai	nization Name		Date of Receipt		
	Mailing Address 405 NW A St 1101 Horsebarn Road					09 / D D / Y Y Y Y Y 2021		
	City	State		Zip Code		Transaction ID : 11112749		
	Bentonville	AR	_	72712	_	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С	_			150.00		
	Name of Employer (for Individual) Mercy Clinic Orthopedics		•	tion (for Individual) aedic Surgeon		Memo Item		
	Receipt For:	Aggregate	Yea	ur-to-Date ▼				
	Primary General Other (specify) ▼		,	822,00				
с.	Full Name of Individual (Last, First, Middle Initi Kramer, Robert, Charles, , MD,FA		rga	nization Name		Date of Receipt		
	Mailing Address 3650 Laurel Ave 3650 Laurel Ave					M M / D D Y		
	City Beaumont	State TX		Zip Code 77707	-	Transaction ID : 11112750 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.					1000.00		
	Name of Employer (for Individual) Beaumont Bone and Joint Insititute		•	tion (for Individual) edic Surgeon		Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 1000.00				
⊢	UBTOTAL of Receipts This Page (optional)				-	1300.00		
11	OTAL This Period (last page this line number o	rny)		▶				

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Ahbel, Dorrit, E, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 251 Baldwin Way			09 03 / Y Y Y Y 2021
City Sacramento	State CA	Zip Code 95864-5625	Transaction ID : 11112751 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) VAMC Sacramento		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
B. Full Name of Individual (Last, First, Middle Ir B. Grothaus, Matthew, Christian, , ME Mailing Address 4486 County Road 10		rganization Name	Date of Receipt
City	State	Zip Code	09 03 2021 Transaction ID : 11112752
Bryan	OH	43506-9717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individual) Parkview Ortho Hospital		upation (for Individual) Iopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle Ir C. Kennedy, E, Jeff, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 235 Johnstone Dr			09 / D D / Y Y Y Y 2021
City Madison	State MS	Zip Code 39110-7686	Transaction ID : 11112753 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individual) Self Employed		ıpation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)			2500.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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551

ITEMIZED RECEIPTS	for eac	ch category of the d Summary Page	(check only one) 11a 11b 11c 13 14 15	12 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Ass	ociation of Orth	opaedic SurgeonsPA	AC of AAOS
Full Name of Individual (Last, First, Middle Initia A. Grindel, Steven, I, , MD,FAAOS Mailing Address 7615 N Beach Dr City Fox Point FEC ID number of contributing federal political committee. Name of Employer (for Individual)	I) or Full Organizatio	Code 217	Date of Receipt	
Medical College of Wisconsin Receipt For: Primary General Other (specify) ▼	Orthopaedic S Aggregate Year-to-D	Surgeon ate ▼ 1000.00		
Full Name of Individual (Last, First, Middle Initia B. Lundy, Douglas, W, , MD,MBA,FAA Mailing Address 801 Ostrum Street PPHP-2 City Bethlehem FEC ID number of contributing	I) or Full Organizatio	Code	Date of Receipt	
federal political committee. Name of Employer (for Individual) St. Luke's University Health Network Receipt For: Primary General Other (specify) ▼	Occupation (fo Orthopaedic S Aggregate Year-to-D	Surgeon	Memo Item	
Full Name of Individual (Last, First, Middle Initia C. McCollam, Stephen, M, , MD,FAAC Mailing Address 2001 Peachtree Rd NE Ste 705 City Atlanta FEC ID number of contributing federal political committee.	State Zip C		Date of Receipt	
Name of Employer (for Individual) Peachtree Orthopaedic Clinic Receipt For: Primary Other (specify)	Occupation (fo Orthopaedic S Aggregate Year-to-D	urgeon	Memo Item	
SUBTOTAL of Receipts This Page (optional)				1400.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 189 OF	551
IT	EMIZED RECEIPTS		for each category of the	(check only one)	
			Detailed Summary Page		17
	y information copied from such Reports and Stat			person for the purpose of soliciting contribution	าร
or	for commercial purposes, other than using the n	ame and a	ddress of any political committee	e to solicit contributions from such committee.	
\backslash	NAME OF COMMITTEE (In Full)	A			<u> </u>
/	Political Action Committee of the	America	an Association of Orthe	opaedic SurgeonsPAC of AAC	15
<u> </u>	Full Name of Individual (Last, First, Middle Initia	I) or Full O	rganization Name		
Α.	Trick, Lorence, W, , MD, FAAOS	Date of Receipt			
	Mailing Address PO Box 509				1
	City	State	Zip Code	09 03 2021 Transaction ID : 11112758	
	Elmendorf	TX	78112	Amount of Each Receipt this Period	
	FEC ID number of contributing				-
	federal political committee.	С		500.00	
	Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item	
	Univ TX Health Sci Ctr at San Antonio		opaedic Surgeon		
	Paggint For:		Year-to-Date ▼	—	
	Primary General	55 54.0		1	
	Other (specify)	L	500.00		
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		
В.	Lemker, Joseph, F, , MD, FAAOS			Date of Receipt	
	Mailing Address 219 Chambersburg Dr	M M / D D / Y Y Y Y	1		
		09 03 2021			
	City Duluth	State MN	Zip Code 55811	Transaction ID : 11112759	
	FEC ID number of contributing			Amount of Each Receipt this Period	-
	federal political committee.	С		500.00	
	Name of Employer (for Individual)	000	upation (for Individual)	Memo Item	
	Duluth Clinic		lopaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	33 - 3		1	
	Other (specify) V	L	500.00	1	
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		
C.				Date of Receipt	
	Mailing Address 2100 Louisiana Blvd			09 03 2021	1
	Ste 410	State	Zip Code	Transaction ID : 11112760	L
	Albuquerque	NM	87110	Amount of Each Receipt this Period	
	FEC ID number of contributing	0		150.00	
	federal political committee.	С		150.00	
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item	
	New Mexico Orthopaedics		opaedic Surgeon		
		Aggregate	Year-to-Date ▼		
	Other (specify)	· · · ·	650.00	1	
				-	
Г					_
s	UBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	1150.00	

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

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Use separate schedule(s)

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ITEM	IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only of the second seco	one) 11b 11c 14 15	12
Any in or for	formation copied from such Reports and Sta commercial purposes, other than using the	atements ma	y not be sold or used by any pe ddress of any political committee	erson for the pu	urpose of soliciti	ing contributions
	ME OF COMMITTEE (In Full) Ilitical Action Committee of the	e America	an Association of Ortho	paedic Su	rgeonsP/	AC of AAOS
	Name of Individual (Last, First, Middle Initi ffcoat, B, Thomas, , MD,FAAOS	al) or Full O	rganization Name	Date of F	Receipt	
	ling Address 3003 Delaware Ave			M M 09	/ D D / 03	y y y y 2021
City Mc	Comb	State MS	Zip Code 39648		ction ID : 11112 of Each Receipt	
	C ID number of contributing eral political committee.	С				250.00
Mc	ne of Employer (for Individual) Comb Ortho Clinic ceipt For:	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼	Men	no Item	
	Other (specify) ▼		250.00			
B . M	Name of Individual (Last, First, Middle Initi eisles, Jeffrey, , , MD,FAAOS ling Address 360 W Butterfield Rd Ste 160	al) or Full O	rganization Name	Date of F	Receipt	YYYYYY
City		State	Zip Code	09	03	2021
	hurst	IL	60126		tion ID : 11112	
	C ID number of contributing eral political committee.	С				1000.00
	ne of Employer (for Individual) nopedic Specialists		upation (for Individual) nopaedic Surgeon	Men	no Item	
Rec	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00			
	Name of Individual (Last, First, Middle Initinow, Stephen, W, , MD,FAAOS	al) or Full O	rganization Name	Date of F	Receipt	
	ling Address 2211 Bayside Place NE		-	M M 09	/ D D / 03	y y y y 2021
City Oly	, /mpia	State WA	Zip Code 98506		ction ID : 11112 of Each Receipt	
	C ID number of contributing eral political committee.	С			<u> </u>	250.00
Cap	ne of Employer (for Individual) bital Medical Center		upation (for Individual) opaedic Surgeon	Men	no Item	
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00			
SUB1	OTAL of Receipts This Page (optional)		•		, ,	1500.00
тота	L This Period (last page this line number o	nly)	••••••		7	

FOR LINE NUMBER: PAGE 191 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements mather the name and a	ay not be sold or used by any address of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.			
	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS			
A. Zarzour, Joseph, Grant, , MD	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Zarzour, Joseph, Grant, , MD					
Mailing Address 3610 Springhill Memorial E	09 / 07 / 2021					
Mobile	State AL	Zip Code 36608	Transaction ID : 11112770 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		5.00			
Name of Employer (for Individual) Gulf Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00				
B. Matson, Paul, C, , MD,FAAOS,F Mailing Address 1431 Premier Drive	Initial) or Full C	Organization Name	Date of Receipt			
City	State	Zip Code	09 07 2021 Transaction ID : 11112781			
Mankato	MN	56001	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		150.00			
Name of Employer (for Individual) Orthopedic and Fracture Clinic		upation (for Individual) hopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00				
Full Name of Individual (Last, First, Middle C. Blotter, Robert, H, , MD,FAAOS		Organization Name	Date of Receipt			
Mailing Address 1116 Ortman Road Ste 190			09 07 2021			
City Marquette	State MI	Zip Code 49855	Transaction ID : 11112786 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer (for Individual) Advanced Center of Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]			
SUBTOTAL of Receipts This Page (optional)			405.00			

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

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IT			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per ddress of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
				paedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Engstrom, Stephen, Matthew, , MD, FAA		rganization Name	Date of Receipt
	Mailing Address 9207 Duncaster Ct			09 07 / Y Y Y Y 2021
	City Brentwood	State TN	Zip Code 37027	Transaction ID : 11112787 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Vanderbilt Univ-Vanderbilt Ortho Inst		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 756.00	
В.	Full Name of Individual (Last, First, Middle Initi Dodds, Julie, A, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 2603 90th Ave			09 07 2021
	City	State	Zip Code	Transaction ID : 11112794
	Lone Rock	IA	50559	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer (for Individual) Michigan State University		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼		772.00	
С.	Full Name of Individual (Last, First, Middle Initi Schmitz, Matthew, R, , MD,FAAOS		rganization Name	Date of Receipt
	Mailing Address 111 Ottawa Run	1		09 / D D / Y Y Y Y 09 07 2021
	City San Antonio	State TX	Zip Code 78231	Transaction ID : 11112796 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) San Antonio Military Medical Center		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)		•	284.00
т	OTAL This Period (last page this line number o	nly)	•	

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Kuzel, Bradley, Randall, , MD,FAAOS Mailing Address 4040 Minnesota Avenue City Duluth	State	Zip Code 55802	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	СОсси	pation (for Individual)	Amount of Each Receipt this Period
Essentia Health Receipt For: Primary General Other (specify) ▼	Orth	opaedic Surgeon Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Ir B. Ingari, John, Victor, , MD,FAAOS Mailing Address 903 Baltimore Yacht Club Ro		rganization Name	Date of Receipt 09 07 2021
City Baltimore FEC ID number of contributing federal political committee.	State MD	Zip Code 21221-2003	Transaction ID : 11112799 Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Wellspan Orthopaedics Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1100.00	Memo Item
Full Name of Individual (Last, First, Middle Ir C. Kraushaar, Barry, S, , MD,FAAO Mailing Address 3 Divot Pl		rganization Name	Date of Receipt
City Suffern FEC ID number of contributing federal political committee.	State NY	Zip Code 10901	Transaction ID : 11112800 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Advanced Ortho & Sports Medicine Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 334.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		,	2084.00

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FOR LINE NUMBER: PAGE 194 OF 551

ITEMIZED RECEIPTS	for each cat	te schedule(s) tegory of the mmary Page	(check only on	ne) 11b 11c 14 15	12 16	17			
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be sold og the name and address of any p	or used by any per political committee	rson for the purp to solicit contrib	oose of solicitin	g contributions				
NAME OF COMMITTEE (In Full) Political Action Committee o	f the American Associa	ation of Ortho	paedic Sur	geonsPA	C of AAOS	3			
Full Name of Individual (Last, First, Midd A. Romness, Mark, J, , MD,FAAOS	e Initial) or Full Organization Nar	me	Date of Receipt						
Mailing Address 1601 Far Hills Rd			09 /	07	2021				
City Charlottesville	StateZip CodeVA22901			on ID : 111128 Each Receipt t					
FEC ID number of contributing federal political committee.	C			9. I. I. 95.	250.00				
Name of Employer (for Individual) Univ of Virginia Orthopaedics	Occupation (for Ind Orthopaedic Surged	,	Memo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	350.00							
B. Woolf, Shane, Kelby, , MD,FAA Mailing Address 2644 Burden Creek Rd		me	Date of Re	ceipt	Y Y Y				
			09	07	2021				
City Johns Island	State Zip Code SC 29455		Transaction ID : 11112804 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		1000.00						
Name of Employer (for Individual) Medical University of South Carolina	Occupation (for Ind Orthopaedic Surger	,							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1000.00							
Full Name of Individual (Last, First, Midd c. Igram, Cassim, M, , MD,FAAC		me	Date of Re	ceipt					
Mailing Address 3014 Woodland Ridge D	NE		M M / / 09	07	2021				
City Iowa City	StateZip CodeIA52240-79	900		ransaction ID : 11112807 ount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C			y y	100.00				
Name of Employer (for Individual) University of Iowa Hosp & Clinics	Occupation (for Ind Orthopaedic Surgeo	,	Memo	Item					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	2200.00							
SUBTOTAL of Receipts This Page (optiona	l)	····· ►		, , , ,	1350.00]			

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FEC Schedule A (Form 3X) Rev. 06/2016

1.

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	▲ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$\left \right\rangle$	Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS						
Α.	Full Name of Individual (Last, First, Middle Initia Donaldson, Thomas, Kent, , MD,FAAOS	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 333 W South Ave			09 07 Y Y Y Y Y 2021						
	City Redlands	State CA	Zip Code 92373	Transaction ID : 11112808 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		1000.00						
	Name of Employer (for Individual) Loma Linda University		upation (for Individual) nopaedic Surgeon	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼ 1000.00							
	Full Name of Individual (Last, First, Middle Initia Faloon, Michael, , , MD,FAAOS	al) or Full O	Organization Name	Data of Respirit						
ь.	Mailing Address 1317 Garden Street			Date of Receipt 09 07 2021						
	City	State	Zip Code	Transaction ID : 11112809 Amount of Each Receipt this Period						
	Hoboken	NJ	07030-6764							
	FEC ID number of contributing federal political committee.	С		1000.00						
	Name of Employer (for Individual) University Spine Center PC		upation (for Individual) hopaedic Surgeon	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V	_						
	Primary General Other (specify) ▼		, 1000.00							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Cummings, Brock, Stefan, , MD,FA		Organization Name	Date of Receipt						
	Mailing Address 701 Heaven's Gate			09 / D D / Y Y Y Y 2021						
	City Paradise	State CA	Zip Code 95969	Transaction ID : 11112810 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		500.00						
	Name of Employer (for Individual) Valley Ridge Orthopedic Center		upation (for Individual) nopaedic Surgeon	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00							
s	UBTOTAL of Receipts This Page (optional)		•	2500.00						
т	OTAL This Period (last page this line number o	nly)	•							

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)					
Ar	y information copied from such Reports and St	atements ma	y not be sold or used by any p	13 14 15 16 17 berson for the purpose of soliciting contributions					
or	for commercial purposes, other than using the	name and a	ddress of any political committe	e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS					
Α.	Full Name of Individual (Last, First, Middle Init Longenecker, Stephen, C, , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 1968 Meadow Ln			09 / D D / Y Y Y Y 09 08 2021					
	City Reading	State PA	Zip Code 19610-2710	Transaction ID : 11112811 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	Name of Employer (for Individual) Bone and Joint Care Center		ipation (for Individual) opaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]					
<u> </u>	Full Name of Individual (Last, First, Middle Initi Shapiro, Todd, , , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 10914 Ramsgate Way			09 / 07 / Y Y Y Y 2021					
	City	State CA	Zip Code	Transaction ID : 11112812					
	Bakersfield FEC ID number of contributing federal political committee.	C	93311	Amount of Each Receipt this Period					
	Name of Employer (for Individual) Southern California Orthopaedic Instit		upation (for Individual) lopaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]					
С.	Full Name of Individual (Last, First, Middle Initi Turner, William, T, , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address PO Box 97	1		09 / 07 / Y Y Y Y 2021					
	City Longview	State WA	Zip Code 98632-7062	Transaction ID : 11112815 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		250.00					
	Name of Employer (for Individual) Longview Orthopedic Associates		ipation (for Individual) opaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]					
⊢	UBTOTAL of Receipts This Page (optional)			1250.00					

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551

ITE	MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17				
Any or f	v information copied from such Reports and St	tatements mand a	not be sold or used by any pendotes of any policities of any political committee	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS				
Α.	Full Name of Individual (Last, First, Middle Init Hettrich, Carolyn, , , MD,MPH,FAA	ial) or Full O	rganization Name	Date of Receipt				
-	Mailing Address 28A Miller Hill Rd			09 / D D / Y Y Y Y 09 07 2021				
	City Dover	State MA	Zip Code 02030-2332	Transaction ID : 11112816 Amount of Each Receipt this Period				
	FEC ID number of contributing rederal political committee.	С		84.00				
I	Name of Employer (for Individual) Brigham and Women's Hospital Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item				
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 756.00					
B.	Full Name of Individual (Last, First, Middle Init Wyzykowski, Richard, John, , MD, F Mailing Address 214 Murcia Ct		rganization Name	Date of Receipt				
	City	State	Zip Code	09 07 2021 Transaction ID : 11112817				
-	Danville FEC ID number of contributing rederal political committee.	CA	94506	Amount of Each Receipt this Period				
	Name of Employer (for Individual) Muir Orthopaedic Specialists		upation (for Individual) nopaedic Surgeon	Memo Item				
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00					
	Full Name of Individual (Last, First, Middle Init LaPorte, Jeffrey, M, , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 5202 Laree Ct			09 / D D / Y Y Y Y 09 07 2021				
-	City Missoula	State MT	Zip Code 59803	Transaction ID : 11112820 Amount of Each Receipt this Period				
	FEC ID number of contributing ederal political committee.	С		500.00				
	Name of Employer (for Individual) Missoula Bone and Joint		upation (for Individual) opaedic Surgeon	Memo Item				
I	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1500.00					
รเ	JBTOTAL of Receipts This Page (optional)		•	1084.00				
тс	TAL This Period (last page this line number of	only)						

FOR LINE NUMBER: PAGE 198 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and St for commercial purposes, other than using the			e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	n Association of Orth	opaedic SurgeonsPAC of AAOS					
Α.	Full Name of Individual (Last, First, Middle Initi Qureshi, Abid, A, , MD Mailing Address 31 Wilder Road	al) or Full Or	ganization Name	Date of Receipt					
	City	State	Zip Code	09 07 2021 Transaction ID : 11112824					
	Orinda	CA	94563-3732	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		1000.00					
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item					
	Muir Orthopaedics Specialists	Orth	opaedic Surgeon						
	Receipt For:	Aggregate '	Year-to-Date 🔻						
	Primary General			1					
	Other (specify) V		1000.00						
В.	Full Name of Individual (Last, First, Middle Initi Sheehan, John, P, , MD,FAAOS	al) or Full Or	ganization Name	Date of Receipt					
	Mailing Address 6621 Cuming St			09 07 2021					
	City	State	Zip Code	Transaction ID : 11112825					
	Omaha	NE	68132	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		84.00					
	Name of Employer (for Individual) Boys Town		pation (for Individual) opaedic Surgeon	Memo Item					
	Receipt For:	Aggregate '	Year-to-Date ▼						
	Primary General Other (specify) ▼		, 756.00	1					
с.	Full Name of Individual (Last, First, Middle Initi Keeney, James, A, , MD,FAAOS	al) or Full Or	ganization Name	Date of Receipt					
	Mailing Address 1106 Shallow Ridge Circle	1		09 07 / Y Y Y Y Y 2021					
	City Columbia	State MO	Zip Code 65201	Transaction ID : 11112826 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		250.00					
	Name of Employer (for Individual) University Missouri Orthopaedic Instit		pation (for Individual) opaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]					
⊢	UBTOTAL of Receipts This Page (optional)			1334.00					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 199 OF 551
ITEMIZED RECEIPTS			for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements ma	y not be sold or used by any r	person for the purpose of soliciting contributions
	for commercial purposes, other than using the			
\backslash	NAME OF COMMITTEE (In Full)			
$ \rangle$	Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
	Full Name of Individual (Last, First, Middle Initia	al) or Full Or	anization Name	
Α.	Backe, Henry, A, , Jr, MD,FAA		gamzanon riano	Date of Receipt
	Mailing Address 305 Blackrock Turnpike			M = M / D = D / Y = Y = Y
		State	Zin Codo	09 07 2021
	City Fairfield	State CT	Zip Code 06825	Transaction ID : 11112827
				Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
		0.000	unation (for Individual)	Memo Item
	Name of Employer (for Individual) Orthopaedic Specialty Group PC		ipation (for Individual) opaedic Surgeon	
	Receipt For:		Year-to-Date V	
	Primary General	Ayyreyale		
	Other (specify)		750.00	
R	Full Name of Individual (Last, First, Middle Initia Boothby, Michael, Hayden, , MD, FA		ganization Name	Date of Receipt
υ.	Mailing Address 119 Hidden Lake Ranch Rd			
		09 07 2021		
	City	State	Zip Code	Transaction ID : 11112828
	Aledo	TX	76008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) The Ortho & Sports Med Institute		pation (for Individual)	Memo Item
	Receipt For:		opaedic Surgeon	
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		750.00	
C	Full Name of Individual (Last, First, Middle Initia Chutkan, Norman, Barrington, , ME		ganization Name	Date of Receipt
J.	Mailing Address 1 E Lexington Ave	.,		
	Unit 1404			09 08 2021
	City	State AZ	Zip Code	Transaction ID : 11112830
	Phoenix	AZ	85012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)		pation (for Individual)	Memo Item
	The CORE Institute Receipt For:		opaedic Surgeon	
	Primary General	Aggregate	Year-to-Date 🔻	-
	Other (specify)		756.00	
				-
S	UBTOTAL of Receipts This Page (optional)			584.00

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

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FOR LINE NUMBER: PAGE 200 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only	11b	11c	12				
	y information copied from such Reports and St for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
	Political Action Committee of the	an Association of Orth	opaedic S	urgeon	sPA	C of AA	OS				
Α.	Full Name of Individual (Last, First, Middle Initi Shrock, Kevin, B, , MD,FAAOS	ial) or Full O	rganization Name	Date of	Receipt						
	Mailing Address 1414 SE 3rd Ave			M M 09	/ D D 09	JL	ү ү 2021	Y			
	City Fort Lauderdale	State FL	Zip Code 33316		action ID : of Each R						
	FEC ID number of contributing federal political committee.	С					250.0	00			
	Name of Employer (for Individual)		upation (for Individual)	Me	emo Item						
	Fort Lauderdale Orthopaedics Receipt For:		opaedic Surgeon	_							
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		750.00								
B	Full Name of Individual (Last, First, Middle Initi More, Robert, Cameron, , MD, FAAC		rganization Name	Date of	Receipt						
	Mailing Address 8100 Wescott Drive Suite 101			09	M M / D D / Y Y Y Y						
	City	State	Zip Code	Trans	Transaction ID : 11112834						
	Flemington	NJ	08822	Amount	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			84.00						
	Name of Employer (for Individual) MidJersey Orthopaedics		upation (for Individual) nopaedic Surgeon	Me	emo Item						
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼		756.00	1							
C.	Full Name of Individual (Last, First, Middle Initi Davis, Daniel, Edward, , MD,FAAC		rganization Name	Date of	Receipt						
	Mailing Address 410 Thayer Road			09	/ D D		2021	Y			
	City Swarthmore	State PA	Zip Code 19081		action ID : of Each R						
	FEC ID number of contributing federal political committee.	С					250.0	00			
	Name of Employer (for Individual) Thomas Jefferson Univ Hosp		upation (for Individual) opaedic Surgeon	M	emo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]							
s	UBTOTAL of Receipts This Page (optional)				9	. ,	584.0	00			
т	OTAL This Period (last page this line number of	only)				-					

FOR LINE NUMBER: PAGE 201 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	opaedic SurgeonsPAC of AAOS							
Α.	Full Name of Individual (Last, First, Middle Initia Rubinstein, Michael, P, , MD,FAAOS Mailing Address 27015 Glaramara Lane	al) or Full Or	rganization Name	Date of Receipt					
	City Yorba Linda	State CA	Zip Code 92887	Transaction ID : 11112837 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	Name of Employer (for Individual) Specialty Orthopedic Group Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item					
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]					
в.	Full Name of Individual (Last, First, Middle Initia Cimino, William, Gerard, , MD,FAAO		rganization Name	Date of Receipt					
	Mailing Address 52 Beach Road Suite 207	State	Zip Code	09 13 2021 Transaction ID : 11112838 Amount of Each Receipt this Period					
	Fairfield	CT	06824						
	FEC ID number of contributing federal political committee.	С		84.00					
	Name of Employer (for Individual) Beach Road Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 756.00]					
с.	Full Name of Individual (Last, First, Middle Initia Parsley, Brian, S, , MD,FAAOS,F	al) or Full Or	rganization Name	Date of Receipt					
	Mailing Address 302 Pine Shadows Dr Suite 2400	04-4-	75.0.1	09 / D D / Y Y Y Y 2021					
	City Houston	State TX	Zip Code 77056	Transaction ID : 11112839 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		84.00					
	Name of Employer (for Individual) UT Health Physicians Receipt For:	Ortho	upation (for Individual) opaedic Surgeon	Memo Item					
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 756.00						
s	UBTOTAL of Receipts This Page (optional)		•	418.00					
т	OTAL This Period (last page this line number o	nly)	••••••						

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		f	for each category of the Detailed Summary Page	l `_	neck on 11a 13		e) 11b 14	11c	12 16 17		
	y information copied from such Reports and St for commercial purposes, other than using the					for the	purp	ose of s	olicitin	g contributions		
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an	Association of Ortho	pa	edic S	Surg	jeons	PA	C of AAOS		
Α.	Full Name of Individual (Last, First, Middle Initi Damalas, Dino, , , MBA Mailing Address 9400 W Higgins Rd	al) or Full O	I Organization Name				Date of Receipt					
	City Rosemont	State IL		Zip Code 60018-4975				on ID : 1 Each Re		io his Period		
	FEC ID number of contributing federal political committee.	С				[.		7	-	84.00		
	Name of Employer (for Individual) AAOS		•	tion (for Individual) perating Officer		N	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	rr-to-Date ▼ 756.00								
в.	Full Name of Individual (Last, First, Middle Initi Roberson, Rowland, M, , MD, FAAO	,	rgar	nization Name		Date o	f Red	ceipt				
	Mailing Address 641 N Lamar Blvd City	State Zip Code			_	M M / D D / Y						
	Oxford	MS 38655-3235			_					nis Period		
	FEC ID number of contributing federal political committee.	С	С					9		84.00		
	Name of Employer (for Individual) Specialty Orthopedic Group		Occupation (for Individual) Orthopaedic Surgeon				emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	ggregate Year-to-Date ▼ 756.00									
С.	Full Name of Individual (Last, First, Middle Initi Lisella, Jordan, Mills, , MD, FAAOS)rgar	nization Name		Date o	f Red	ceipt				
	Mailing Address 14 Turner Lane					09		D D D 14	ΙL	2021 Y		
	City Loudonville	State NY		Zip Code 12211				on ID : 1 Each Re		12 nis Period		
	FEC ID number of contributing federal political committee.	С						9	,	84.00		
	Name of Employer (for Individual) Capital Region Orthopaedic Group		•	tion (for Individual) edic Surgeon		N	lemo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	ate Year-to-Date ▼ 756.00									
\vdash	UBTOTAL of Receipts This Page (optional)			·		ļ.		y	,	252.00		
ΙĨ	OTAL This Period (last page this line number of	only)		•••••••				,		1 1 48 1		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 b mark 11 c mark 12 mark 13 mark 12 mark 15 mark 16 mark 17 mark 13 mark 12 mar
	Statements may not be sold or used by any per he name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Zanaros, George, , , MD,FAAOS Mailing Address 16 Shaker Bay Rd City Latham FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Initial) or Full Organization Name State Zip Code NY 12110 C Occupation (for Individual)	Date of Receipt 09 14 2021 Transaction ID : 11112843 Amount of Each Receipt this Period 84.00 Memo Item
Capital Region Orthopaedic Group Receipt For: Primary General Other (specify)	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 756.00	
Full Name of Individual (Last, First, Middle B. Moon, Daniel, K, , MD,MBA,MS, Mailing Address 5997 Beeler St City	Initial) or Full Organization Name	Date of Receipt
Denver FEC ID number of contributing federal political committee. Name of Employer (for Individual) University of Colorado School of Medic	CO 80238 C Occupation (for Individual) Orthopaedic Surgeon	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle	Aggregate Year-to-Date ▼ 750.00	
C. Lang, Gerald, J, , MD, FAAOS Mailing Address 1309 Redan Drive	,	Date of Receipt
City Verona	StateZip CodeWI53593	Transaction ID : 11113190 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) University of Wisconsin Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Memo Item
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number		584.00

Use separate schedule(s)

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12	Г	17	
	ny information copied from such Reports and St for commercial purposes, other than using the			rson for th		rpose of	f soliciting	g contri	butio	ns	
	NAME OF COMMITTEE (In Full)										
	Political Action Committee of the	e America	an Association of Ortho	paedic	Sur	rgeon	sPA	C of /	AA(SC	
Α.	Full Name of Individual (Last, First, Middle Initi Bergmann, Karl, Andrew, , MD, FAAOS	al) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address CHI Health CUMC Bergan Mer 7710 Mercy Road, Suite 2000	-		M 09		D 23		2021			
	City Omaha	State NE	Zip Code 68124				: 1111319 Receipt th		od		
	FEC ID number of contributing federal political committee.	С				ар. I		25	50.00		
	Name of Employer (for Individual) CHI Health		upation (for Individual) nopaedic Surgeon		Mem	o Item					
	Receipt For:	Aggregate	Year-to-Date ▼	-							
	Primary General Other (specify) ▼		750.00								
в.	Full Name of Individual (Last, First, Middle Initi Friedmann, Elizabeth, , , MD	al) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 2660B Greenbriar Lane				09 / 23 / 2021						
	City	State MD	Zip Code	Transaction ID : 11113192 Amount of Each Receipt this Per							
	Annapolis		21401	Amou	unt of	Each F	Receipt th	nis Peri	od	_	
	FEC ID number of contributing federal political committee.	С		ΙĻ	_	-		8	34.00		
	Name of Employer (for Individual) University of Maryland	Occ Orth		Mem	o Item						
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		756.00								
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Palma, Douglas, , , MD,FAAOS	al) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 271 White Horse Rd			09		23		2021			
	City Cochranville	State PA	Zip Code 19330-9472				: 1111319 Receipt th		od		
	FEC ID number of contributing federal political committee.	С				y .	. y	25	50.00		
	Name of Employer (for Individual) Delaware Orthopaedic Specialist		upation (for Individual) opaedic Surgeon		Mem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00								
5	UBTOTAL of Receipts This Page (optional)		•	C		,	9	58	84.00		

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	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
		person for the purpose of soliciting contributions
the Americar	n Association of Orth	opaedic SurgeonsPAC of AAOS
State MS C Occup Orthop	Zip Code 39110 ation (for Individual) paedic Surgeon	Date of Receipt
S State NJ C Occup Ortho	Zip Code 08057	Date of Receipt 09 21 2021 Transaction ID : 11113227 Amount of Each Receipt this Period 1000.00 Memo Item
D,FAAOS State CA C Occup Orthop	Zip Code 90274 ation (for Individual)	Date of Receipt 09 24 2021 Transaction ID : 11113280 Amount of Each Receipt this Period 84.00 Memo Item
	the name and add the American Initial) or Full Org State MS C Occup Orthop Aggregate Ye Aggregate Ye State NJ C Occup Orthop C Occup Orthop C Occup Orthop	for each category of the Detailed Summary Page d Statements may not be sold or used by any p the American Association of Orth Initial) or Full Organization Name State Zip Code MS 39110 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ Aggregate Year-to-Date 810.00 Initial) or Full Organization Name 810.00 Initial) or Full Organization Name 1000,00 Initial) or Full Organization Name 0ccupation (for Individual) Orthopaedic Surgeon 1000,00

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IT	EMIZED RECEIPTS		1	Use separate schedule(s) for each category of the Detailed Summary Page	l `_	eck onl 11a 13	- ·	e) 11b 14	11c 15	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) Political Action Committee of the	Amerio	can	Association of Ortho	pae	edic S	Surg	eons	sPA	C of	AAOS
Full Name of Individual (Last, First, Middle Initial) or Final Dhillon, Manjit, S, , MD,FAAOS Mailing Address 12602 Nightingale Drive								Date of Receipt 09 24 2021			
	City Chester	State VA		Zip Code 23836					1111328 eceipt tl		iod
	FEC ID number of contributing federal political committee.	С									50.00
	Name of Employer (for Individual)		•	tion (for Individual)		М	emo	Item			
	Southside Regional Medical Center	Or	rthopa	aedic Surgeon							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 750.00							
B	Full Name of Individual (Last, First, Middle Initia Beltran, Michael, John, , MD,FAAOS	al) or Full	Orga	nization Name		Date o	f Bec	eint			
	Mailing Address UC Dept of Orthopaedic Surger 231 Albert Sabin Way Room 55	1		09	/	26	/ Y	2022	Y Y		
	City	State OH				Transaction ID : 11114912 Amount of Each Receipt this Period					
	Cincinnati					Amoun	t of E	ach Re	eceipt tl	nis Per	iod
	FEC ID number of contributing federal political committee.	С				Ľ		<u> </u>			84.00
	Name of Employer (for Individual) Department of Orthopaedics and Rehabil		Occupation (for Individual) Orthopaedic Surgeon			M	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 756.00							
<u> </u>	Full Name of Individual (Last, First, Middle Initia Mitros, Stephen, F, , MD, FAAOS	al) or Full	Orga	nization Name		Date o	f Rec	eipt			
	Mailing Address 51045 Erin Glen Dr					м 09	/	D D 26	/ Y	202 [,]	
	City	State IN		Zip Code					111149		
	Granger			46530	_	Amoun	t of E	Each Re	eceipt tl	nis Per	iod
FEC ID number of contributing federal political committee.						Ľ.					84.00
Name of Employer (for Individual) Mitros Orthopaedics			•	tion (for Individual) edic Surgeon		M	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 756.00							
s	UBTOTAL of Receipts This Page (optional)			•			,		. ,	4	18.00
Т	OTAL This Period (last page this line number of	nly)		•	-				-		-

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Laughlin, Richard, T, , MD,FAAOS Mailing Address 9353 Fox Creek Lane City Mason FEC ID number of contributing federal political committee. Name of Employer (for Individual) Wright State Physicians Receipt For: Primary General Other (specify) ▼	State OH C Occo Orth	Zip Code 45040 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt 09 26 2021 Transaction ID : 11114923 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle B. Eckrich, Stephen, G J, , MD,FAAC Mailing Address 5511 Shooting Star Trail City Rapid City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	OS State SD C Occ Ort	Zip Code 57702 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 756.00	Date of Receipt
Full Name of Individual (Last, First, Middle Schmitz, Matthew, R, , MD,FAA Mailing Address 111 Ottawa Run City San Antonio FEC ID number of contributing federal political committee. Name of Employer (for Individual) San Antonio Military Medical Center Receipt For: Primary General Other (specify)	State TX C Occu	Zip Code 78231 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 850.00	Date of Receipt 09 27 2021 Transaction ID : 11114930 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional).			834.00

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IT	EMIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page	l `_	heck only one) 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	tements ma name and a	ay n Iddre	ot be sold or used by any pe ess of any political committee	ersor to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an	Association of Orthc	ppa	edic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full A. Nagamani, Kevin, K, , MD,FAAOS Mailing Address 11902 E Lake Cr				nization Name		Date of Receipt
	City Greenwood Village	State CO		Zip Code 80111		09 27 2021 Transaction ID : 11114932 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С				84.00
	Name of Employer (for Individual) Western Orthopaedics Receipt For:	Orth	nopa	ion (for Individual) edic Surgeon r-to-Date ▼		Memo Item
	Primary General Other (specify) ▼		- J -	588.00		
в.	Full Name of Individual (Last, First, Middle Initia Newbern, D, Gordon, , MD, FAAOS	l) or Full O	rgar	nization Name		Date of Receipt
	Mailing Address 4412 S Lookout St					09 / 27 / Y Y Y Y 2021
	City Little Rock	State AR		Zip Code 72205	┢	Transaction ID : 11114933 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		С			84.00
	Name of Employer (for Individual) Arkansas Specialty Orthopedics	Occupation (for Individual) Orthopaedic Surgeon				Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 252.00		
С.	Full Name of Individual (Last, First, Middle Initia Dodds, Julie, A, , MD,FAAOS	ll) or Full O	rgar	nization Name		Date of Receipt
	Mailing Address 2603 90th Ave					09 / 27 / Y Y Y Y 2021
	City Lone Rock	State IA		Zip Code 50559	\vdash	Transaction ID : 11115404 Amount of Each Receipt this Period
Michigan State University						200.00
			Iopa	ion (for Individual) edic Surgeon		Memo Item
	Receipt For: Primary General Other (specify)	Yea	r-to-Date ▼ 1056.00			
s	UBTOTAL of Receipts This Page (optional)			•		368.00
т	OTAL This Period (last page this line number or	nly)		••••••		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
	nd Statements may not be sold or used by any p g the name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee o	f the American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Midd A. Jordan, Christopher, , , MD,FAAOS Mailing Address 12500 NE 10th City Choctaw FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	e Initial) or Full Organization Name State Zip Code OK 73020 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00 500.00	Date of Receipt
Full Name of Individual (Last, First, Midd B. Pushkarewicz, Michael, J, , MD, Mailing Address 1510 Braken Ave City Wilmington FEC ID number of contributing federal political committee. Name of Employer (for Individual) First State Orthopaedics Receipt For: Primary General Other (specify) ▼	, 0	Date of Receipt 09 28 2021 Transaction ID : 11116066 Amount of Each Receipt this Period 42.00 Memo Item
Full Name of Individual (Last, First, Midd C. Gary, Joshua, Layne, , MD,FA Mailing Address 951 Descanso Drive City La Canada Flintridge FEC ID number of contributing federal political committee. Name of Employer (for Individual) Keck School of Medicine of USC Receipt For: Primary General Other (specify)		Date of Receipt 09 28 2021 Transaction ID : 11116067 Amount of Each Receipt this Period 84.00 Memo Item
	ا ۱)۱) nber only)	626.00

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 210 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using th		
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Scales, Darrell, Kevin, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5425 Golf View Dr	State Zip Code	09 / 28 / 2021 Transaction ID : 11116068
Braselton	GA 30517	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Northeast Georgia Physicians Group	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle Ir 3. Carolan, Gregory, Francis, , MD,FA		Date of Receipt
Mailing Address 1806 Meadow Ridge Ct		09 28 2021
City Bethlehem	State Zip Code PA 18015	Transaction ID : 11116069 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) St Luke's Ortho Surg Group	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00	
Full Name of Individual (Last, First, Middle Ir Pinto, Mark, C, , MD,FAAOS	hitial) or Full Organization Name	Date of Receipt
Mailing Address 7644 Base Lake Drive		09 / D D / Y Y Y Y Y 2021
City Dexter	State Zip Code MI 48130	Transaction ID : 11116070 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) IHA Orthopaedic Surgery - Chelsea	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	▶	434.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 211 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and a or for commercial purposes, other than using th		
/		paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Torres, Daniel, , , MD, FAAOS	nitial) or Full Organization Name	Date of Receipt
Mailing Address 1488 Shelburne Ct City	State Zip Code	09 28 2021 Transaction ID : 11116071
Allentown	PA 18104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer (for Individual) Lehigh Valley Practioner Group	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	
Full Name of Individual (Last, First, Middle Ir B. Razi, Afshin, , , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 2 Dogwood Road		09 28 2021
City Great Neck	State Zip Code NY 11024	Transaction ID : 11116072
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) Maimonides Medical Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name of Individual (Last, First, Middle Ir C. Chandler, David, R, , MD,FAAOS		Date of Receipt
Mailing Address 165 Middle Plantation Ln		09 / D D / Y Y Y Y 09 28 2021
City Gulf Breeze	StateZip CodeFL32561	Transaction ID : 11116073 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Andrews Institute For Orthopaedics & S	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 756.00	
SUBTOTAL of Receipts This Page (optional)	·····	419.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 212 OF 55
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and s or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Allard, Mark, Michael, , MD,FAAOS	iitial) or Full O	rganization Name	Date of Receipt
Mailing Address 3010 Cortney Circle			09 28 2021
City Siloam Springs	State AR	Zip Code 72761	Transaction ID : 11116074 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
Self Employed Receipt For:	Orth	opaedic Surgeon	
Primary General	Aggregate	Year-to-Date V	
Other (specify)		756.00]
Full Name of Individual (Last, First, Middle In 3. Hoedt, Christen, , , MD	iitial) or Full O	rganization Name	Date of Receipt
Mailing Address 973 Vinings Blvd			09 28 2021
City	State	Zip Code	
Gallatin	TN	37066	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Cooper Orthopaedics Surgery		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		756.00]
Full Name of Individual (Last, First, Middle In Reid, J, Spence, , MD, FAAOS	iitial) or Full O	rganization Name	Date of Receipt
Mailing Address 500 University Drive Department of Orthopaedics			09 28 2021
City	State	Zip Code	Transaction ID : 11116077
Hershey	PA	17036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Penn State		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 756.00]
SUBTOTAL of Receipts This Page (optional)			252.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Giuseffi, Steven, A, , MD,FAAOS Mailing Address 4784 Enchanted Pines Dr City Rapid City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Black Hills Orthopedic and Spine Cente Receipt For: Primary General	State SD C Occu Orth	Zip Code 57701 upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle In B. Kauk, Justin, R, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 110 Kildaire Park Drive Ste 106 City Cary FEC ID number of contributing federal political committee. Name of Employer (for Individual) Structure Orthopaedics Receipt For: Primary General Other (specify) ▼	Aggregate	Zip Code 27518 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 375.00	09 28 2021 Transaction ID : 11116079 Amount of Each Receipt this Period 125.00 125.00 Memo Item
Full Name of Individual (Last, First, Middle Ir Buchowski, Jacob, M, , MD,MS,F Mailing Address 27 Rio Vista Dr <u>City</u>		Zip Code	Date of Receipt
Saint Louis FEC ID number of contributing federal political committee.	С	63124	Amount of Each Receipt this Period 650.00 Memo Item
Washington University Receipt For: Primary General Other (specify)		opaedic Surgeon Year-to-Date ▼ 1000.00	1
SUBTOTAL of Receipts This Page (optional)			859.00

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Chafey, David, Holmes, , III, MD,FA	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 11125 Double Eagle NE			M / D / Y
City Albuquerque	State NM	Zip Code 87111	Transaction ID : 11116149 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) University of New Mexico		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle I B. Grace, Thomas, G, , MD,FAAOS Mailing Address 7512 American Heritage NE	nitial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	09 28 2021 Transaction ID : 11117347
Albuquerque	NM	87109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle I C. Stanfield, Denver, T, , MD,FAAC		rganization Name	Date of Receipt
Mailing Address 4658 Rustic Way			09 28 2021
City Cincinnati	State OH	Zip Code 45245	Transaction ID : 11117354 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Self Employed		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)			750.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

Lise senarate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and ac	y not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Jacobs-El, Jamil, , , MD,FAAOS Mailing Address PO Box 5110 City River Forest FEC ID number of contributing federal political committee. Name of Employer (for Individual) Advocate Aurora Health Receipt For: Primary General Other (specify) ▼	State IL C Occu Orth	rganization Name Zip Code 60305 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1100.00	Date of Receipt
B. Full Name of Individual (Last, First, Middle Mailing Address 1508 Windsor Rd	Initial) or Full Or	rganization Name	Date of Receipt
City <u>Austin</u> FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: □ Primary □ General ○ Other (specify) ▼	Orth	Zip Code 78703 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Transaction ID : 11117376 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle C. Cassidy, Carter, , , MD, FAAOS Mailing Address 4890 Faulkirk Lane City Lexington FEC ID number of contributing federal political committee. Name of Employer (for Individual) University of Kentucky Res Program Receipt For: Primary General Other (specify)	State KY C Occu Ortho	rganization Name Zip Code 40515 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 850.00	Date of Receipt 10 01 2021 Transaction ID : 11117966 Amount of Each Receipt this Period 85.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			2185.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBE	R: PAGE 216 OF 551		
IT	EMIZED RECEIPTS		for each category of the	(check only one)			
			Detailed Summary Page	11a 11b	11c 12 15 16 17		
Ar	ny information copied from such Reports and Sta	tements ma	ay not be sold or used by any p	-			
	for commercial purposes, other than using the r						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	A					
$ \rangle$	Political Action Committee of the	America	an Association of Orthe	paedic Surgeo	onsPAC of AAOS		
<u> </u>	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name				
Α.	Wynder, Steven, G, , MD, FAAOS		• · ·	Date of Receipt			
	Mailing Address 5290 W 612 N						
	City	State	Zip Code		2021		
	Huntington	IN	46750	Transaction II	D : 11118552		
	FEC ID number of contributing						
	federal political committee.	С			84.00		
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item	1		
	Parkview Ortho Hospital		opaedic Surgeon				
	Receipt For:		Year-to-Date ▼	-			
	Primary General			1			
	Other (specify) v		420.00				
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name				
в.	Casey, Brett, Edward, , MD,FAAOS			Date of Receipt			
	Mailing Address 6064 Louis XIV St		D / Y Y Y Y				
		10	2021				
	City New Orleans	State LA	Zip Code 70124-2919	Transaction II			
	FEC ID number of contributing	1			Receipt this Period		
	federal political committee.	С			250.00		
		0.00	unation (for Individual)	Memo Item	1		
	Name of Employer (for Individual) Gulf Coast Orthopedics		upation (for Individual) nopaedic Surgeon		1		
	Receipt For:		Year-to-Date ▼	-			
	Primary General	, iggi oguto		1			
	Other (specify) v	L	1000.00				
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name				
C.	Rana, Adam, J, , MD, FAAOS	., 0. 1 un O		Date of Receipt			
	Mailing Address 12 Landing Woods Ln						
	City	Stata	Zin Codo		02 2021		
	City Falmouth	State ME	Zip Code 04105-1948	Transaction II	D : 11118554		
	FEC ID number of contributing						
	federal political committee.	С			100.00		
	Name of Employer (for Individual)	000	upation (for Individual)	Memo Iten	n		
	Maine Medical Center		opaedic Surgeon				
	Receipt For:	1	Year-to-Date ▼	-			
	Primary General			1			
	Other (specify)	<u> </u>	1100.00				
s	UBTOTAL of Receipts This Page (optional)				434.00		
H			,	,			

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

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 217 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using t			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Smith, Eric, Louis, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1573 Beacon Street			M M / D D / Y
City Waban	State MA	Zip Code 02468	Transaction ID : 11118555 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item
Boston Medical Clinic Receipt For:		opaedic Surgeon Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	840.00]
Full Name of Individual (Last, First, Middle 3. Rajacich, Nicholas, , , MD,FAAOS		rganization Name	Date of Receipt
Mailing Address 619 North I Street	,		M = M / D = D / Y = Y = Y
City	State	Zip Code	10 02 2021 Transaction ID : 11118557
Tacoma	WA	98403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Mary Bridge Children's Hospital		upation (for Individual) Iopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	_
Other (specify) ▼		, 1000.00	
Full Name of Individual (Last, First, Middle C. Anderson, Robert, O, , MD, FAA		rganization Name	Date of Receipt
Mailing Address 9800 55th St N			10 03 2021
City Lake Elmo	State MN	Zip Code 55042	Transaction ID : 11118633
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period
		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional).			1334.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 218 OF 551
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Sta	atements ma	av not be sold or used by any i	
	for commercial purposes, other than using the			
\square	NAME OF COMMITTEE (In Full)			
$ \rangle$	Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
V	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Proanization Name	
Α.	Marsh, J, Lawrence, , MD, FAAOS			Date of Receipt
	Mailing Address 200 Hawkins Drive			M = M / D = D / Y = Y = Y = Y
	01002JPP City	State	Zip Code	10 03 2021
	lowa City	IA	52242-1088	Transaction ID : 11118636 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		1000.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	University of Iowa		nopaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General	33 34.0		
	Other (specify) v		1000.00	
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Irganization Name	
В.			nganization Name	Date of Receipt
	Mailing Address 627 Arrowhead Ct			M M / D D / Y Y Y Y
	014	10 04 2021		
	City Dakota Dunes	State SD	Zip Code 57049	Transaction ID : 11118639
	FEC ID number of contributing		37043	Amount of Each Receipt this Period
	federal political committee.	С		84.00
	Name of Employer (for Individual)	0.000	unation (for Individual)	Memo Item
	Name of Employer (for Individual) CNOS		upation (for Individual) hopaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) v		840.00	
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Proanization Name	
C.	Black, David, Albritton, , MD,PhD			Date of Receipt
	Mailing Address 12112 Fairway Drive			
	City	State	Zip Code	10 04 2021 Transaction ID : 11118640
	Little Rock	AR	72212	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		84.00
Name of Employer (for Individual)		Occi	upation (for Individual)	Memo Item
	Univ of Arkansas		nopaedic Surgeon	-
	Receipt For:	1	Year-to-Date ▼	
	Primary General		840.00	
	Other (specify)			1
s	UBTOTAL of Receipts This Page (optional)			1168.00
\vdash	,			-

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

Use separate schedule(s)

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551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pendoress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	_		
				paedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Prohaska, Matthew, G, , MD,FAAOS	ial) or Full O	organization Name	Date of Receipt
	Mailing Address 69 Griggs Hill Road			10 04 Y Y Y Y 2021
	City	State VT	Zip Code 05828	Transaction ID : 11118641
	Danville	VI	05626	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		84.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	NVRH Orthopaedic Clinic	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		504.00	
	Other (specify) v		504.00	
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	organization Name	
В.	Culp, Brian, Matthew, , MD, FAAOS			Date of Receipt
	Mailing Address 1805 Barclay Blvd	State	Zip Code	09 / 20 / Y Y Y Y 2021
	Princeton	NJ	08540-5891	Transaction ID : 11119345
			00540-5691	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer (for Individual) Princeton Orthopaedic Associates		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General			
	Other (specify) v	L	, 750.00	
C.	Full Name of Individual (Last, First, Middle Init Bercik, Michael, J, , Jr, MD,FAA	ial) or Full O	organization Name	Date of Receipt
	Mailing Address 1410 Center Road			09 / D / Y Y Y Y 20 / 2021
	City	State	Zip Code	Transaction ID : 11119346
	Lancaster	PA	17603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Thomas Jefferson University		opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		450.00	
	Other (specify)		450.00	
s	UBTOTAL of Receipts This Page (optional)		•	384.00
т	OTAL This Period (last page this line number of	only)	••••••	

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Snyder, Matthew, J, , MD, FAAOS	Initial) or Full C	Drganization Name	Date of Receipt
Mailing Address 14912 Chopine Pass			09 21 2021
City Roanoke	State IN	Zip Code 46783-9308	Transaction ID : 11119347 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) The Orthopedic Hospital of Lutheran He		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]
Full Name of Individual (Last, First, Middle B. Gill, John, T, , MD,FAAOS	Initial) or Full C	Drganization Name	Date of Receipt
Mailing Address 8230 Walnut Hill Ln Ste 708			09 / D D / Y Y Y Y 2021
City Dallas	State TX	Zip Code 75231	Transaction ID : 11119348 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) Self Employed		cupation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 750.00]
Full Name of Individual (Last, First, Middle C. Jiranek, William, A, , MD,FAAO		Drganization Name	Date of Receipt
Mailing Address 4709 Creekstone Drive			09 / 22 / Y Y Y Y 2021
City Durham	State VA	Zip Code 27703	Transaction ID : 11119349 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Duke University		cupation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 756.00]
SUBTOTAL of Receipts This Page (optional)			584.00

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

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 221 OF 55'
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	13 14 15 16 17
			person for the purpose of soliciting contributions
· · ·		address of any political committe	ee to solicit contributions from such committee.
		and Anna sinting of Orth	And the Company DAC of AACC
Political Action C	ommittee of the Ameri	can Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual	Last, First, Middle Initial) or Full	Organization Name	
A. Glusenkamp, Nathar	, , ,		Date of Receipt
Mailing Address 9400 W	Higgins Rd		
City	State	Zip Code	09 22 2021 Transaction ID : 11119350
Rosemont	IL	60018	Amount of Each Receipt this Period
FEC ID number of contr	buting		
federal political committe	ů.		50.00
Name of Employer (for I	ndividual)	ccupation (for Individual)	Memo Item
AAOS	,	hief Quality and Registries Officer	
Receipt For:		te Year-to-Date ▼	
	General		
Other (specify)		450.00	
Full Name of Individual	Last, First, Middle Initial) or Full	Organization Name	
B. Mejia, Alfonso, , , N		e ganzaten Hane	Date of Receipt
Mailing Address 5332 So	outh Shore Drive		
City	State	09 24 2021	
City Chicago		Zip Code 60615	Transaction ID : 11119351 Amount of Each Receipt this Period
FEC ID number of contr	buting		
federal political committe	ů.		84.00
Name of Employer (for		ccupation (for Individual)	Memo Item
Illinois Association of Orth	an adia Óun	Orthopaedic Surgeon	
Receipt For:	Aggrega	te Year-to-Date ▼	
	General		
Other (specify) ▼		, 1512.00	_
Full Name of Individual	Last, First, Middle Initial) or Full	Organization Name	
c. Schmidt, Kenneth	, , , MD		Date of Receipt
Mailing Address 10811	V 52nd Street		09 24 2021
City	State	Zip Code	Transaction ID : 11119352
Scottsdale	AZ	85254	Amount of Each Receipt this Period
FEC ID number of contr	buting		50.00
federal political committe	e.		
Name of Employer (for I	ndividual) O	ccupation (for Individual)	Memo Item
OrthoArizona	0	rthopaedic Surgeon	
Receipt For:		te Year-to-Date ▼	
Other (specify)	General	450.00	
		- Age Age Age	-
SUBTOTAL of Receipts T	nis Page (optional)		▶ 184.00

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

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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 222 OF

551

X 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Panchbhavi, Vinod, Kumar, , MD, FAAOS, F Date of Receipt Α. Mailing Address 1165 Rymers Switch Lane 1 2021 09 27 City Zip Code State Transaction ID: 11119355 TΧ 77546 Friendswood Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Univ of Texas Medical Branch Receipt For: Aggregate Year-to-Date ▼ Primary General 284.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Teuscher, David, Dean, , MD, FAAOS Date of Receipt Mailing Address 6330 Cobblestone Lane 09 2021 27 City State Zip Code Transaction ID : 11119357 ТΧ Arlington 76001 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Prather, John, T., MD, FAAOS Date of Receipt Mailing Address 4425 Paulsen Street М M 09 28 2021 City State Zip Code Transaction ID: 11119358 GA Savannah 31405 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Chatham Orthopaedic Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 584.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER:

PAGE 223 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	Americ	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or A. Iorio, Richard, , , MD,FAAOS Mailing Address 31 Prince St			organization Name	Date of Receipt
				09 28 2021
	City	State	Zip Code	Transaction ID : 11119361
	Beverly	MA	01915	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Brigham and Women's Hospital	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		756.00	1
	Other (specify) ▼	L	750.00	
в.	Full Name of Individual (Last, First, Middle Initia Moon, Daniel, K, , MD, MBA, MS,	al) or Full C	organization Name	Date of Receipt
	Mailing Address 5997 Beeler St			09 28 2021
	City	State	Zip Code	Transaction ID : 11119362
	Denver	CO 80238		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer (for Individual) University of Colorado School of Medic		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 875.00	
С.	Full Name of Individual (Last, First, Middle Initi Mott, Michael, P, , MD,FAAOS	al) or Full C	organization Name	Date of Receipt
	Mailing Address 11193 Maple Ridge Drive			M M / D D / Y
	City	State	Zip Code	Transaction ID : 11119363
	Plymouth	MI	48170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		600.00
	Name of Employer (for Individual)	or Individual) Occupation (for Individual)		Memo Item
	Henry Ford Hospital, K-12	Orth	opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)	1000.00]
\vdash	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			809.00

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini A. Brooks, Fleming, Griffin, , MD,FAAOS Mailing Address 10 Indigo PI	tial) or Full O	rganization Name	Date of Receipt
City Enterprise	State AL	Zip Code 36330	Transaction ID : 11119386 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00
Name of Employer (for Individual) Southern Bone and Joint Specialists Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1125.00	Memo Item
Full Name of Individual (Last, First, Middle Ini B. Farrow, Lutul, Dashaun, , MD,FAAC Mailing Address 4471 Bridle Trail		rganization Name	Date of Receipt
City Bath FEC ID number of contributing federal political committee.	State OH	Zip Code 44333	Transaction ID : 11119387 Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Cleveland Clinic Orthopaedic and Rheum Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Memo Item
Full Name of Individual (Last, First, Middle Init C. Mahoney, Andrew, Patrick, , MD, Mailing Address 1471 N Pairiot Dr		rganization Name	Date of Receipt
City Greensburg	State IN	Zip Code 47240-6683	09 28 2021 Transaction ID : 11119388 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Tucson Orthopedic Institute Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			1625.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 225 OF

551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Political Action Committee of the	ne name and ad	ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle I A. Horan, Michael, Patrick, , MD,MS,FAA Mailing Address 913 Woodland Dr City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Palmetto Health Pediatric Orthopaedics Receipt For: Primary General Other (specify) ▼	O State SC C Occu Orth	rganization Name Zip Code 29205-2069 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 09 / 28 / 2021 Transaction ID : 11119389 Amount of Each Receipt this Period 900.00 Memo Item
Full Name of Individual (Last, First, Middle I B. Schlegel, Theodore, F, , MD,FAAC Mailing Address 2657 S Fillmore St City Denver FEC ID number of contributing federal political committee. Name of Employer (for Individual) Steadman Hawkins Clinic-Denver Receipt For: Primary General Other (specify) ▼	State CO C Occu Orth	rganization Name Zip Code 80210 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 09 28 2021 Transaction ID : 11119394 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle I C. Samora, Julie, B, , MD,PhD,MPH Mailing Address 5000 Slate Run Woods Cou City Upper Arlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Nationwide Children's Hospital Receipt For: Primary General Other (specify)	H rt State OH C Occu Ortho	Zip Code 43220 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1100.00	Date of Receipt 09 / 29 / 2021 Transaction ID : 11119399 Amount of Each Receipt this Period 100.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			2000.00

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

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FOR LINE NUMBER: PAGE 226 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	
	y information copied from such Reports and St for commercial purposes, other than using the			person for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Initial) or Full A. Rubery, Paul, T, , Jr, MD,FAA Mailing Address 149 Taylor Rd			ganization Name	Date of Receipt	
	City	State	Zip Code	09 29 2021 Transaction ID : 11119400	
	Honeoye Falls	NY	14472-9732	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		500.00	
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item	
	Rochester Med Ctr, Dept of Ortho	Orth	opaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date V		
	Primary General	1.1.1	1000.00		
	Other (specify) ▼		1000.00		
В.	Full Name of Individual (Last, First, Middle Initi Bush-Joseph, Charles, A, , MD,FAA		ganization Name	Date of Receipt	
	Mailing Address 419 N Lincoln			09 29 2021	
	City	State	Zip Code	Transaction ID : 11119401	
	Hinsdale	IL	60521-3444	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer (for Individual) Midwest Orthopaedics at Rush		ipation (for Individual) opaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date V		
	Other (specify) ▼		, 1000.00		
с.	Full Name of Individual (Last, First, Middle Initi Ryan, Andrew, Wilson, , MD, FAA		ganization Name	Date of Receipt	
	Mailing Address 216 Fountain Court Suite 250				
	City Lexington	State KY	Zip Code 40509	Transaction ID : 11119402 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С			
	Name of Employer (for Individual) Kentucky Bone & Joint Surgeons		pation (for Individual) opaedic Surgeon	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]	
	UBTOTAL of Receipts This Page (optional)			2000.00	
11	OTAL This Period (last page this line number of	n iiy)			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 227 OF 55
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and Sta	atements ma	ay not be sold or used by any pe	
	for commercial purposes, other than using the			
\backslash	NAME OF COMMITTEE (In Full)			
/	Political Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
/	Full Name of Individual (Last, First, Middle Initia	al) or Full O	organization Name	
Α.	Pula, David, A, , MD, FAAOS	,	3	Date of Receipt
	Mailing Address 16 Evergreen Trail			M = M / D = D / Y = Y = Y
	City	State	Zip Code	09 29 2021
	Orchard Park	NY	14127	Transaction ID : 11119403 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		750.00
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Excelsior Orthopaedics		nopaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General	. iggi ogalo		1
	Other (specify)		1000.00	1
			Numericanticus Nieur-	
B.	Full Name of Individual (Last, First, Middle Initia Raissi, Abdi, , , MD, FAAOS	ai) or fuii O	rganization Name	Date of Receipt
-	Mailing Address 9808 Winter Palace Drive			
				09 29 2021
	City	State	Zip Code	Transaction ID : 11119404
	Las Vegas	NV	89145	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Desert Orthopaedic Center		upation (for Individual)	Memo Item
	Receipt For:		hopaedic Surgeon	_
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) V		1000.00	
~	Full Name of Individual (Last, First, Middle Initia Cobbe, Fraser, , ,	al) or Full O	Organization Name	Date of Receipt
С.	Mailing Address 319 S Glen Arven Avenue			
	Stanling / Resident Stars O Glein Alvein Avenue			09 29 2021
	City	State	Zip Code	Transaction ID : 11119409
	Temple Terrace	FL	33617	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
		ederal political committee.		
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Cobbe Consulting and Management Receipt For:	1	e Society Executive Director	_
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		500.00	
				1
Γ				
s	UBTOTAL of Receipts This Page (optional)		••••••	1500.00
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TOTAL This Period (last page this line number only)......

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IT	EMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
A. Urbanek, Paul, J, , MD,FAAOS Mailing Address PO Box 510 49 Laurel Lane			ganization Name	Date of Receipt
	City New Castle	State NH	Zip Code 03854	Transaction ID : 11119410 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Concord Orthopaedics, PA Receipt For:	Ortho	pation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
В.	Full Name of Individual (Last, First, Middle Initia Mayerson, Joel, L, , MD,FAAOS	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 2335 Pinebrook Rd		7:0.1	09 / 29 / 2021
	City Upper Arlington	State OH	Zip Code 43220-4327	Transaction ID : 11119411 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		900.00
	Name of Employer (for Individual) The Ohio State University		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00]
с.	Full Name of Individual (Last, First, Middle Initi Hakim-Zargar, Mariam, , , MD,FAA		ganization Name	Date of Receipt
	Mailing Address 18 Terrace Dr			09 / 29 / Y Y Y Y 2021
	City Avon	State CT	Zip Code 06001	Transaction ID : 11119412 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		990.00
			pation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 990.00	1
s	UBTOTAL of Receipts This Page (optional)			2390.00
т	OTAL This Period (last page this line number o	nly)		

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Kinnucan, Elspeth, R E, , MD,FAAOS Mailing Address 1917 Oak Crest Dr City Roseville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Kaiser Roseville Medical Center Receipt For: Primary General Other (specify)	CA CA Occu Orth	rganization Name Zip Code 95661-4060 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Waddell, Bradford, Sutton, , MD,F Mailing Address 3421 Marquette St	Date of Receipt		
City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carrell Cliic Receipt For: Primary General Other (specify)	Orth	Zip Code 75225 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 756.00	09 30 2021 Transaction ID : 11119415 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle C. Lopez, David, Vincent, , MD,FA Mailing Address 27 Courtney Ct City Freehold		Zip Code 07728	Date of Receipt 09 2021 Transaction ID : 11119416 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Sports Medicine Speciali Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 756.00	Memo Item
SUBTOTAL of Receipts This Page (optional).			1068.00

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	K 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the time of the second			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Lederman, Evan, Scott, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 755 E McDowell Rd Second Floor			M M / D D / Y Y Y Y Y 09 30 2021
City Phoenix	State AZ	Zip Code 85006	Transaction ID : 11119418 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) The Orthopedic Clinic Assn		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle I B. Lubahn, John, D, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address Dept of Medical Education 201 State St			09 / 29 / Y Y Y Y 2021
City Erie	State PA	Zip Code 16550	Transaction ID : 11119420 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Hand Microsurgery		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle I C. Ellis, Thomas, J, , MD, FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 5190 Harlem Road			10 04 2021
City New Albany	State OH	Zip Code 43054	Transaction ID : 11119427 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Orthopedic ONE		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]
SUBTOTAL of Receipts This Page (optional).			1250.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 231 OF 55
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 1'
Any information copied from such Reports and so for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Wright, Melissa, , , MD	iitial) or Full O	rganization Name	Date of Receipt
Mailing Address 3445 Chesternut Ave			10 / Y Y Y Y 10 04 2021
City Baltimore	State MD	Zip Code 21211	Transaction ID : 11119429
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
Washington University School of Medici	Orth	opaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle In 3. Lintecum, Neal, D, , MD, FAAOS	iitial) or Full O	rganization Name	Date of Receipt
Mailing Address 789 N 1500 Road			10 05 2021
City	State	Zip Code	Transaction ID : 11119430
Lawrence	KS	66049-9194	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General Other (specify) ▼		2000.00]
Full Name of Individual (Last, First, Middle In Letter S. Hunt, Kenneth, , , MD,FAAOS	itial) or Full O	rganization Name	Date of Receipt
Mailing Address 34 Viking Drive			10 05 2021
City Englewood	State CO	Zip Code	Transaction ID : 11119435
Englewood FEC ID number of contributing	CO 80113		Amount of Each Receipt this Period 500.00
federal political committee.			
Name of Employer (for Individual) University of Colorado	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)			950.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Hope, Charles, A, , II, MD,FAA Mailing Address 8 Bent Tree Circle City Savannah FEC ID number of contributing federal political committee. Name of Employer (for Individual) Optim Orthopedics Receipt For: Primary General Other (specify) ▼	State GA C Occ Orti	Zip Code 31411 Supation (for Individual) hopaedic Surgeon Year-to-Date ▼ 5000.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Keller, Julie, M, , MD, FAAOS Mailing Address 113 W Essex Street Suite 201 City Maywood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Restoration Orthopaedics Receipt For: Primary General Other (specify) ▼	State NJ C Occ Ort	Drganization Name Zip Code 07607 cupation (for Individual) hopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle C. Schmale, Gregory, A, , MD, FAA Mailing Address 6515 126th Ave NE City Kirkland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Seattle Children's Receipt For: Primary General Other (specify)	AOS State WA C Occ Ort	Zip Code 98033 supation (for Individual) nopaedic Surgeon Year-to-Date ▼	Date of Receipt 10 / 06 / 2021 Transaction ID : 11119587 Amount of Each Receipt this Period 84.00 Memo Item
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			5334.00

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any poundress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Burke, Charles, J, , III, MD, F	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 200 Delafield Rd Ste 4010	04-14-		10 / D D / Y Y Y Y 10 06 2021
	City Pittsburgh	State PA	Zip Code 15215-3235	Transaction ID : 1119588
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) UPMC		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00	
в.	Full Name of Individual (Last, First, Middle Init Gomez, Gregory, , , MD Mailing Address 6201 Moonfield Dr	ial) or Full C	rganization Name	Date of Receipt
	City	State	Zip Code	10 06 2021 Transaction ID : 11119589
	Huntington Beach	CA	92648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) Emanate Health		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Pushkin, Gary, W, , MD,FAAOS	ial) or Full C	rganization Name	Date of Receipt
	Mailing Address 2506 St Paul Street			10 / D D / Y Y Y Y 2021
	City Baltimore	State MD	Zip Code 21218	Transaction ID : 11119590 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Cohen & Pushkin MD PA		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	
⊢	UBTOTAL of Receipts This Page (optional)		r	384.00
Γ	OTAL This Period (last page this line number of	only)	•••••••	

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any a name and address of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini Green, Daniel, William, , MD,FAAOS Mailing Address 535 E 70th St City New York FEC ID number of contributing federal political committee. Name of Employer (for Individual) Hosp for Special Surgery Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code NY 10021 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1750.00	Date of Receipt
Full Name of Individual (Last, First, Middle Ini B. Mosley, Emmett, Wayne, , MD,FAA Mailing Address 220 Thompson PI		Date of Receipt
City Roswell FEC ID number of contributing federal political committee. Name of Employer (for Individual) ASPIRUS	State Zip Code GA 30075-3522	10 07 2021 Transaction ID : 11120007 Amount of Each Receipt this Period 84.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
C. Kiner, Dirk, W, , MD,FAAOS Mailing Address 449 Canyon Springs Dr	itial) or Full Organization Name	Date of Receipt
City Hixson FEC ID number of contributing federal political committee.	State Zip Code TN 37343-2387	Transaction ID : 11120008 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Southern Orthopaedic Trauma Surgeons Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		343.00

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	(check only 11a 13	y one) 11b 11c 14 15	12 16 17
	information copied from such Reports and Sta r commercial purposes, other than using the r					
	AME OF COMMITTEE (In Full) Political Action Committee of the	America	n Association of Ortho	paedic S	SurgeonsPA	AC of AAOS
K Full Name of Individual (Last, First, Middle Initial) or Full A. Gallant, Gregory, G, , MD,MBA,FAA Mailing Address 3588 Wellsford Lane			ganization Name	_	Date of Receipt	
	ity Doylestown	State PA	Zip Code 18902		action ID : 11120 of Each Receipt	009
	EC ID number of contributing deral political committee.	С				83.33
R	ame of Employer (for Individual) othman Institute		pation (for Individual) opaedic Surgeon	Me	emo Item	
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 666.64			
	ull Name of Individual (Last, First, Middle Initia Mejia, Alfonso, , , MD,MPH,FAA	l) or Full Org	ganization Name	Date of	Receipt	
_	ailing Address 5332 South Shore Drive			10 ^M	/ D D / 08	2021
	ity :hicago	State IL	Zip Code 60615		action ID : 11120	
	EC ID number of contributing deral political committee.	C			· · · · · ·	84.00
	ame of Employer (for Individual) inois Association of Orthopedic Sur		pation (for Individual) opaedic Surgeon	Me	emo Item	
R	eceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 1596.00			
	ull Name of Individual (Last, First, Middle Initia Brokaw, David, , , MD,FAAOS	l) or Full Or	ganization Name	Date of	Receipt	
_	ailing Address 8450 Northwest Blvd			10 ^M	/ D D / 08	2021
	ity ndianapolis	State IN	Zip Code 46278		action ID: 11122	
	EC ID number of contributing deral political committee.	С				1000.00
C	ame of Employer (for Individual)		pation (for Individual) paedic Surgeon	M	emo Item	
	eceipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 1000.00			
SU	BTOTAL of Receipts This Page (optional)		•		, , ,	1167.33
то	TAL This Period (last page this line number or	ıly)				

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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Vicar, Andrew, J, , MD, FAAOS Mailing Address 8934 Dandy Creek Dr City Indianapolis FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoIndy Receipt For: Primary General Other (specify) ▼	State IN C Occu Orth	rganization Name Zip Code 46234 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
В.	Full Name of Individual (Last, First, Middle Initi Weber, Timothy, G, , MD, FAAOS Mailing Address 5275 N Meridian St City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46208	Date of Receipt 10 Transaction ID : 11122334 Amount of Each Receipt this Period 500.00 Memo Item
	OrthoIndy Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initi	Aggregate	opaedic Surgeon Year-to-Date ▼ 500.00]
C.	Crichlow, Renn, J, , MD, FAAOS Mailing Address 12273 Bridgewater Rd	Date of Receipt		
	City Indianapolis FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoIndy Receipt For:	Ortho	Zip Code 46256 upation (for Individual) opaedic Surgeon Year-to-Date ▼	Transaction ID : 11122335 Amount of Each Receipt this Period 1050.00 Memo Item
	Primary General Other (specify) UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		1050.00	2050.00

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Concern only one) Image: The second one of the second one second one of the second one of the second one of the second one
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial A. Kofoed, John, Charles, , MD, FAAOS Mailing Address 2619 Seminole Ct City Fairfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Sutter Medical Group Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code CA 94534-7871 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 890.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initia B. Clain, Michael, R, , MD, FAAOS Mailing Address 9 Indian Head Road City Riverside FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Neurosurgery Specialists Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code CT 06878 Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle Initia C. Thomas, Anil, Oommen, , MD, FAA Mailing Address 221 Hillswick Ct City Atlanta FEC ID number of contributing federal political committee. Name of Employer (for Individual) Peachtree Orthopaedic Clinic Receipt For: Primary General Other (specify)		Date of Receipt 10 09 2021 Transaction ID : 11122368 Amount of Each Receipt this Period 500.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		673.00

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Check only one) Image: The second
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Kelly, James, D, , II, MD,FAA Mailing Address 3838 California Street Suite 715 City San Francisco FEC ID number of contributing federal political committee. Name of Employer (for Individual) California Pacific Orthopaedics Receipt For: Primary General	State CA Zip Code 94118 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 10 / 11 / 2021 Transaction ID : 11122398 Amount of Each Receipt this Period 250.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle I B. Nahigian, Kevin, K, , MD, FAAOS Mailing Address 85 Red Bay Rd	nitial) or Full Organization Name	Date of Receipt
City Elgin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carolina Shoulder & Knee Specialists Receipt For: Primary General Other (specify) ▼	State Zip Code SC 29045 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	Transaction ID : 11122399 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle I Glassman, Andrew, H, , MD,MS, Mailing Address 126 North Drexel Avenue		Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ohio State University Wexner Medical C Receipt For: Primary General Other (specify)	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 252.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	r only)	418.00

SCHEDULE A (FEC Form 3X)	Use separate s	schedule(s) FOR LINE NUMBER: PAGE 239 OF 551
ITEMIZED RECEIPTS	for each catego	lory of the
	Detailed Summ	nary Page 11a 11b 11c 12 13 14 15 16 17
		used by any person for the purpose of soliciting contributions
or for commercial purposes, other than using th		litical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Associatio	on of Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir	itial) or Full Organization Name	
A. Bernard, Johnathan, , , MD, MPH, F	nial) of 1 dif Organization Name	Date of Receipt
Mailing Address 21549 Glebe View Dr		10 / Y Y Y Y 12 2021
City	State Zip Code	Transaction ID : 11125608
Broadlands	VA 20148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	84.00
Name of Employer (for Individual)	Occupation (for Individ	dual) Memo Item
National Sports Medicine Institute	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		840.00
Full Name of Individual (Last, First, Middle Ir	itial) or Full Organization Name	
B. Marinello, Patrick, Gaetano, , MD,	FAAOS	Date of Receipt
Mailing Address 43 Bradhaven Rd		10 12 2021
City	State Zip Code	Transaction ID : 11125609
Slingerlands	NY 12159	Amount of Each Receipt this Period
FEC ID number of contributing	<u> </u>	
federal political committee.	C	84.00
Name of Employer (for Individual) The Bone and Joint Center	Occupation (for Individ Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) v	, , , , , , , , , , , , , , , , ,	940.00
Full Name of Individual (Last, First, Middle Ir	itial) or Full Organization Name	
C. Dodds, Julie, A, , MD, FAAOS Mailing Address 2603 90th Ave		Date of Receipt
Maining Address 2603 90th Ave		10 12 2021
City	State Zip Code	Transaction ID : 11125610
Lone Rock	IA 50559	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	84.00
Name of Employer (for Individual) Michigan State University	Occupation (for Individ Orthopaedic Surgeon	dual) Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)		1140.00
		250.00
SUBTOTAL of Receipts This Page (optional)		252.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 240 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and a or for commercial purposes, other than using the		
/		opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Braaton, Paul, J, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt
Mailing Address 1335 Coffee Rd Ste 100 City	State Zip Code	10 12 2021 Transaction ID : 11125611
Modesto	CA 95355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) OrthoMed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
Full Name of Individual (Last, First, Middle Ir B. Espinoza, Luis, M, , MD, FAAOS	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5 Savannah Ridge Lane		10 12 2021
City Metairie	State Zip Code LA 70001	Transaction ID : 11125612 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Orthopaedic Center for Sports Medicine	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
Full Name of Individual (Last, First, Middle Ir c. John, Thomas, K, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 522 Eastbrook Rd		10 / Y Y Y Y Y 10 12 / 2021
City Ridgewood	StateZip CodeNJ07450-2110	Transaction ID : 11125613 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Active Orthopedics and Sports Medicine	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 840.00]
SUBTOTAL of Receipts This Page (optional)	······	252.00
TOTAL This Period (last page this line number	r only)	

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Mansfield, David, J, , MD,FAAOS Mailing Address 5019 Montoya Rd City El Paso FEC ID number of contributing federal political committee. Name of Employer (for Individual) El Paso Orthopaedic Surgery Group Receipt For: Primary General	State TX C Occu Orth	rganization Name Zip Code 79922 Upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Date of Receipt Date of Receipt 10 2021 Transaction ID : 11125614 Amount of Each Receipt this Period 84.00 Memo Item
Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Ir	pitial) or Full O	840.00]
B. Krueger, Chad, A, , MD,FAAOS Mailing Address 705 Kyle Dr City Ambler FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify) ▼	State PA C Occu	Zip Code 19002 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 840.00	Date of Receipt 10 13 2021 Transaction ID : 11126368 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Ir C. James, Jeremy, R, , MD,FAAOS Mailing Address 7 Briar Hollow St City Covington FEC ID number of contributing federal political committee. Name of Employer (for Individual) DISC of Louisiana Receipt For: Primary General Other (specify)	State LA C Occu Orth	rganization Name Zip Code 70433-4511 Upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			268.00

Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate sche for each category of Detailed Summary	of the	(check only	11b	11c	12	
	y information copied from such Reports and St								
or	for commercial purposes, other than using the	name and a	address of any political	committee to	o solicit cont	ributions	from suc	h commi	tee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e Americ	an Association	of Orthop	aedic Su	urgeon	sPA	C of A	AOS
Α.	Full Name of Individual (Last, First, Middle Initi Lenarz, Christopher, James, , MD,FAAO		Organization Name		Date of	Receipt			
	Mailing Address 17300 N Outer Forty Rd Suite 316				M M / D D / Y Y Y Y 10 13 2021				
	City Chesterfield	State MO	Zip Code 63005			ction ID : of Each F			1
	FEC ID number of contributing federal political committee.	С						1000	.00
	Name of Employer (for Individual) Excel Orthopedics		upation (for Individual) hopaedic Surgeon		Me	mo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 10	00.00					
В.	Full Name of Individual (Last, First, Middle Initi Reynolds, Kirk, Allen, , MD,FAAOS	al) or Full C	Organization Name		Date of	Receipt			
	Mailing Address 11901 Fairway Dr				10 ^M	/ D 13		2021	Y
	City	State	Zip Code			ction ID :			
	Little Rock	AR	72212	_	Amount	of Each F	Receipt th	nis Perioo	1
	FEC ID number of contributing federal political committee.	С				-9		100	.00
	Name of Employer (for Individual) Arkansas Specialty Orthopaedics		cupation (for Individual) hopaedic Surgeon		Me	mo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	00.00					
с.	Full Name of Individual (Last, First, Middle Initi Reynolds, Kirk, Allen, , MD,FAAOS		Organization Name		Date of	Receipt			
	Mailing Address 11901 Fairway Dr				10	/ 13		y y 2021	Ŷ
	City Little Rock	State AR	Zip Code 72212			of Each F		-	1
	FEC ID number of contributing federal political committee.	C				,	.,	700	.00
	Name of Employer (for Individual) Arkansas Specialty Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon			Me	mo Item			
	Receipt For: Primary General Other (specify)	imary General General							
	UBTOTAL of Receipts This Page (optional)				F	5		1800	.00
Т	OTAL This Period (last page this line number o	nly)		····· ►					

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl Courtney, Paul, Maxwell, , MD, FAA Mailing Address 902 S Front St	e Initial) or Full O OS	rganization Name	Date of Receipt
City Philadelphia	State PA	Zip Code 19147	10 14 2021 Transaction ID : 11137079 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Rothman Institute Receipt For:	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼	Memo Item
Primary General Other (specify) ▼	Aggregate	840.00]
Full Name of Individual (Last, First, Middl B. Port, J, Teig, , MD, FAAOS	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 456 Wyndemere City Heath FEC ID number of contributing	State TX	Zip Code 75032	Interview Inter
federal political committee. Name of Employer (for Individual) Self Employed	Occ	upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00]
Full Name of Individual (Last, First, Middl c. Service, Benjamin, , , MD,FAA		rganization Name	Date of Receipt
Mailing Address 8710 Crestgate Circle			10 / Y Y Y Y 10 15 2021
City Orlando	State FL	Zip Code 32819	Transaction ID : 11137683 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individual) Orlando Health Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 588.00	Memo Item
SUBTOTAL of Receipts This Page (optiona	l)		1668.00
TOTAL This Period (last page this line num	ber only)		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(Check only one) Image: Mark 11a 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and a or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Jamison, James, P, , MD,FAAOS Mailing Address 7092 Killdeer Drive City Canfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) Youngstown Orthopaedic Associates, Ltd Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code OH 44406 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00 1000.00	Date of Receipt 10 / 16 / 2021 Transaction ID : 11137961 Amount of Each Receipt this Period 250.00 Memo Item
B. Smith, Jeffrey, Mark, , MD,CPC,FA Mailing Address 5865 Friars Rd Unit 3310		Date of Receipt
San Diego FEC ID number of contributing federal political committee. Name of Employer (for Individual) UNITE Orthopaedics Foundation Receipt For: Primary General Other (specify) ▼	CA 92110 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period
C. Full Name of Individual (Last, First, Middle Ir Grimm, Matthew, R, , MD, FAAO Mailing Address 920 Avenue B		Date of Receipt 10 / 16 / 2021 Transaction ID : 11137963
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Jefferson Orthopaedic Clinic Receipt For: Primary General Other (specify)	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		584.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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X 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Battaglia, Michael, Jacob, , MD, FAAOS Date of Receipt Α. Mailing Address 1641 Windermere Dr E 1 10 16 2021 City Zip Code State Transaction ID: 11137964 WA Seattle 98112-3737 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Bellevue Bone & Joint Physicians Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McCulloch, Patrick, T, , MD, FAAOS Date of Receipt Mailing Address 307 Buckingham Drive 10 2021 17 City State Zip Code Transaction ID : 11138037 PA Venetia 15367 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Advanced Ortho & Rehab Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 840.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Goldberg, Steven, Scott, MD, FAAOS Date of Receipt Mailing Address 5867 Whisperwood Ct М M 10 17 2021 City State Zip Code Transaction ID: 11138038 FL Naples 34110 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Physicians Regional Medical Center - P Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 584.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the American Association of O	rthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Kwok, Moody, , , MD,FAAOS Mailing Address 708 Presidential Dr City Horsham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify) ▼	Initial) or Full Organization Name State Zip Code PA 19044 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Greene, Robert, Neil, , MD,FAAO Mailing Address 1211 N 16th Ave City Yakima FEC ID number of contributing federal political committee.		Date of Receipt 10 17 2021 Transaction ID : 11138040 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Orthopedics Northwest PLLC Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	Memo Item
Full Name of Individual (Last, First, Middle C. Olsen, Adam, S, , MD Mailing Address 3686 Washington Street Apt 2520 City Boston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify)	Initial) or Full Organization Name State Zip Code MA 02130 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 420.00 420.00	Date of Receipt Transaction ID : 11138042 Amount of Each Receipt this Period 42.00 Memo Item
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line numb		> 376.00

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 247 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	I Statements may not be sold or used by any p the name and address of any political committee	
		opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Baker, Champ, , , III, MD,FA	Initial) or Full Organization Name	Date of Receipt
Mailing Address 806 Overlook Dr City	State Zip Code	10 / 18 / 2021 Transaction ID : 11138047
Columbus	GA 31906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) Jack Hughston Memorial Hospital	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle Winston, Jonathan , , , MD	Initial) or Full Organization Name	Date of Receipt
Mailing Address 4534 Shadowbrook Court	10 / Y Y Y Y Y 2021	
City Bettendorf	State Zip Code IA 52722	Transaction ID : 11138048
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) ORA Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00]
Full Name of Individual (Last, First, Middle Carnduff, Mary, Foley, , MD,MB.		Date of Receipt
Mailing Address 1909 Rhode Island Ave	10 / Y Y Y Y 2021	
City McLean	StateZip CodeVA22101	Transaction ID : 11138049 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00]
SUBTOTAL of Receipts This Page (optional).	·····	1334.00
TOTAL This Period (last page this line number	er only)	

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: 11 to 12 minimum strain s
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Tyndall, William, A, , MD,FAAOS Mailing Address 123 Brittany Ln City Hollidaysburg FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State PA Zip Code 16648 C Occupation (for Individual)	Date of Receipt 10 19 2021 Transaction ID : 11138979 Amount of Each Receipt this Period 84.00 Memo Item
University Orthopedics Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	
Full Name of Individual (Last, First, Middle Initi B. Woodcock, Jessica, A, , MD,FAAOS Mailing Address 738 Newman Rd		Date of Receipt
City New Bern FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carolina Orthopedics and Sports Medici Receipt For: Primary General Other (specify) ▼	State Zip Code NC 28562 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	Transaction ID : 11138980 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Initi C. Cooper, Scott, Snow, , MD,FAAOS Mailing Address 405 NW A St 1101 Horsebarn Road City Bentonville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Mercy Clinic Orthopedics Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional)		252.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
	nd Statements may not be sold or used by any the name and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Shen, Wen, , , MD,FAAOS Mailing Address 33 Pond Hills Ct City Pleasant Valley FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Associates of Dutchess Coun Receipt For: Primary General Other (specify) ▼	e Initial) or Full Organization Name State Zip Code NY 12569 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 336.00 336.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Chapman, Cary, B, , MD,FAAOS Mailing Address 10903 Blue Palm Street City Plantation FEC ID number of contributing federal political committee. Name of Employer (for Individual) Miami Orthopedics & Sports Medicine In Receipt For: Primary General Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle C. Stoeckl, Andrew, , , MD, FAAC Mailing Address 90 Fairlawn Dr City Amherst FEC ID number of contributing federal political committee. Name of Employer (for Individual) Excelsior Orthopedics Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	l)ber only)	251.00

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one) ✓ 11a 11b 11c 12			
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$			
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full)						
				paedic SurgeonsPAC of AAOS			
Α.	Full Name of Individual (Last, First, Middle Initia Sherbondy, Paul, Strawn, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt			
	Mailing Address 507 Beaumont Dr	1-		10 / D D / Y Y Y Y 2021			
	City State College	State PA	Zip Code 16801-8311	Transaction ID : 11141656 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		84.00			
	Name of Employer (for Individual) Penn State Health		upation (for Individual) lopaedic Surgeon	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00				
В.	Full Name of Individual (Last, First, Middle Initia Kirol, Bernard, G, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt			
Mailing Address 338 Turnwall Ln				10 / Y Y Y Y 22 2021			
	City	State	Zip Code	Transaction ID : 11141658			
	Elgin	SC	29045-9507	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		75.00			
	Name of Employer (for Individual) Midlands Orthopaedics, PA		upation (for Individual) nopaedic Surgeon	Memo Item			
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼		750.00				
с.	Full Name of Individual (Last, First, Middle Initi- Veitch, Andrew, John, , MD,FAAO		rganization Name	Date of Receipt			
	Mailing Address 13416 Desert Zinnia Ct NE			10 / Y Y Y Y 2021			
	City Albuquerque	State NM	Zip Code 87111	Transaction ID : 11141659 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		84.00			
	Name of Employer (for Individual) University of New Mexico, Dept of Orth	Occupation (for Individual) Orthopaedic Surgeon		Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 840.00				
s	UBTOTAL of Receipts This Page (optional)		•	243.00			
т	OTAL This Period (last page this line number o	nly)	••••••				

FOR LINE NUMBER: PAGE 251 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using t			person for the purpose of soliciting contributions be to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Political Action Committee of t	he Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Hire, Justin, M, , MD, FAAOS	Initial) or Full C	Organization Name	Date of Receipt		
Mailing Address 3100 Crestwood Lane			M M / D D / Y Y Y Y 10 22 2021		
City Columbia	State MO	Zip Code 65203	Transaction ID : 11141660 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		42.00		
Name of Employer (for Individual) Dwight David Eisenhower Army Medical C		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00			
Full Name of Individual (Last, First, Middle B. Petrosini, Anthony, V, , MD, FAAC		Organization Name	Date of Receipt		
Mailing Address 310 Passaic Avenue			10 22 2021		
City Spring Lake	State NJ	Zip Code 07762	Transaction ID : 11141676 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С				
Name of Employer (for Individual) Orthopaedic Institue		upation (for Individual) hopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Middle C. Popham, George, Jeffrey, , MD,		Organization Name	Date of Receipt		
Mailing Address 3000 Meadow Farms Place	Mailing Address 3000 Meadow Farms Place				
City Louisville	State KY	Zip Code 40245	Transaction ID : 11141678 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) Ellis and Badenhausen Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]		
SUBTOTAL of Receipts This Page (optional).			1292.00		

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

FEC Schedule A (Form 3X) Rev. 06/2016

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Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17		
An or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
A.	Full Name of Individual (Last, First, Middle Initia Rodriguez, Jose, Esteban, , MD, FAAOS		rganization Name	Date of Receipt		
	Mailing Address 315 Electra Dr			10 22 2021		
	City Houston	State TX	Zip Code 77073	Transaction ID : 11141729 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		500.00		
	Name of Employer (for Individual) Orthopedic Institute for Spinal Disord Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) lopaedic Surgeon Year-to-Date ▼ 500.00	Memo Item		
				1		
B.	Full Name of Individual (Last, First, Middle Initia Barber, Thomas, C, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 450 East 63rd Street Apartment 7L City State		Zip Code	10 / 23 / 2021		
	New York City	NY	10065	Transaction ID : 11141793 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Orthopaedic Surgeon		250.00		
	Name of Employer (for Individual) Kaiser Permanente Medical Center			Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]		
С.	Full Name of Individual (Last, First, Middle Initia Rajani, Rajiv, , , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 701 Ogden Ln			10 23 2021		
	City San Antonio	State TX	Zip Code 78209	Transaction ID : 11141794 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		250.00		
	Name of Employer (for Individual) Univ of TX Health Sciences Ctr SA		upation (for Individual) opaedic Surgeon	Memo Item		
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00]		
s	UBTOTAL of Receipts This Page (optional)			1000.00		
т	OTAL This Period (last page this line number o	nly)				

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 1'
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements may	y not be sold or used by any p dress of any political committee	person for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	In Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Ede, David, E, , MD,FAAOS	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 3 High Meadow Drive	State	Zip Code	10 23 2021
	Charleston	WV	25311	Transaction ID : 11141795 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Orthopedic Trauma Group		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 1000.00]
в.	Full Name of Individual (Last, First, Middle Initia Friedmann, Elizabeth, , , MD	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 2660B Greenbriar Lane	10 23 2021		
	City	State MD	Zip Code 21401	Transaction ID : 11141796
	Annapolis FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 84.00
	Name of Employer (for Individual) University of Maryland		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 840.00]
С.	Full Name of Individual (Last, First, Middle Initia Westrich, Geoffrey, H, , MD,FAAOS		ganization Name	Date of Receipt
	Mailing Address 535 East 70th Street	10 23 2021		
	City New York	State NY	Zip Code 10021	Transaction ID : 11141808 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) Hospital for Special Surgery	or Special Surgery Orthopaedic Surgeon		
	Receipt For:	Aggregate	rear-to-Date ▼ 500.00]
s	UBTOTAL of Receipts This Page (optional)			834.00
Т	OTAL This Period (last page this line number or	nly)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 254 OF

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17
Ar or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committe	e to solicit contributions from such committee.
A.	Full Name of Individual (Last, First, Middle Initi Navarro, Ronald, Anthony, , MD,FAAOS Mailing Address 18 Wide Loop Rd	al) or Full Or	rganization Name	Date of Receipt
	City Rolling Hills	State CA	Zip Code 90274	10 24 2021 Transaction ID : 11141813 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Kaiser Permanente South Bay Receipt For: Primary General Other (specify) ▼	Orth	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 840.00	Memo Item
В.	Full Name of Individual (Last, First, Middle Initi Kunes, Justin, Ronald, , MD,FAAOS Mailing Address 1211 Johnson Ferry Rd	Date of Receipt		
	City Marietta	State GA	Zip Code 30067	Transaction ID : 11141817 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Piedmont Physicians Group		ipation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
с.	Full Name of Individual (Last, First, Middle Initi Beltran, Michael, John, , MD,FAAC		rganization Name	Date of Receipt
	Mailing Address UC Dept of Orthopaedic Surge 231 Albert Sabin Way Room 5	553	Zin Oode	
	City Cincinnati	State OH	Zip Code 45267-0212	Transaction ID : 11142746 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Department of Orthopaedics and Rehabil Receipt For: Primary General Other (specify)	Ortho	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 840.00	Memo Item
⊢	UBTOTAL of Receipts This Page (optional)			418.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 255 OF 551		
ITEMIZED RECEIPTS		for each category of the	(check only one)		
		Detailed Summary Page	× 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports ar	nd Statements ma	ay not be sold or used by any	person for the purpose of soliciting contributions		
			ee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle	e Initial) or Full O	roanization Name			
A. Schnaser, Erik, Allen, , MD,FAAOS	Schnaser, Erik, Allen, , MD, FAAOS				
Mailing Address 75538 Desierto Dr	M = M / D = D / Y = Y = Y = Y				
			10 26 2021		
City Indian Wells	State CA	Zip Code 92210-8444	Transaction ID : 11142748		
		32210-0444	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual)		upation (for Individual)	Memo Item		
Eisenhower Desert Orthopaedic Center	Orth	nopaedic Surgeon			
Receipt For:	Aggregate	Year-to-Date V	_		
Other (specify) ▼		1000.00			
			-		
Full Name of Individual (Last, First, Middle B. Mitros, Stephen, F, , MD, FAAOS		rganization Name	Date of Receipt		
Mailing Address 51045 Erin Glen Dr					
City	State	Zip Code	Transaction ID : 11142749		
Granger	IN	46530	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual) Mitros Orthopaedics		upation (for Individual)	Memo Item		
Receipt For:		nopaedic Surgeon			
Primary General	Aggregate	Year-to-Date ▼			
Other (specify) ▼		840.00			
			-		
Full Name of Individual (Last, First, Middle C. Eckrich, Stephen, G J, , MD, FA		rganization Name	Date of Receipt		
Mailing Address 5511 Shooting Star Trail					
City	State	Zip Code	10 27 2021 Transaction ID : 11143319		
Rapid City	SD	57702	Amount of Each Receipt this Period		
FEC ID number of contributing					
federal political committee.	С		84.00		
Name of Employer (for Individual)	Oco	upation (for Individual)	Memo Item		
Self Employed		opaedic Surgeon	-		
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General					
Other (specify)		840.00	1		
[
SUBTOTAL of Receipts This Page (optional)		418.00		

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER: PAGE 256 OF 551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model 11 a model 12 model 13 model 14 model 15 model 16 model 17 model
Any information copied from such Reports and s or for commercial purposes, other than using th		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Nagamani, Kevin, K, , MD,FAAOS Mailing Address 11902 E Lake Cr City Greenwood Village FEC ID number of contributing federal political committee.	itial) or Full Organization Name State Zip Code CO 80111 C	Date of Receipt 10 27 2021 Transaction ID : 11143321 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Western Orthopaedics Receipt For:	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00	Memo Item
Full Name of Individual (Last, First, Middle In B. Newbern, D, Gordon, , MD, FAAOS Mailing Address 4412 S Lookout St City Little Rock FEC ID number of contributing federal political committee. Name of Employer (for Individual) Arkansas Specialty Orthopedics Receipt For: Primary General Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle In C. Mesfin, Addisu, , , MD,FAAOS Mailing Address 145 Georgian Court Road City Rochester FEC ID number of contributing federal political committee. Name of Employer (for Individual) University of Rochester Orthopaedic Su Receipt For: Primary General Other (specify)	Nr Zip Code NY 14610 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00 250.00	Date of Receipt 10 01 2021 Transaction ID : 11143555 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		418.00

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Market and
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	n Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Urband, Lindsey, , , MD,FAAOS	Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 15066 Almond Orchard Lar Suite 403	ne		10 04 Y Y Y Y 2021
City San Diego	State CA	Zip Code 92131	Transaction ID : 11143556 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) San Diego Hand Specialists		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 1340.00	
Full Name of Individual (Last, First, Middle B. Delanois, Ronald, Emilio, , MD,FA Mailing Address 6 Brookfield Garth		ganization Name	Date of Receipt
City	State	Zip Code	10 04 2021
Lutherville	MD	21093	Transaction ID : 11143560 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Lifebridge		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle C. Engstrom, Stephen, Matthew, ,		ganization Name	Date of Receipt
Mailing Address 9207 Duncaster Ct			10 / D D / Y Y Y Y 10 04 2021
City Brentwood	State TN	Zip Code 37027	Transaction ID : 11143561 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Vanderbilt Univ-Vanderbilt Ortho Inst		pation (for Individual) paedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 840.00	
SUBTOTAL of Receipts This Page (optional).			► 418.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

100

-

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of Detailed Summary F	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association o	f Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Paxton, E, Scott, , MD,FAAOS Mailing Address 54 South Meadow Ln City Barrington FEC ID number of contributing federal political committee. Name of Employer (for Individual) University Orthopedics Receipt For: Primary General Other (specify)	State RI Zip Code 02806-5021 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt Date of Receipt 10 04 2021 Transaction ID : 11143562 Amount of Each Receipt this Period Memo Item 0.00
Full Name of Individual (Last, First, Middle Initi B. Hettrich, Carolyn, , , MD,MPH,FAA Mailing Address 28A Miller Hill Rd	Date of Receipt	
City Dover FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	State Zip Code MA 02030-2332 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 84	Transaction ID : 11143563 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Initi C. Kraushaar, Barry, S, , MD,FAAOS Mailing Address 3 Divot PI City Suffern FEC ID number of contributing federal political committee. Name of Employer (for Individual) Advanced Ortho & Sports Medicine Receipt For: Primary General Other (specify)	State NY Zip Code 10901 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt Date of Receipt Transaction ID : 11143564 Amount of Each Receipt this Period Memo Item 8.00
SUBTOTAL of Receipts This Page (optional)		

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Starr commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rrson for the purpose of soliciting contributions to solicit contributions from such committee.
	AME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS
A	ull Name of Individual (Last, First, Middle Initia Schmitz, Matthew, R, , MD,FAAOS	al) or Full O	Organization Name	Date of Receipt
_	lailing Address 111 Ottawa Run			10 / D D / Y Y Y Y 2021
	ity San Antonio	State TX	Zip Code 78231	Transaction ID : 11143566 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		100.00
S	ame of Employer (for Individual) an Antonio Military Medical Center		upation (for Individual) hopaedic Surgeon	Memo Item
R [eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 950.00	
B	ull Name of Individual (Last, First, Middle Initia Sheehan, John, P, , MD,FAAOS	al) or Full O	Organization Name	Date of Receipt
_	lailing Address 6621 Cuming St	10 / D D / Y Y Y Y 2021		
	my Dmaha	State NE	Zip Code 68132	Transaction ID : 11143567 Amount of Each Receipt this Period
F	EC ID number of contributing deral political committee.	С		84.00
	ame of Employer (for Individual) oys Town		upation (for Individual) hopaedic Surgeon	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , , , 840.00	
	ull Name of Individual (Last, First, Middle Initia Chutkan, Norman, Barrington, , ME			Date of Receipt
	lailing Address 1 E Lexington Ave Unit 1404			10 / D D / Y Y Y Y 10 08 2021
	ity Phoenix	State AZ	Zip Code 85012	Transaction ID : 11143569 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		84.00
Т	ame of Employer (for Individual) he CORE Institute		upation (for Individual) nopaedic Surgeon	Memo Item
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 840.00	
SUI	BTOTAL of Receipts This Page (optional)			268.00
тот	TAL This Period (last page this line number o	nly)	••••••	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 260 OF

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and a	address of any political committe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Midd	le Initial) or Full C		
A. More, Robert, Cameron, , MD, FAA	OS		Date of Receipt
Mailing Address 8100 Wescott Drive Suite 101			10 / D D / Y Y Y Y 10 12 2021
City Flemington	State NJ	Zip Code 08822	Transaction ID : 11143570 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individual) MidJersey Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00]
Full Name of Individual (Last, First, Midd		Organization Name	
B. Cimino, William, Gerard, , MD,F Mailing Address 52 Beach Road Suite 207	AAUS		Date of Receipt
City Fairfield	State CT	Zip Code 06824	Transaction ID : 11143571
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Beach Road Orthopaedics		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00]
Full Name of Individual (Last, First, Middl C. Parsley, Brian, S, , MD,FAAO	le Initial) or Full C S,F	Organization Name	Date of Receipt
Mailing Address 302 Pine Shadows Dr Suite 2400			10 / D D / Y Y Y Y Y 10 13 2021
City Houston	State TX	Zip Code 77056	Transaction ID : 11143572 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) UT Health Physicians		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 840.00	1
SUBTOTAL of Receipts This Page (optiona	al)		252.00
TOTAL This Period (last page this line nun	nber only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 261 OF 551		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using t			berson for the purpose of soliciting contributions be to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Damalas, Dino, , , MBA	Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 9400 W Higgins Rd	Mailing Address 9400 W Higgins Rd				
City Rosemont	State IL	Zip Code 60018-4975	Transaction ID : 11143573 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual)		upation (for Individual)	Memo Item		
AAOS Receipt For:		ef Operating Officer Year-to-Date ▼	_		
Primary General Other (specify) ▼		840.00]		
Full Name of Individual (Last, First, Middle 3. DiCaprio, Matthew, R, , MD,FAAC		rganization Name	Date of Receipt		
Mailing Address 2028 Dobie Lane	10 14 2021				
City Schenectady	State NY	Zip Code 12303	Transaction ID : 11143574 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) Albany Medical College		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Middle C. Roberson, Rowland, M, , MD, F.		rganization Name	Date of Receipt		
Mailing Address 641 N Lamar Blvd		10 14 2021			
City Oxford	State MS	Zip Code 38655-3235	Transaction ID : 11143575 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual) Specialty Orthopedic Group		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 840.00]		
SUBTOTAL of Receipts This Page (optional).			418.00		

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

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions
$\left\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
A.	Full Name of Individual (Last, First, Middle Initi Lisella, Jordan, Mills, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 14 Turner Lane	Chata	Zie Oode	10 / D D / Y Y Y Y 2021
	City Loudonville	State NY	Zip Code 12211	Transaction ID : 11143576 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		84.00
	Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00]
в.	Full Name of Individual (Last, First, Middle Initi Zanaros, George, , , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 16 Shaker Bay Rd	10 14 2021		
	City Latham	State NY	Zip Code 12110	Transaction ID : 11143577 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00]
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Bernholt, David, , , MD	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 3126 Chapel Woods Cv	M M / D D / Y Y Y Y 10 25 2021		
	City Germantown	State TN	Zip Code 38139	Transaction ID : 11143578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) Campbell Clinic Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.70]
	UBTOTAL of Receipts This Page (optional)			209.67
Т	OTAL This Period (last page this line number of	only)		

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZ	ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
or for com	mercial purposes, other than using the na	ements mag ame and ac	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	of committee (in Full) cal Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
A. Bettin	me of Individual (Last, First, Middle Initial , Clayton, Charles, , MD,FAAOS) or Full Or	ganization Name	Date of Receipt
wanny	Address 5047 Shady Hall Ct	10 25 2021		
City Memph	is	State TN	Zip Code 38117	Transaction ID : 11143579 Amount of Each Receipt this Period
	number of contributing political committee.	С		41.67
Campb	of Employer (for Individual) ell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
	For: rimary General ther (specify) ▼	Aggregate `	Year-to-Date ▼ 416.70]
	me of Individual (Last, First, Middle Initial Indruccio, James, H, , MD, FAAO		ganization Name	Date of Receipt
Mailing	Address Campbell Clinic 1400 S Germantown Rd		10 / 25 / 2021	
City Germa	ntown	State TN	Zip Code 38138-2205	Transaction ID : 11143580
FEC ID	number of contributing political committee.	C		Amount of Each Receipt this Period
Name o Campbe	of Employer (for Individual) ell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
	For: rimary General ther (specify) ▼	Aggregate `	Year-to-Date ▼ 416.70	
	me of Individual (Last, First, Middle Initial karell, John, R, , Jr, MD, FA) or Full Or	ganization Name	Date of Receipt
Mailing	Address 1458 W Poplar Ave Ste 100			10 25 2021
City Collier	<i>v</i> ille	State TN	Zip Code 38017	Transaction ID : 11143582 Amount of Each Receipt this Period
	number of contributing political committee.		41.67	
Campb	of Employer (for Individual) ell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Aggregate Year-to Primary General Other (specify) Image: Constraint of the second s			Year-to-Date ▼ 416.70	
SUBTOT	AL of Receipts This Page (optional)			125.01
TOTAL T	his Period (last page this line number on	y)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 264 OF

ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using			berson for the purpose of soliciting contributions be to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Political Action Committee o	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middl A. Ford, Marcus, Christopher, , MD, FA		rganization Name	Date of Receipt		
Mailing Address 2255 Duntreath Rd			10 25 2021		
City Germantown	State TN	Zip Code 38139	Transaction ID : 11143583 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		20.84		
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.40]		
Full Name of Individual (Last, First, Middl B. Grear, Benjamin, J, , MD,FAAO	S	rganization Name	Date of Receipt		
Mailing Address 219 Lagrange Creek Driv	10 / Y Y Y Y Y 25 2021				
City Eads	State TN	Zip Code 38028	Transaction ID : 11143584 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		41.67		
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.70]		
Full Name of Individual (Last, First, Middl C. Guyton, James, L, , MD,FAAC		rganization Name	Date of Receipt		
Mailing Address 6422 Massey Estates Co	Mailing Address 6422 Massey Estates Cove				
City Memphis	State TN	Zip Code 38120	Transaction ID : 11143585 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		41.67		
Name of Employer (for Individual) Campbell Clinic Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item		
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.70]		
SUBTOTAL of Receipts This Page (optional	al)		104.18		
TOTAL This Period (last page this line num	nber only)				

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)	
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	n Association of Ortho	opaedic SurgeonsPAC of AAOS
 Full Name of Individual (Last, First, Middle Initial) or Full Harkess, James, W, , MD,FAAOS Mailing Address 9566 Fox Hill Circle S 			ganization Name	Date of Receipt
				10 25 2021
	City	State TN	Zip Code	Transaction ID : 11143586
	Germantown		38139	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	Campbell Clinic	Ortho	ppaedic Surgeon	
	Receipt For:	Aggregate \	lear-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼		416.70	
в.	Full Name of Individual (Last, First, Middle Initi Heck, Robert, Kurt, , Jr, MD, FA	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4938 Barfield Rd	10 25 2021		
	City	State	Zip Code	Transaction ID : 11143587
	Memphis	TN	38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For:	Aggregate \	/ear-to-Date ▼	
	Other (specify) ▼		, 416.70]
с.	Full Name of Individual (Last, First, Middle Initi Kelly, Derek, Michael, , MD,FAAO		ganization Name	Date of Receipt
	Mailing Address 1458 W Poplar Ave Suite 100			10 / Y Y Y Y Y 2021
	City Collierville	State TN	Zip Code 38017	Transaction ID : 11143588 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		pation (for Individual) paedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 416.70]
⊢	UBTOTAL of Receipts This Page (optional)			125.01

FOR LINE NUMBER: PAGE 266 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and SI for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Mascioli, Anthony, , , MD, FAAOS	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 226 W Goodwyn			10 / Y Y Y Y Y 10 25 2021
	City Memphis	State TN	Zip Code 38111	Transaction ID : 11143589 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.83
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.30	
в.	Full Name of Individual (Last, First, Middle Init Mauck, Benjamin, Matthew, , MD, Fr Mailing Address 2742 Central Ave	Date of Receipt		
	City	State	Zip Code	10 25 2021 Transaction ID : 11143590
	Memphis FEC ID number of contributing federal political committee.	C	38111	Amount of Each Receipt this Period
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.30	
с.	Full Name of Individual (Last, First, Middle Init Mihalko, Marc, J, , MD, FAAOS	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 4079 Barfield Road	10 / 25 / Y Y Y Y 2021		
	City Memphis	State TN	Zip Code 38117	Transaction ID : 11143591 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.70	
s	UBTOTAL of Receipts This Page (optional)		·····	83.33
Т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3		FOR LINE NUMBER: PAGE 267 OF 551			
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the				
	Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports	and Statements may not be sold or used by an	ny person for the purpose of soliciting contributions			
		hittee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)					
		rthopaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Mid Murphy, Garnett, Andrew, , MD,FA		Date of Receipt			
Mailing Address Campbell Clinic					
1400 S Germantown Ro	d State Zip Code	10 25 2021			
Germantown	TN 38138-2205	Transaction ID : 11143592 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	41.67			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
Campbell Clinic	Orthopaedic Surgeon				
Receipt For:	Aggregate Year-to-Date ▼				
Other (specify)	416.70				
Other (specify) ▼	416.70				
Full Name of Individual (Last, First, Mid		Date of Receipt			
B. Phillips, Barry, B, , MD, FAAOS					
Mailing Address 8681 Windrush		10 / Y Y Y Y Y 25 2021			
City	State Zip Code	Transaction ID : 11143593			
Memphis	TN 38125	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	20.83			
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General					
Other (specify) ▼	208,30				
Full Name of Individual (Last, First, Mid C. Richardson, David, R, , MD,F	Idle Initial) or Full Organization Name FAAOS	Date of Receipt			
Mailing Address 636 Center Dr		10 25 2021			
City	State Zip Code	Transaction ID : 11143594			
Memphis	TN 38112	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	41.67			
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 416.70				
SUBTOTAL of Receipts This Page (option	nal)	104.17			

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

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 268 OF 551 (check only one)	
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.	
Full Name of Individual (Last, First, Middle A. Rudloff, Matthew, Ian, , MD, FAAOS	Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 10211 Ramblewood Dr	State	Zip Code	M / D / Y	
Arlington FEC ID number of contributing		38002	Amount of Each Receipt this Period	
federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	Occu	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 416.70	Memo Item	
Full Name of Individual (Last, First, Middle Sawyer, Jeffrey, R, , MD, FAAOS Mailing Address 4450 Chickasaw Road				
City Memphis	State TN	Zip Code 38117	10 25 2021 Transaction ID : 11143597 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		41.67	
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.70	1	
Full Name of Individual (Last, First, Middle C. Sheffer, Benjamin, West, , MD,F	Initial) or Full O AAOS	rganization Name	Date of Receipt	
Mailing Address 281 Ben Avon Way City Memphis	State TN Zip Code 38111-7702 C Occupation (for Individual) Orthopaedic Surgeon		10 25 2021 Transaction ID : 11143598	
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
Name of Employer (for Individual) Campbell Clinic			Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.70	1	
SUBTOTAL of Receipts This Page (optional).		······	125.01	
TOTAL This Period (last page this line number	er only)			

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 269 OF 55' (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the		r person for the purpose of soliciting contributions tee to solicit contributions from such committee.
/		hopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Thompson, Kirk, Michael, , MD Mailing Address 75 St Albans Fairway	itial) or Full Organization Name	Date of Receipt
City	State Zip Code	10 25 2021 Transaction ID : 11143599
Memphis	TN 38111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.83
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	208.30	
Full Name of Individual (Last, First, Middle In 3. Thompson, Norfleet, Buckner, , MD		Date of Receipt
Mailing Address 3784 Highland Park Place		10 25 2021
City Memphis	State Zip Code TN 38111	Transaction ID : 11143600
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	416.70	
Full Name of Individual (Last, First, Middle In Throckmorton, Thomas, Ward, , N		Date of Receipt
Mailing Address 4901 Fairfield Circle		10 25 2021
City Memphis	StateZip CodeTN38117	Transaction ID : 11143601 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer (for Individual) Campbell Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 416.70	
SUBTOTAL of Receipts This Page (optional)		104.17
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3)	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 270 OF 551		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17		
			v person for the purpose of soliciting contributions tee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Ort	hopaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Warner, William, C, , Jr, MD, FA	e Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 215 East Cherry Circle			10 25 2021		
City Memphis	State TN	Zip Code 38117	Transaction ID : 11143602 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		41.67		
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 416.70			
Full Name of Individual (Last, First, Middle B. Weinlein, John, C, , MD,FAAOS	e Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 633 Valleybrook Dr	10 / Y Y Y Y 25 2021				
City Memphis	State TN	Zip Code 38120-2707	Transaction ID : 11143603 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		41.67		
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.70			
Full Name of Individual (Last, First, Middle C. Williams, Keith, D, , MD, FAAC		rganization Name	Date of Receipt		
Mailing Address 2336 Pinnacle Creek Dr					
City Germantown	State TN	Zip Code 38138	Transaction ID : 11143604 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		41.67		
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.70			
SUBTOTAL of Receipts This Page (optional)		125.01		

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

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 271 OF 551		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)		
		Dotaliou Outilinary I ayo	13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle I A. Kamps, Bryan, Scott, , MD,FAAOS	nitial) or Full Or	ganization Name	Date of Receipt		
Mailing Address 3741 Monarch Dr NE			10 / Y Y Y Y Y 25 2021		
City Grand Rapids	State MI	Zip Code 49525	Transaction ID : 11143636 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual)		pation (for Individual)	Memo Item		
Spectrum Health Medical Group Receipt For:		opaedic Surgeon Year-to-Date ▼	_		
Primary General Other (specify) ▼		750.00]		
Full Name of Individual (Last, First, Middle I 3. Russell, George, V, , Jr, MD, MBA	nitial) or Full Or	ganization Name	Date of Receipt		
Mailing Address 244 North Natchez Drive	10 25 2021				
City	State	Zip Code	Transaction ID : 11143638		
Madison	MS	39110	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		90.00		
Name of Employer (for Individual) Univ of Mississippi Med Ctr		ipation (for Individual) opaedic Surgeon	Memo Item		
Receipt For:	Aggregate	Year-to-Date 🔻			
Other (specify) ▼		, 900.00]		
Full Name of Individual (Last, First, Middle I C. Lindgren, David, M, , MD,FAAOS		rganization Name	Date of Receipt		
Mailing Address 8001 Chesshire Ln N	Aailing Address 8001 Chesshire Ln N				
City Maple Grove	State MN	Zip Code 55311	Transaction ID : 11143646 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) Self Employed		pation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]		
SUBTOTAL of Receipts This Page (optional)			590.00		

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

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SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 272 OF 551	
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Sta	atements ma	ly not be sold or used by any r	
	for commercial purposes, other than using the r			
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	A		
$ \rangle$	Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Ľ	Full Name of Individual (Last, First, Middle Initia	al) or Full Oi	rganization Name	
Α.	Olszewski, Albert, D, , MD, FAAOS	Date of Receipt		
	Mailing Address 377 Orchard Ln			
	City	10 27 2021		
	Kalispell	State MT	Zip Code 59904	Transaction ID : 11144036 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		500.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	Self Employed		opaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General	00 . 0		1
	Other (specify)		1000.00	
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
в.	Pushkarewicz, Michael, J, , MD,FAA			Date of Receipt
	Mailing Address 1510 Braken Ave	M = M / D = D / Y = Y = Y		
	<u></u>	10 28 2021		
	City Wilmington	State DE	Zip Code 19808	Transaction ID : 11144037
	FEC ID number of contributing	_	10000	Amount of Each Receipt this Period
	federal political committee.	С		42.00
	Name of Employer (for Individual)		unation (for Individual)	Memo Item
	Name of Employer (for Individual) First State Orthopaedics		upation (for Individual) nopaedic Surgeon	
	Receipt For:		Year-to-Date ▼	—
	Primary General	. iggi ogaio		1
	Other (specify) v		420.00	
_	Full Name of Individual (Last, First, Middle Initia		rganization Name	
C.	Gary, Joshua, Layne, , MD,FAAOS		gunzalon name	Date of Receipt
	Mailing Address 951 Descanso Drive			M M / D D / Y Y Y Y
		Stata	Zip Code	10 28 2021
	City La Canada Flintridge	State CA	21p Code 91011	Transaction ID : 11144038 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		84.00
	Name of Employer (for Individual)	000	unation (for Individual)	Memo Item
	Keck School of Medicine of USC		upation (for Individual) opaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General	00 . 0		1
	Other (specify)		840.00	1
s	UBTOTAL of Receipts This Page (optional)			626.00
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TOTAL This Period (last page this line number only)......

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17	
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	n Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full A. Scales, Darrell, Kevin, , MD,FAAOS Mailing Address 5425 Golf View Dr			-	Date of Receipt
	City Braselton	State GA	Zip Code 30517	Transaction ID : 11144039
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	Northeast Georgia Physicians Group	Ortho	opaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00]
в.	Full Name of Individual (Last, First, Middle Initia Carolan, Gregory, Francis, , MD,FAA		ganization Name	Date of Receipt
	Mailing Address 1806 Meadow Ridge Ct	10 28 2021		
	City	State	Zip Code	Transaction ID : 11144040
	Bethlehem	PA	18015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) St Luke's Ortho Surg Group	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00]
<u></u>	Full Name of Individual (Last, First, Middle Initia Torres, Daniel, , , MD, FAAOS	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1488 Shelburne Ct	M M / D D / Y Y Y Y 10 28 2021		
	City Allentown	State PA	Zip Code 18104	Transaction ID : 11144041
	FEC ID number of contributing federal political committee.	С	10104	Amount of Each Receipt this Period 85.00
	Name of Employer (for Individual) Lehigh Valley Practioner Group		pation (for Individual) ppaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 850.00]
	UBTOTAL of Receipts This Page (optional)			269.00

FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	\checkmark 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used by any per e and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican Association of Ortho	paedic SurgeonsPAC of AAOS
Gulf Breeze I FEC ID number of contributing federal political committee. I Name of Employer (for Individual) I Andrews Institute For Orthopaedics & S I	State Zip Code FL 32561	Date of Receipt
Siloam Springs FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed	State Zip Code AR 72761	Date of Receipt
Granite Bay FEC ID number of contributing federal political committee.	State Zip Code CA 95746	Date of Receipt 10 / 28 / 2021 Transaction ID : 11144044 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		418.00

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)		
11			for each category of the Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)						
	Political Action Committee of the	America	an Association of O	rthopa	aedic SurgeonsPAC of AAOS		
Α.	Full Name of Individual (Last, First, Middle Initia Della Rocca, Gregory, John, , MD,PhD,F		Drganization Name		Date of Receipt		
	Mailing Address 1415 Stonehaven Rd				10 / Y Y Y Y 2021		
	City Columbia	State MO	Zip Code 65203		Transaction ID : 11144045 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			250.00		
	Name of Employer (for Individual) Univ of Missouri		cupation (for Individual) hopaedic Surgeon		Memo Item		
	Receipt For:	Aggregate	e Year-to-Date ▼ 1000.00	-			
	Other (specify) ▼	L	-192 - 192 - 192	_			
в.	Full Name of Individual (Last, First, Middle Initia Hoedt, Christen, , , MD	al) or Full O	Drganization Name		Date of Receipt		
	Mailing Address 973 Vinings Blvd		10 / Y Y Y Y 28 2021				
	City	State	Zip Code	-	Transaction ID : 11144046		
	Gallatin	TN	37066		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			84.00		
	Name of Employer (for Individual) Cooper Orthopaedics Surgery		cupation (for Individual) thopaedic Surgeon		Memo Item		
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		, 840.00				
с.	Full Name of Individual (Last, First, Middle Initia Reid, J, Spence, , MD,FAAOS	al) or Full O	Drganization Name		Date of Receipt		
	Department of Orthopaedics	Mailing Address 500 University Drive Department of Orthopaedics					
	City Hershey	State PA	Zip Code 17036		Transaction ID : 11144047 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			84.00		
	Name of Employer (for Individual) Penn State	Occupation (for Individual) Orthopaedic Surgeon			Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 840.00				
s	UBTOTAL of Receipts This Page (optional)			···· >	418.00		
Т	OTAL This Period (last page this line number o	nly)		🕨			

FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
A. Full Name of Individual (Last, First, Middle Giuseffi, Steven, A, , MD,FAAOS Mailing Address 4784 Enchanted Pines Dr	Initial) or Full O	Zip Code	Date of Receipt
Rapid City	SD	57701	Transaction ID : 11144048 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Black Hills Orthopedic and Spine Cente		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00	
B. Full Name of Individual (Last, First, Middle B. Snyder, Barry, J, , MD,FAAOS Mailing Address 497 Long Ln	Initial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	10 28 2021
Huntingdon Valley	PA	19006	Transaction ID : 11144049 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name of Individual (Last, First, Middle C. Chimento, George, F, , MD,FAA		rganization Name	Date of Receipt
Mailing Address 2405 Chester St			M M / D D / Y Y Y Y 10 17 2021
City Metairie	State LA	Zip Code 70001	Transaction ID : 11145171 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Ochsner Medical Center		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional).			1334.00

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

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Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Crosland, Edward, M, , MD,FAAOS	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 389 Woldus Rd			10 / D D / Y Y Y Y 2021
	City North Augusta	State SC	Zip Code 29841	Transaction ID : 11145190 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Champion Orthopedics		upation (for Individual) lopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
в.	Full Name of Individual (Last, First, Middle Initi Smucker, Craig, G, , MD,FAAOS Mailing Address 1101 Oakland Ct	ial) or Full O	rganization Name	Date of Receipt
	City	State DE	Zip Code	Transaction ID : 11145224
	Newark FEC ID number of contributing federal political committee.	C	19711	Amount of Each Receipt this Period
	Name of Employer (for Individual) Smucker Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
с.	Full Name of Individual (Last, First, Middle Initi Balazs, George, C, , MD	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 614 Baldwin Ave		10 28 2021	
	City Norfolk	State VA	Zip Code 23517	Transaction ID : 11145226 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Walter Reed National Military Medical	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
s	UBTOTAL of Receipts This Page (optional)		······)	1500.00
т	OTAL This Period (last page this line number of	only)	·····)	

FOR LINE NUMBER:

PAGE 278 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial Davis, Richard, V, , MD,FAAOS Mailing Address PO Box 2184 City Stateline FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For:	State NV C	Zip Code 89449 upation (for Individual) nopaedic Surgeon	Date of Receipt 10 30 2021 Transaction ID : 11146178 Amount of Each Receipt this Period 1000.00 Memo Item
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Initial B. Tigges, Russell, G, , MD, FAAOS Mailing Address 25 Townsend Farm Road City Lagrangeville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Associates of Duchess Count Receipt For: Primary General Other (specify) ▼	State NY C	Zip Code 12540 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial McNabb, David, Clinton, , MD, FAA Mailing Address 301 Lynwood Lane		rganization Name	Date of Receipt
City Raleigh FEC ID number of contributing federal political committee. Name of Employer (for Individual) Raleigh Orthopaedic Clinic Receipt For: Primary General Other (specify)	Orth	Zip Code 27609 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Transaction ID : 11146197 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			2500.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 279 OF 551		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17		
Any information copied from such Reports and s or for commercial purposes, other than using th					
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orthe	opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle In Rue, John-Paul, H, , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt		
Mailing Address 956 Nelson PI	Mailing Address 956 Nelson PI				
City Arnold	State MD	Zip Code 21012-1535	Transaction ID : 11146200		
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item		
The Orthopedic Specialty Hospital At M		nopaedic Surgeon			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]		
Full Name of Individual (Last, First, Middle In 3. Dietrich, Gregory, Dean, , MD, FAA		rganization Name	Date of Receipt		
Mailing Address 13313 Remuda Canyon			10 31 2021		
City	State	Zip Code	Transaction ID : 11146204		
Lewiston	ID	83501	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For:	Aggregate	Year-to-Date ▼			
Other (specify) ▼		250.00]		
Full Name of Individual (Last, First, Middle In C. Chen, Christopher, J, , MD, FAA		rganization Name	Date of Receipt		
Mailing Address 9049 Broadway Terr			10 31 2021		
City Oakland	State CA	Zip Code 94611	Transaction ID : 11146206 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	500.00			
Name of Employer (for Individual) Self Employed		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]		
SUBTOTAL of Receipts This Page (optional)			1000.00		

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)		e separate schedule(s)	FOR LINE NUMBER:		
ITEMIZED RECEIPTS	for	each category of the tailed Summary Page	(check only one) 11a 11b 13 14	11c 12 15 16 17	
Any information copied from such Reports a or for commercial purposes, other than usin					
NAME OF COMMITTEE (In Full) Political Action Committee o	-				
Full Name of Individual (Last, First, Midd Bumpass, David, B, , MD, FAAOS	e Initial) or Full Organiz	ation Name	Date of Receipt		
	Mailing Address 4915 E Crestwood Drive				
City Little Rock	State Z	lip Code 72207	Transaction ID : 1 Amount of Each Re		
FEC ID number of contributing federal political committee.	С			1000.00	
Name of Employer (for Individual)	Occupatio	n (for Individual)	Memo Item		
University of Arkansas For Medical Sci Receipt For: Primary General Other (specify) ▼	Aggregate Year-	dic Surgeon to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Midd Arnold, Douglas, R, , MD,FAAO	e Initial) or Full Organiz S	ation Name	Date of Receipt		
Mailing Address 5575 Polo Ridge			10 / D D 10 31	/ Y Y Y Y 2021	
City Waunakee	State Z	lip Code 53597	Transaction ID : 1		
FEC ID number of contributing federal political committee.	C		Amount of Each Re	1000.00	
Name of Employer (for Individual) Divine Savior Healthcare		n (for Individual) dic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Midd C. Cassidy, Carter, , , MD, FAAC		ation Name	Date of Receipt		
Mailing Address 4890 Faulkirk Lane			11 D D 11 01	/ Y Y Y Y 2021	
City Lexington		čip Code 40515	Transaction ID : 1 Amount of Each Re		
FEC ID number of contributing federal political committee.	С			85.00	
Name of Employer (for Individual) University of Kentucky Res Program		n (for Individual) lic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-	to-Date ▼ 935.00]		
SUBTOTAL of Receipts This Page (optional	ـــــــــــــــــــــــــــــــــــــ	I	· · · · · ·	2085.00	

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

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 281 OF 551 (check only one)	
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and s or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Ortho	ppaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle In Wright, Craig, , , MD,FAAOS	itial) or Full Organization Name	Date of Receipt	
Mailing Address 3 Briar Hill Rd 	State Zip Code	10 18 2021 Transaction ID : 11146705	
Montclair	NJ 07042	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer (for Individual) Resurgens Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
Full Name of Individual (Last, First, Middle In Lajam, Claudette, Malvina, , MD,FA		Date of Receipt	
Mailing Address 30 Knollwood Dr	10 18 <u>2021</u>		
City	State Zip Code	Transaction ID : 11146706	
Larchmont FEC ID number of contributing	NY 10538-1238	Amount of Each Receipt this Period	
federal political committee.	C	1250.00	
Name of Employer (for Individual) Hosp for Joint Disease	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For:	Aggregate Year-to-Date ▼		
Other (specify) ▼	5000.00		
Full Name of Individual (Last, First, Middle In Bercik, Michael, J, , Jr, MD,FAA	itial) or Full Organization Name	Date of Receipt	
Mailing Address 1410 Center Road	Mailing Address 1410 Center Road		
City Lancaster	State Zip Code PA 17603	Transaction ID : 11146707	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer (for Individual) Thomas Jefferson University	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional)	······	1550.00	
TOTAL This Period (last page this line number	only)		

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Check only one) Image: Imag
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be sold or used by any g the name and address of any political committ	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee o	f the American Association of Ortl	hopaedic SurgeonsPAC of AAOS
A. Jiranek, William, A, , MD,FAAOS,F Mailing Address 4709 Creekstone Drive	e Initial) or Full Organization Name	Date of Receipt
	State Zip Code	10 22 2021
City Durham	VA 27703	Transaction ID : 11146709 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Duke University	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
Full Name of Individual (Last, First, Midd B. Glusenkamp, Nathan, , , Mailing Address 9400 W Higgins Rd	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	10 22 2021 Transaction ID : 11146710
Rosemont	IL 60018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) AAOS	Occupation (for Individual) Chief Quality and Registries Officer	n Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Midd C. Mejia, Alfonso, , , MD,MPH,FA		Date of Receipt
Mailing Address 5332 South Shore Drive		10 / Y Y Y Y 25 / 2021
City Chicago	State Zip Code IL 60615	Transaction ID : 11146711
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Illinois Association of Orthopedic Sur	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1680.00	
SUBTOTAL of Receipts This Page (optiona	l)	218.00

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Schmidt, Kenneth, , , MD Mailing Address 10811 N 52nd Street City Scottsdale FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoArizona Receipt For: Primary General Other (specify) ▼	State AZ C Occu Orth	rganization Name Zip Code 85254 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle Adamson, Kent, R, , MD,FAAOS Mailing Address 225 Via Rancho City San Clemente FEC ID number of contributing federal political committee. Name of Employer (for Individual) COMG Receipt For: Primary General Other (specify) ▼	State CA CC Occu	rganization Name Zip Code 92672 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle C. Callewart, Craig, C, , MD, FAA Mailing Address 3825 Stratford Ave City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	OS State TX C Occu Orth	rganization Name Zip Code 75205-2814 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1250.00	Date of Receipt
federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General	Occu Orth Aggregate	opaedic Surgeon Year-to-Date ▼ 1250.00	

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and s or for commercial purposes, other than using th	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Leffers, Kevin, John, , MD Mailing Address 4922 Stratford Rd City Fort Wayne FEC ID number of contributing federal political committee. Name of Employer (for Individual) Fort Wayne Orthopaedics Receipt For: Primary General Other (specify) ▼	State Zip Code IN 46807-2947 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 300.00 300.00	Date of Receipt
Full Name of Individual (Last, First, Middle In B. Horne, Robert, H, , MD,FAAOS Mailing Address 3015 E Mt Jordan Rd City Sandy FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: Primary General Other (specify) ▼	State Zip Code UT 84092-3384 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle In C. Sisko, Zachary, , , MD,FAAOS Mailing Address 95 Woodhaven Dr City Pittsburgh FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	Name State Zip Code PA 15228 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00 250.00	Date of Receipt 10 / 27 / 2021 Transaction ID : 11146719 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		1350.00

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and Sta or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS
✓ Full Name of Individual (Last, First, Middle Initia A. Arend, Thomas, E, , Jr, Mailing Address 9400 W Higgins Rd City Rosemont FEC ID number of contributing federal political committee. Name of Employer (for Individual) AAOS Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code IL 60018 C Occupation (for Individual) Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt 10 28 2021 Transaction ID : 11146722 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Initia B. Panchbhavi, Vinod, Kumar, , MD,FAA Mailing Address 1165 Rymers Switch Lane		Date of Receipt
City Friendswood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Univ of Texas Medical Branch Receipt For: Primary General Other (specify) ▼	State Zip Code TX 77546 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 368.00	Transaction ID : 11146724 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Initia C. Teuscher, David, Dean, , MD,FAAC Mailing Address 6330 Cobblestone Lane City Arlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional)		418.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11a 11b 11b 11c 12 13 14 15 16 17
	nd Statements may not be sold or used by any p g the name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Iorio, Richard, , , MD,FAAOS Mailing Address 31 Prince St City Beverly FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	e Initial) or Full Organization Name State Zip Code MA 01915 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00 840.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Damsgaard, Christopher, W, , M Mailing Address 17 Stoneymeade Way City Acton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Tufts Medical Center Receipt For: Primary General Other (specify) ▼		Date of Receipt 10 28 2021 Transaction ID : 11146728 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle C. Moore, David, R, , MD, FAAOS Mailing Address 2004 Hayes Street Suite 200 Suite 200 City Nashville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Elite Sports Medicine Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	I)	1334.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		IE NUMBER: PAGE 287 OF 551	
ITEMIZED RECEIPTS			for each category of the	(check of X 11a	
			Detailed Summary Page	11a	11b 11c 12 14 15 16 17
	y information copied from such Reports and Sta			erson for the	e purpose of soliciting contributions
	for commercial purposes, other than using the n				
\backslash	NAME OF COMMITTEE (In Full)	A	an Association of Onthe		Current DAC of AAOC
	Political Action Committee of the	America	an Association of Ortho	opaedic	SurgeonsPAC of AAOS
/	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		
Α.	Wynder, Steven, G, , MD, FAAOS	Date	of Receipt		
	Mailing Address 5290 W 612 N				M / D D / Y Y Y Y 02 2021
	City	State	Zip Code	11	02 2021 nsaction ID : 11146775
	Huntington	IN	46750		int of Each Receipt this Period
	FEC ID number of contributing				
	federal political committee.	С			84.00
	Name of Employer (for Individual)	Occ	upation (for Individual)		Memo Item
	Parkview Ortho Hospital	Orth	nopaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		504.00	1	
	Other (specify) v		504.00	1	
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		
Β.				Date	of Receipt
	Mailing Address 4799 Olde Village Cv				M / D D / Y Y Y Y
	City	State	Zip Code		
	Atlanta	GA	30338-5055		nsaction ID : 11146776 Int of Each Receipt this Period
	FEC ID number of contributing				
	federal political committee.	C			250.00
	Name of Employer (for Individual)	Occ	upation (for Individual)		Memo Item
	Emory University	Orthopaedic Surgeon			
	Receipt For:	Aggregate	Year-to-Date 🔻		
	Other (specify) ▼	· · · ·	1000.00	1	
			1000.00		
_	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		
C.	Knight, Bradford, S, , MD, FAAOS				of Receipt
	Mailing Address 11701 Pine Tree Dr			11	
	City	State	Zip Code	Trai	nsaction ID : 11146777
	Fairfax	VA	22033-2712	Amou	int of Each Receipt this Period
	FEC ID number of contributing	С			250.00
	federal political committee.				, , ,
	Name of Employer (for Individual)	Occi	upation (for Individual)		Memo Item
	Prince William Orthopaedics	Orth	opaedic Surgeon		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		1000.00		
Γ	· · · · · · · · · · · · · · · · · · ·				504.00
s	UBTOTAL of Receipts This Page (optional)		••••••		584.00
1					

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Init A. Rana, Adam, J, , MD, FAAOS Mailing Address 12 Landing Woods Ln City Falmouth FEC ID number of contributing federal political committee. Name of Employer (for Individual) Maine Medical Center Receipt For: Primary General Other (specify) ▼	State ME C Occu Orth	rganization Name Zip Code 04105-1948 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1200.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init B. Smith, Eric, Louis, , MD,FAAOS Mailing Address 1573 Beacon Street City Waban FEC ID number of contributing federal political committee. Name of Employer (for Individual) Boston Medical Clinic Receipt For: Primary General Other (specify) ▼	State MA C	rganization Name Zip Code 02468 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 924.00	Date of Receipt
Full Name of Individual (Last, First, Middle Init C. Dowd, Thomas, Charles, , MD, FA Mailing Address 407 Country Ln City San Antonio FEC ID number of contributing federal political committee. Name of Employer (for Individual) Department of Orthopaedics and Rehabil Receipt For: Primary General Other (specify)	AAOS State TX C Occu Orth	rganization Name Zip Code 78209-2320 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			434.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 289 OF 55' (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Constant only only Image: Constant only <
Any information copied from such Reports and or for commercial purposes, other than using th		
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Watson, Troy, S, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 75 Kittansett Loop	State Zip Code	11 02 2021 Transaction ID : 11146781
Henderson	NV 89052-6694	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Desert Orthopaedic Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle Ir a. Sanders, Mark, Seltzer, , MD,FAAC		Date of Receipt
Mailing Address 11315 Bothwell Way		11 02 2021
City Houston	State Zip Code TX 77024	Transaction ID : 11146804
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle Ir Milia, Marc, J, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 1386 Stanley		11 / D D / Y Y Y Y Y 2021
City Birmingham	State Zip Code MI 48009	Transaction ID : 11146994 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) Oakland Regional Hospital	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)	·	1500.00
TOTAL This Period (last page this line number	only)	

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FOR LINE NUMBER:

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ITEMIZED RE	CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check	a	ne)] 11b] 14	11c	12	17
			y not be sold or used by any ddress of any political committe	person for t	the pur	pose of	soliciting	contribu	tions
NAME OF COMM Political Act		e America	an Association of Orth	nopaedio	c Sur	geon	sPA(C of AA	AOS
A. Full Name of Indi Everman, Davi Mailing Address	rganization Name	М	e of Re	eceipt	/ Y	y y 2021	Y		
City Myrtle Beach		State SC	Zip Code 29572			ion ID :	1114699 eceipt th		
FEC ID number of federal political co	0	С				-y		250.	00
Name of Employe Self Employed Receipt For:	er (for Individual)	Orth	upation (for Individual) opaedic Surgeon		Mem	o Item			
Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 1000.00						
B. Hembree, Wa	ividual (Last, First, Middle Init alter, Chad, , MD,FAAC		rganization Name	Date	e of Re	eceipt			
Mailing Address 204 Witherspoon Rd			State Zip Code			11 / D D / Y Y Y Y 2021			
City Baltimore		MD	21212				1114737 eceipt th	7 is Period	
FEC ID number of federal political co	0	C				-		250.	00
	er (for Individual) baedics and Sports Med		upation (for Individual) lopaedic Surgeon		Mem	o Item			
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ , 250.00						
c. Weber, Dan	ividual (Last, First, Middle Init iel, T, , MD, FAAOS	ial) or Full Or	rganization Name	Date	e of Re	eceipt			
	1230 Braeburn Ave				м 11	03	JL	2021	Y
City Flossmoor		State IL	Zip Code 60422				1114740 eceipt th	is Period	
FEC ID number of federal political co	0	С				<u>y</u>		500.	00
Name of Employe Self Employed Receipt For:	er (for Individual)	Ortho	upation (for Individual) opaedic Surgeon		Mem	o Item			
Primary Other (spec	General cify)	Aggregate	Year-to-Date ▼ 500.00						
SUBTOTAL of Rec	eipts This Page (optional)			► C		,	,	1000.	00
TOTAL This Period	l (last page this line number o	only)					-		

SCHEDULE A (FEC Form 3X)	Use separate schedule	
TEMIZED RECEIPTS	for each category of th Detailed Summary Pag	
		any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
> Political Action Committee of		Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Stokesbary, Steven, J, , MD,FAAOS Mailing Address 627 Arrowhead Ct	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 04 2021 Transaction ID : 11147401
Dakota Dunes FEC ID number of contributing federal political committee.	SD 57049	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
CNOS Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 924.0	00
Full Name of Individual (Last, First, Middle Black, David, Albritton, , MD, PhD	Initial) or Full Organization Name	Date of Receipt
Mailing Address 12112 Fairway Drive		11 04 2021
City Little Rock	State Zip Code AR 72212	Transaction ID : 11147402 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Univ of Arkansas	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 924.	00
Full Name of Individual (Last, First, Middle Prohaska, Matthew, G, , MD,FA		Date of Receipt
Mailing Address 69 Griggs Hill Road		11 04 2021
City Danville	StateZip CodeVT05828	Transaction ID : 11147403 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) NVRH Orthopaedic Clinic Receipt For:	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate Year-to-Date ▼ 588.0	00
SUBTOTAL of Receipts This Page (optional)	·	
TOTAL This Period (last page this line numb	er only)	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Bostick, Robert, Douglas, , MD, FAAOS Mailing Address 213 Sena Drive	ial) or Full O	rganization Name	Date of Receipt
	City Metairie	State LA	Zip Code 70005	Transaction ID : 11147503 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Jefferson Orthopedic Clinic		upation (for Individual) Iopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
в.	Full Name of Individual (Last, First, Middle Init Topping, Richard, Edmund, , MD,FA Mailing Address 1502 Harrison Ave Ste 101		rganization Name	Date of Receipt
	City Elkins FEC ID number of contributing federal political committee.	State WV	Zip Code 26241-3497	11 04 2021 Transaction ID : 11147510 Amount of Each Receipt this Period 250.00
	Name of Employer (for Individual) Tygart Valley Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
c.	Full Name of Individual (Last, First, Middle Init Waanders, Nicholas, A, , MD,PhD		rganization Name	Date of Receipt
	Mailing Address 2352 Willow Bend Circle	01-1-	7.0.0.1	11 / D D / Y Y Y Y 11 / D5 / 2021
	City Springdale	State AR	Zip Code 72762-7440	Transaction ID : 11147901 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer (for Individual) Self Employed Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	1
s	UBTOTAL of Receipts This Page (optional)			750.00
Т	OTAL This Period (last page this line number	only)		

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ITEMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one) Image: 11 a model 12 a model 13 model 14 model 15 model 11 a model 11 a model 12 a model 13 model 14 model <t< th=""></t<>
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and ac	dress of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Political Action Committee of	the America	IN Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Lintecum, Neal, D, , MD, FAAOS	Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 789 N 1500 Road			11 05 2021
City Lawrence	State KS	Zip Code 66049-9194	Transaction ID : 11147908 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer (for Individual) Self Employed		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2200.00	
B. Full Name of Individual (Last, First, Middle Brolin, Tyler, James, , MD,FAAOS Mailing Address 9294 Ingleside Farms Drive	S Í	ganization Name	Date of Receipt
City	State	Zip Code	11 05 2021 Transaction ID : 11147909
Germantown	TN	38139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1000.00	
Full Name of Individual (Last, First, Middle C. Steubs, John, Arthur, , MD, FAA		ganization Name	Date of Receipt
Mailing Address 7032 Oak Pointe Curve			11 05 / Y Y Y Y 2021
City Bloomington	State MN	Zip Code 55348	Transaction ID : 11150151 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) University of MN Department of Orthope		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional).			▶ 1450.00

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 294 OF 551
ITEMIZED RECEIPTS			for each category of the	(check only one)
			Detailed Summary Page	
	ny information copied from such Reports and Sta			
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	Amorio	an Accordiation of Orth	opaedic SurgeonsPAC of AAOS
	Political Action Committee of the	America		opaeulo SurgeonsPAC of AAOS
<u> </u>	Full Name of Individual (Last, First, Middle Initi Schmale, Gregory, A, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt
Mailing Address 6515 126th Ave NE				
				11 06 2021
	City	State	Zip Code	Transaction ID : 11150633
	Kirkland	WA	98033	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	000	upation (for Individual)	Memo Item
	Seattle Children's		nopaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General	Ayyreyale		
	Other (specify) V		924.00	
	Full Name of Individual (Last, First, Middle Initi Hasan, Syed, Ashfaq, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
Ь.	Mailing Address 7730 Elmwood Road			
				11 06 2021
	City	State	Zip Code	Transaction ID : 11150634
	Fulton	MD	20759	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) University of Maryland School of Medic		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		4000.00	1
	Other (specify)		, 1000.00	1
	Full Name of Individual (Last, First, Middle Initi Burke, Charles, J, , III, MD, F	al) or Full O	rganization Name	Date of Receipt
5.	Mailing Address 200 Delafield Rd			
	Ste 4010			11 06 2021
	City	State	Zip Code	Transaction ID : 11150635
	Pittsburgh	PA	15215-3235	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	UPMC		opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		924.00	1
	Other (specify)		524.00	1
s	UBTOTAL of Receipts This Page (optional)			418.00
⊢	· · /			_

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

Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee c	of the America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Mide A. Archdeacon, Michael, T, , MD,FAA		rganization Name	Date of Receipt
Mailing Address 4538 Philnoll Dr			11 06 / Y Y Y Y 2021
City Cincinnati	State OH	Zip Code 45247-5079	Transaction ID : 11150636 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) UC Dept of Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	1
B. Gomez, Gregory, , , MD Mailing Address 6201 Moonfield Dr	lle Initial) or Full O	rganization Name	Date of Receipt
City	State	Zip Code	11 06 2021
Huntington Beach	CA	92648	Transaction ID : 11150637 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) Emanate Health		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 550.00]
Full Name of Individual (Last, First, Mide C. Green, Daniel, William, , MD,		rganization Name	Date of Receipt
Mailing Address 535 E 70th St			11 07 2021
City New York	State NY	Zip Code 10021	Transaction ID : 11150640 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		175.00
Name of Employer (for Individual) Hosp for Special Surgery		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1925.00]
SUBTOTAL of Receipts This Page (option	al)		475.00

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

Use separate schedule(s)

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ITE	MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
or fo	information copied from such Reports and Stat or commercial purposes, other than using the n IAME OF COMMITTEE (In Full) Political Action Committee of the	ame and ad	ddress of any political committee	
/F	ull Name of Individual (Last, First, Middle Initial Mosley, Emmett, Wayne, , MD,FAAOS,F			Date of Receipt
	failing Address 220 Thompson Pl			11 07 2021
	ity Roswell	State GA	Zip Code 30075-3522	Transaction ID : 11150641 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		84.00
	lame of Employer (for Individual) SPIRUS		pation (for Individual) opaedic Surgeon	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	
	ull Name of Individual (Last, First, Middle Initial Kiner, Dirk, W, , MD,FAAOS) or Full Or	ganization Name	Date of Receipt
_	failing Address 449 Canyon Springs Dr			11 07 Y Y Y Y 2021
	iity Iixson	State TN	Zip Code 37343-2387	Transaction ID : 11150642 Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		84.00
N S	lame of Employer (for Individual) outhern Orthopaedic Trauma Surgeons		upation (for Individual) opaedic Surgeon	Memo Item
R	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	
	ull Name of Individual (Last, First, Middle Initial Gallant, Gregory, G, , MD,MBA,FAA		ganization Name	Date of Receipt
_	lailing Address 3588 Wellsford Lane	1		11 07 Y Y Y Y 2021
	ity Doylestown	State PA	Zip Code 18902	Transaction ID : 11150643 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			83.33
Name of Employer (for Individual) Rothman Institute Receipt For:		Occupation (for Individual) Orthopaedic Surgeon		Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 749.97	
SU	BTOTAL of Receipts This Page (optional)			251.33
то	TAL This Period (last page this line number on	ly)		

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each catego Detailed Summa	ry of the
		sed by any person for the purpose of soliciting contributions ical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Associatio	n of Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini A. Lane, Joseph, M, , MD,FAAOS Mailing Address 535 E 86th St Apt 14F City New York City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Hosp for Special Surgery Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code NY 10028 C Occupation (for Individu Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt Tansaction ID : 11150644 Amount of Each Receipt this Period Ial) T50.00
Full Name of Individual (Last, First, Middle Ini B. Eggers, Ryan, Michael, , MD,MA Mailing Address 652 S Medical Center Dr Suite 120	Date of Receipt	
City St George FEC ID number of contributing federal political committee. Name of Employer (for Individual) Southwest Orthopedics and Sports Medic Receipt For: Primary General Other (specify) ▼	State Zip Code UT 84790 C Occupation (for Individu Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11150650 Amount of Each Receipt this Period Jal) 500.00
Full Name of Individual (Last, First, Middle Ini C. Leddy, Michael, J, , III, MD,FA Mailing Address 3444 Masonic Dr City Alexandria FEC ID number of contributing federal political committee. Name of Employer (for Individual) Central Louisiana Surgical Hospital Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code LA 71301 C Occupation (for Individu Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt Date of Receipt 11 08 2021 Transaction ID : 11150656 Amount of Each Receipt this Period Jal) Memo Item
SUBTOTAL of Receipts This Page (optional)		

FEC Schedule A (Form 3X) Rev. 06/2016

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and s or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Mejia, Alfonso, , , MD,MPH,FAA Mailing Address 5332 South Shore Drive City Chicago	itial) or Full O	rganization Name Zip Code 60615	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Illinois Association of Orthopedic Sur Receipt For:	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1764.00	Memo Item
Full Name of Individual (Last, First, Middle In Drinkwater, Christopher, John, , ME Mailing Address 85 Barrington St City Rochester FEC ID number of contributing federal political committee. Name of Employer (for Individual) University of Rochester Receipt For: Primary General Other (specify) ▼	C Occ Occ	rganization Name Zip Code 14607-2240 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle In Curtis, Benjamin, David, , MD, FA Mailing Address 1990 E Browning Ave City Salt Lake Cty FEC ID number of contributing federal political committee. Name of Employer (for Individual) Utah Orthopaedic Assoc. Receipt For: Primary General Other (specify)	AAOS State UT C Occu Orth	rganization Name Zip Code 84108-2274 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 11 08 2021 Transaction ID : 11151921 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			1334.00

S	CHEDULE A (FEC Form 3X)		Lise separate sebedulo(a)	FOR LINE NUMBER: PAGE 299 OF 55
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
				erson for the purpose of soliciting contributions
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	e to solicit contributions from such committee.
\backslash	NAME OF COMMITTEE (In Full)		on Approxistion of Out	prodio Surgeore DAO of AAOO
/	Political Action Committee of th	e America	an Association of Ortho	opaedic SurgeonsPAC of AAOS
/	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	
Α.	Clain, Michael, R, , MD, FAAOS			Date of Receipt
	Mailing Address 9 Indian Head Road			M M / D D / Y Y Y Y Y 11 09 2021
	City	State	Zip Code	Transaction ID : 11151932
	Riverside	СТ	06878	Amount of Each Receipt this Period
	FEC ID number of contributing	0		
	federal political committee.	C		84.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Orthopaedic & Neurosurgery Specialists	Orth	nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		924.00	1
				1
	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	
Β.	Silverman, Lance, M, , MD, FAAOS			Date of Receipt
	Mailing Address 2774 W Lake of the Isles Pkw	у		11 09 2021
	City	State	Zip Code	
	Minneapolis	MN	55416	Transaction ID : 11151933 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		250.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Silverman Orthopaedics		nopaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		1000.00	1
	Other (specify) v		1000.00	1
	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	
C.	Nahigian, Kevin, K, , MD, FAAOS			Date of Receipt
	Mailing Address 85 Red Bay Rd			M M / D D / Y Y Y Y 11 11 2021
	City	State	Zip Code	Transaction ID : 11152543
	Elgin	SC	29045	Amount of Each Receipt this Period
	FEC ID number of contributing	C		84.00
	federal political committee.	С		
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	Carolina Shoulder & Knee Specialists		opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)		924.00	1
			Apr. Apr. An.	1
Г				
s	UBTOTAL of Receipts This Page (optional)		•	418.00
<u> </u>				-

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

1.

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 300 OF 55 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the		person for the purpose of soliciting contributions et a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Glassman, Andrew, H, , MD,MS,FAAC		Date of Receipt
Mailing Address 126 North Drexel Avenue	State Zip Code	11 / 11 / 2021 Transaction ID : 11152544
Columbus	OH 43209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Ohio State University Wexner Medical C	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00]
Full Name of Individual (Last, First, Middle I B. Kaper, Bertrand, Paul, , MD, FAAC		Date of Receipt
Mailing Address 11227 E Paradise Ln		11 09 2021
City Scottsdale	State Zip Code AZ 85255-8918	Transaction ID : 11152545 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer (for Individual) Central Arizona Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle I Bernard, Johnathan, , , MD, MPI		Date of Receipt
Mailing Address 21549 Glebe View Dr		M M / D D / Y Y Y Y 11 12 2021
City Broadlands	StateZip CodeVA20148	Transaction ID : 11152735 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) National Sports Medicine Institute	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 924.00	
SUBTOTAL of Receipts This Page (optional)	·	668.00
TOTAL This Period (last page this line numbe	er only)	

Use separate schedule(s)

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ITEMIZED RECEIPTS	for	each category of the tailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not the name and addres	be sold or used by any p s of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American A	ssociation of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Marinello, Patrick, Gaetano, , MD, FA Mailing Address 43 Bradhaven Rd City Slingerlands FEC ID number of contributing federal political committee. Name of Employer (for Individual) The Bone and Joint Center Receipt For: Primary General Other (specify)	AOS State NY C Occupatio	tip Code 12159 n (for Individual) dic Surgeon	Date of Receipt
B. Full Name of Individual (Last, First, Middle Dodds, Julie, A, , MD,FAAOS Mailing Address 2603 90th Ave			Date of Receipt
City Lone Rock FEC ID number of contributing federal political committee. Name of Employer (for Individual) Michigan State University	IA C Occupatio	ip Code 50559 n (for Individual) dic Surgeon	Transaction ID : 11152737 Amount of Each Receipt this Period 84.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-1]
C. Hull Name of Individual (Last, First, Middle Means, Kenneth, Robert, , Jr, M Mailing Address 2908 Crabapple Ln		ation Name	Date of Receipt
City Ellicott City		ïp Code 21042	Transaction ID : 11152738 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) Union Memorial Hospital Receipt For: Primary General Other (specify)		n (for Individual) lic Surgeon to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		· · · · · · · · · · · · · · · · · · ·	418.00

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
A. Full Name of Individual (Last, First, Middle Braaton, Paul, J, , MD,FAAOS Mailing Address 1335 Coffee Rd Ste 100 City	State	Zip Code	Date of Receipt 11 / 12 / 2021 Transaction ID : 11152739
Modesto FEC ID number of contributing federal political committee.	CA	95355	Amount of Each Receipt this Period
Name of Employer (for Individual) OrthoMed Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) hopaedic Surgeon Year-to-Date ▼ 924.00	Memo Item
B. Espinoza, Luis, M, , MD, FAAOS Mailing Address 5 Savannah Ridge Lane	Initial) or Full C		Date of Receipt
City Metairie FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic Center for Sports Medicine Receipt For: Primary General Other (specify) ▼	Ort	Zip Code 70001 cupation (for Individual) hopaedic Surgeon Year-to-Date 924.00	Transaction ID : 11152740 Amount of Each Receipt this Period 84.00 Memo Item
C. Schneider, Scott, B, , MD,FAAC Mailing Address 1180 Mary Hill Circle		Organization Name	Date of Receipt
City Hartland FEC ID number of contributing federal political committee.	State WI	Zip Code 53029	Transaction ID : 11152741 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Orthopaedic Associates of Wisconsin Receipt For: Primary General Other (specify)	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line numb			418.00

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	n Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia John, Thomas, K, , MD,FAAOS Mailing Address 522 Eastbrook Rd	al) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	Transaction ID : 11152742
	Ridgewood	NJ	07450-2110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
	Active Orthopedics and Sports Medicine	Ortho	ppaedic Surgeon	
	Receipt For:	Aggregate Y	lear-to-Date ▼	
	Other (specify) ▼		924.00	
В.	Full Name of Individual (Last, First, Middle Initia) Watling, Jonathan, , , MD	al) or Full Org	ganization Name	Date of Receipt
	Mailing Address 65 Starboard Reach			11 12 2021
	City	State	Zip Code	Transaction ID : 11152743
	Yarmouth	ME	04096	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Columbia University		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For:	Aggregate Y	/ear-to-Date ▼	
	Primary General Other (specify) ▼		, 1000.00	
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Mansfield, David, J, , MD,FAAOS	al) or Full Org	ganization Name	Date of Receipt
	Mailing Address 5019 Montoya Rd			11 / D D / Y Y Y Y 11 12 2021
	City El Paso	State TX	Zip Code 79922	Transaction ID : 11152744
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 84.00
	Name of Employer (for Individual) El Paso Orthopaedic Surgery Group		pation (for Individual) paedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 924.00	
⊢	UBTOTAL of Receipts This Page (optional)			418.00

Use separate schedule(s)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	\mathbf{X} 11a11b11c121314151617
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Hogan, Kathleen, Anne, , MD, FAAOS Mailing Address 125 Castle Hill Rd City Windham FEC ID number of contributing federal political committee. Name of Employer (for Individual) NH Ortho Ctr Receipt For: Primary General Other (specify) ▼	S State NH C Occu	rganization Name Zip Code 03087 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 750.00	Date of Receipt
B. Full Name of Individual (Last, First, Middle Mailing Address 904 Tuscany Way		rganization Name	Date of Receipt
City Rockford FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ortholllinois Receipt For: Primary General Other (specify) ▼	Orth	Zip Code 61107	Transaction ID : 11152890 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle Parr, Reagan, R, , MD, FAAOS Mailing Address 121 Sunchase Ct City Johnson City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	State TN C Occu Orth	Zip Code 37615 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt MIM / 2021 Transaction ID : 11152986 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			1750.00

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ITEMIZED RECEIPTS	-	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			13 14 15 16 17 person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	g the name and a	doress of any political committe	se to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Tracy, Sean, C, , MD, FAAOS		rganization Name	Date of Receipt
Mailing Address W211 N5455 Carters Cro			M M / D D / Y Y Y Y 11 12 2021
City Menomonee Falls	State WI	Zip Code 53051	Transaction ID : 11152988 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		550.00
Name of Employer (for Individual) Midwest Orthopedic Specialty Hospital		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
Full Name of Individual (Last, First, Middle B. Krueger, Chad, A, , MD,FAAOS	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 705 Kyle Dr			11 / D D / Y Y Y Y Y 11 13 2021
City Ambler	State PA	Zip Code 19002	Transaction ID : 11152989
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Rothman Institute		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00]
Full Name of Individual (Last, First, Middle C. James, Jeremy, R, , MD,FAAC		rganization Name	Date of Receipt
Mailing Address 7 Briar Hollow St			11 13 2021
City Covington	State LA	Zip Code 70433-4511	Transaction ID : 11152991 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual) DISC of Louisiana Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optiona	l)		▶ 734.00
TOTAL This Period (last page this line num	ber only)		

Use separate schedule(s)

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	Political Action Committee of the			ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Courtney, Paul, Maxwell, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 902 S Front St			11 / D D / Y Y Y Y 11 14 2021
	City Philadelphia	State PA	Zip Code 19147	Transaction ID : 11152994 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Rothman Institute		upation (for Individual) lopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	
B	Full Name of Individual (Last, First, Middle Initi Carter, Ralph, E, , III, MD, F	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 201 Sterling Ln			11 14 2021
	City Laurinburg	State NC	Zip Code 28352	Transaction ID : 11152995 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initi Wolf, Megan, Rianne, , MD	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 5816 Zinfandel St			11 / D D / Y Y Y Y 2021
	City Winston-Salem	State NC	Zip Code 27106	Transaction ID : 11152997 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) University of Connecticut Receipt For:	Ortho	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 450.00	
s	UBTOTAL of Receipts This Page (optional)		•••••	584.00
т	OTAL This Period (last page this line number o	nly)	••••••	

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stor for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Guevara, Benjamin, G, , MD, FAAOS Mailing Address 280 Remington Dr City Mandeville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ochsner Health Center Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code LA 70448 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi B. Service, Benjamin, , , MD,FAAOS Mailing Address 8710 Crestgate Circle City Orlando FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orlando Health Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code FL 32819 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 672.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi C. Grimm, Matthew, R, , MD, FAAOS Mailing Address 920 Avenue B City Marrero FEC ID number of contributing federal political committee. Name of Employer (for Individual) Jefferson Orthopaedic Clinic Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional)		418.00

FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Forman, Scott, K, , MD, FAAOS Mailing Address 25 High Water City Newport Coast FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	CA CA Occu Orth	rganization Name Zip Code 92657-2149 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Comisar, Bruce, Rodney, , Jr, MD Mailing Address 7786 Brandon Rd City New Albany FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoNeuro Receipt For: Primary General Other (specify) ▼	, FA State OH C Occu Orth	Zip Code 43054-9005 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle I C. Lopez, David, Vincent, , MD,FA/ Mailing Address 27 Courtney Ct City Freehold FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Sports Medicine Speciali Receipt For: Primary General Other (specify)	AOS State NJ C Occu Orth	rganization Name Zip Code 07728 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 840.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional).			1334.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Hodges, Peter, T, , MD,FAAOS Mailing Address 1600 Charles PI City Manhattan FEC ID number of contributing federal political committee. Name of Employer (for Individual) OSMC	State KS C	rganization Name Zip Code 66502 upation (for Individual) opaedic Surgeon	Date of Receipt 11 01 2021 Transaction ID : 11153758 Amount of Each Receipt this Period 250.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle B. Urband, Lindsey, , , MD,FAAOS Mailing Address 15066 Almond Orchard Lan Suite 403 City San Diego FEC ID number of contributing federal political committee. Name of Employer (for Individual) San Diego Hand Specialists Receipt For: Primary General Other (specify) ▼	State CA CC Occu	Zip Code 92131 upation (for Individual) iopaedic Surgeon Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle C. Grosso, Matthew, , , MD Mailing Address 5 Pembroke Dr City Avon FEC ID number of contributing federal political committee. Name of Employer (for Individual) Advanced Orthopaedics New England Receipt For: Primary General Other (specify)	State CT C Occu Orth	rganization Name Zip Code 06001 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 252.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number			418.00

FOR LINE NUMBER:

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551

13 14 15 16 17 for the purpose of soliciting contributions blicit contributions from such committee. edic SurgeonsPAC of AAOS Date of Receipt
Date of Receipt
· · · · · · · · · · · · · · · · · · ·
11 03 2021 Transaction ID : 11153763 Amount of Each Receipt this Period 84.00 Memo Item
Date of Receipt
Date of Receipt 11 / 16 / 2021 Transaction ID : 11153766 Amount of Each Receipt this Period 1000.00 Memo Item
/

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 311 OF
ITEMIZED RECEIPTS			for each category of the	(check only one)
			Detailed Summary Page	
	y information copied from such Reports and Sta			person for the purpose of soliciting contribution
	for commercial purposes, other than using the r	name and a	ddress of any political committe	ee to solicit contributions from such committee.
\backslash	NAME OF COMMITTEE (In Full) Political Action Committee of the	Amorio	an Accordiation of Orth	oppodic Surgeone BAC of AAC
	Folitical Action Committee of the	America		iopaedic SurgeonsPAC of AAC
v	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
A. Morawski, David, R, , MD,FAAOS				Date of Receipt
	Mailing Address 2525 Kaneville Rd			11 16 2021
	City	State	Zip Code	Transaction ID : 11153770
	Geneva	IL	60134-2578	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.	U		
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	Fox Valley Orthopedic Associate	Orth	nopaedic Surgeon	
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) V		1000.00	
			-ge	-
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
В.	McCulloch, Patrick, T, , MD, FAAOS			Date of Receipt
	Mailing Address 307 Buckingham Drive			11 17 2021
	City	State	Zip Code	Transaction ID : 11153880
	Venetia	PA	15367	Amount of Each Receipt this Period
	FEC ID number of contributing	С		84.00
	federal political committee.			
	Name of Employer (for Individual) Advanced Ortho & Rehab		upation (for Individual)	Memo Item
	Receipt For:		nopaedic Surgeon	
	Primary General	Aggregate	Year-to-Date ▼	-
	Other (specify) V	L	924.00	
	Tell Manage of Individual (Land, Tind, Middle, Indi			
	Full Name of Individual (Last, First, Middle Initia Greene, Robert, Neil, , MD, FAAOS		rganization Name	Date of Receipt
	Mailing Address 1211 N 16th Ave			M M / D D / Y Y Y Y Y
	City	State	Zip Code	11 17 2021
	Yakima	WA	98902	Transaction ID : 11153881 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		84.00
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
		opaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)	· · ·	924.00	
				- 1
s	UBTOTAL of Receipts This Page (optional)			▶ 1168.00

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

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 312 OF 55 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political commi	y person for the purpose of soliciting contributions ttee to solicit contributions from such committee. thopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ini Olsen, Adam, S, , MD Mailing Address 3686 Washington Street Apt 2520 City Boston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code MA 02130 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 462.00 462.00	Date of Receipt
Full Name of Individual (Last, First, Middle Ini B. Hettrich, Carolyn, , , MD,MPH,FAA Mailing Address 28A Miller Hill Rd City Dover FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code MA 02030-2332 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 924.00 924.00	Date of Receipt Date of Receipt 11 05 2021 Transaction ID : 11153925 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle Ini Holmes, S, Wendell, , Jr, MD,FAA Mailing Address 101 Belleclave Rd City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Palmetto Health Receipt For: Primary General Other (specify)		Date of Receipt T11 05 2021 Transaction ID : 11153926 Amount of Each Receipt this Period 100.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the Ame	erican Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or F A. Schmitz, Matthew, R, , MD,FAAOS Mailing Address 111 Ottawa Run City Statt San Antonio TX FEC ID number of contributing federal political committee. C		Date of Receipt 11 05 2021 Transaction ID : 11153927 Amount of Each Receipt this Period
Name of Employer (for Individual) San Antonio Military Medical Center	Occupation (for Individual) Orthopaedic Surgeon gate Year-to-Date ▼ 1050.00	Memo Item
Full Name of Individual (Last, First, Middle Initial) or F B. Sheehan, John, P, , MD,FAAOS Mailing Address 6621 Cuming St City Stat Omaha NE		Date of Receipt 11 08 2021 Transaction ID : 11153929 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Boys Town Aggre Receipt For: Aggre Other (specify) ▼ C	Occupation (for Individual) Orthopaedic Surgeon gate Year-to-Date ▼ 924.00	Memo Item
Full Name of Individual (Last, First, Middle Initial) or F C. Chutkan, Norman, Barrington, , MD,FAA Mailing Address 1 E Lexington Ave Unit 1404	Date of Receipt	
City Stat Phoenix AZ FEC ID number of contributing C federal political committee. C	e Zip Code 85012	Transaction ID : 11153931 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) The CORE Institute Receipt For: Aggre Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon gate Year-to-Date ▼ 924.00	Memo Item
SUBTOTAL of Receipts This Page (optional)	· · ·	268.00

Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	
<u> </u>				13 14 15 16 17	
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
V	Political Action Committee of the	e America	an Association of Urthe	ppaedic SurgeonsPAC of AAOS	
Α.	Full Name of Individual (Last, First, Middle Init Ritchie, William, L, , MD,MBA,FAA	ial) or Full C	organization Name	Date of Receipt	
	Mailing Address 2100 Louisiana Blvd Ste 410				
	City	State	Zip Code	11 08 2021 Transaction ID : 11153932	
	Albuquerque	NM	87110	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
	New Mexico Orthopaedics	Orth	nopaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		900.00		
			-ge		
D	Full Name of Individual (Last, First, Middle Init More, Robert, Cameron, , MD, FAAC		organization Name	Data of Descipt	
D.	Mailing Address 8100 Wescott Drive	55		Date of Receipt	
	Suite 101			11 09 2021	
	City	State	Zip Code	Transaction ID : 11153933	
	Flemington	NJ	08822	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		84.00	
	Name of Employer (for Individual) MidJersey Orthopaedics		upation (for Individual) hopaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		924.00		
С.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Smith, Micah, Warren, , MD, FAAOS			Date of Receipt	
	Mailing Address 103 Hathaway Road			M M / D D / Y Y Y Y 11 09 2021	
	City	State IN	Zip Code	Transaction ID : 11153934	
	Fort Wayne		46845	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer (for Individual) Orthopaedics Northeast		upation (for Individual) Iopaedic Surgeon	Memo Item	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)		1000.00		
			-gp	1	
s	UBTOTAL of Receipts This Page (optional)			1334.00	
т	OTAL This Period (last page this line number of	only)	••••••		

Use separate schedule(s)

FOR LINE NUMBER:

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551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma	I ay not be sold or used by any p address of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
<u>,</u>	NAME OF COMMITTEE (In Full)			
\rangle	· · · · ·	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Turnbaugh, Thomas, R, , MD, FAAOS	tial) or Full C	Organization Name	Date of Receipt
	Mailing Address 1616 Southridge Dr Ste 202	11 10 / Y Y Y Y 2021		
	City Jefferson City	State MO	Zip Code 65109	Transaction ID : 11153935 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Turnbaugh Surgical Associates		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	1
В.	Full Name of Individual (Last, First, Middle Ini Cimino, William, Gerard, , MD,FAAC		Organization Name	Date of Receipt
	Mailing Address 52 Beach Road Suite 207 City	State	Zip Code	11 / D D / Y Y Y Y 11 12 2021
	Fairfield	CT	06824	Transaction ID : 11153936 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Beach Road Orthopaedics		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	
с.	Full Name of Individual (Last, First, Middle Ini Parsley, Brian, S, , MD,FAAOS,F	tial) or Full C	Organization Name	Date of Receipt
	Mailing Address 302 Pine Shadows Dr Suite 2400			11 / D D / Y Y Y Y Y 11 15 / 2021
	City Houston	State TX	Zip Code 77056	Transaction ID : 11153937 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) UT Health Physicians		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 924.00	
s	UBTOTAL of Receipts This Page (optional)		•••••	668.00
Т	OTAL This Period (last page this line number	only)		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)	
Any information copied from such Reports and S or for commercial purposes, other than using the		person for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orth	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Init A. Damalas, Dino, , , MBA Mailing Address 9400 W Higgins Rd City Rosemont FEC ID number of contributing federal political committee. Name of Employer (for Individual) AAOS Receipt For: Primary General Other (specify) ▼	tial) or Full Organization Name State Zip Code IL 60018-4975 C Occupation (for Individual) Chief Operating Officer Aggregate Year-to-Date ▼	Date of Receipt	
	I Name of Individual (Last, First, Middle Initial) or Full Organization Name ragomen, Austin, Thomas, , MD,FAAOS iling Address 48-25 64th St		
City Woodside FEC ID number of contributing federal political committee. Name of Employer (for Individual) Hospital for Special Surgery Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code NY 11377 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11153939 Amount of Each Receipt this Period 100.00 Memo Item	
Full Name of Individual (Last, First, Middle Init C. Edelstein, David, W, , MD,FAAOS Mailing Address 6504 Pickens St City Houston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Kelsey Seybold Clinic Receipt For: Primary General Other (specify)		Date of Receipt	
SUBTOTAL of Receipts This Page (optional)		1184.00	

		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Roberson, Rowland, M, , MD, FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 641 N Lamar Blvd			M M / D D / Y Y Y Y 11 15 2021
City Oxford	State MS	Zip Code 38655-3235	Transaction ID : 11153941 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Specialty Orthopedic Group		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00]
Full Name of Individual (Last, First, Middle B. Lisella, Jordan, Mills, , MD, FAAO		rganization Name	Date of Receipt
Mailing Address 14 Turner Lane			11 / D D / Y Y Y Y Y 11 15 2021
City Loudonville	State NY	Zip Code 12211	Transaction ID : 11153942 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	
Full Name of Individual (Last, First, Middle C. Zanaros, George, , , MD,FAAOS		rganization Name	Date of Receipt
Mailing Address 16 Shaker Bay Rd			M M / D D / Y Y Y Y 11 15 2021
City Latham	State NY	Zip Code 12110	Transaction ID : 11153943 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 924.00]
SUBTOTAL of Receipts This Page (optional).			252.00

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

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FOR LINE NUMBER: PAGE 317 OF 551

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 318 OF 551 (check only one)	
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Ortho	ppaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Ir Winston, Jonathan, , , MD	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 4534 Shadowbrook CourtCity	State Zip Code	11 18 2021 Transaction ID : 11154891	
Bettendorf	IA 52722	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	84.00	
Name of Employer (for Individual) ORA Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00		
Full Name of Individual (Last, First, Middle Ir Tyndall, William, A, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt	
Mailing Address 123 Brittany Ln		11 / D D / Y Y Y Y 11 19 2021	
City Hollidaysburg	State Zip Code PA 16648	Transaction ID : 11155549 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	84.00	
Name of Employer (for Individual) University Orthopedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00		
Full Name of Individual (Last, First, Middle Ir . Woodcock, Jessica, A, , MD,FAA		Date of Receipt	
Mailing Address 738 Newman Rd	Mailing Address 738 Newman Rd		
City New Bern	StateZip CodeNC28562	Transaction ID : 11155550 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	84.00	
Name of Employer (for Individual) Carolina Orthopedics and Sports Medici	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 924.00		
SUBTOTAL of Receipts This Page (optional)		252.00	
TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 319 OF 55 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\overrightarrow{\mathbf{x}}$ 11a 11b 11c 12 13 14 15 16 1'
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cooper, Scott, Snow, , MD,FAAOS			Date of Receipt
Mailing Address 405 NW A St 1101 Horsebarn Road	o		
City	State	Zip Code	Transaction ID : 11155551
Bentonville	AR	72712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
Mercy Clinic Orthopedics	Orth	opaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		1074.00]
Full Name of Individual (Last, First, Middle I B. Shen, Wen, , , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 33 Pond Hills Ct			11 21 2021
City	State	Zip Code	Transaction ID : 11155708
Pleasant Valley	NY	12569	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Orthopedic Associates of Dutchess Coun		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General Other (specify) ▼		, 420.00]
Full Name of Individual (Last, First, Middle I Chapman, Cary, B, , MD,FAAOS		rganization Name	Date of Receipt
Mailing Address 10903 Blue Palm Street	• • • • • • • • • • • • • • • • • • •		
City Plantation	State FL	Zip Code 33324	Transaction ID : 11155709 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Miami Orthopedics & Sports Medicine In	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 924.00]
SUBTOTAL of Receipts This Page (optional)			252.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		E NUMBER:	PAGE 320 OF 551	
IT	EMIZED RECEIPTS		for each category of the	(check or	í í r	
			Detailed Summary Page	× 11a	11b	11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	tements ma	ay not be sold or used by any n			
	for commercial purposes, other than using the r					
\backslash	NAME OF COMMITTEE (In Full)					
$ \rangle$	Political Action Committee of the	America	an Association of Orth	opaedic	Surgeons	sPAC of AAOS
<u> </u>	Full Name of Individual (Last, First, Middle Initia		rganization Name			
Α.	Stoeckl, Andrew, , , MD, FAAOS		Iganization Name	Date of	of Receipt	
	Mailing Address 90 Fairlawn Dr	M = 7	/ / D D	/ Y Y Y Y Y		
		11	21	2021		
	City Amherst	State NY	Zip Code 14226		saction ID :	
			14220	Amour	nt of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С				83.00
	Name of Employer (for Individual)	Осси	upation (for Individual)		lemo Item	
	Excelsior Orthopedics		opaedic Surgeon			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General			1		
	Other (specify) v	L	913.00	1		
В.	Full Name of Individual (Last, First, Middle Initia Stronach, Benjamin, M, , MD,FAAOS		rganization Name	Date	of Receipt	
ے.	Mailing Address 16 Piedmont Ln					/ Y Y Y Y
					21	2021
	City	State	Zip Code		saction ID :	
		AR	72223-2232	Amour	nt of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С			-	250.00
	Name of Employer (for Individual) Univ of Arkansas		upation (for Individual)		lemo Item	
	Receipt For:	Orthopaedic Surgeon				
	Primary General	Aggregate	Year-to-Date ▼			
	Other (specify) V	1000.00				
_	Full Name of Individual (Last, First, Middle Initia		rganization Name			
C.	Oberste, David, Jason, , MD, FAAC	12			of Receipt	
	Mailing Address 4504 Rockbridge Hollow			11	21 / D	2021
	City	State	Zip Code	Tran	saction ID :	11155712
	Tallahassee	FL	32309	Amour	nt of Each R	eceipt this Period
	FEC ID number of contributing	С				250.00
	federal political committee.					200.00
	Name of Employer (for Individual)	Оссі	upation (for Individual)	N	lemo Item	
	Tallahassee Orthopedic Clinic III PL	Orth	opaedic Surgeon			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Other (specify)	· · · ·	750.00	1		
				- I		
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s	SUBTOTAL of Receipts This Page (optional)					583.00
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TOTAL This Period (last page this line number only)......

Lise senarate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any the name and address of any political commi	y person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Or	thopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Courtney, Paul, Maxwell, , MD, FAA Mailing Address 902 S Front St City Philadelphia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify) ▼		Date of Receipt
B. Full Name of Individual (Last, First, Middl B. Sherbondy, Paul, Strawn, , MD, Mailing Address 507 Beaumont Dr	, .	Date of Receipt
City State College FEC ID number of contributing federal political committee. Name of Employer (for Individual) Penn State Health Receipt For: Primary General Other (specify) ▼	State Zip Code PA 16801-8311 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 924.00	Transaction ID : 11155715 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middl C. Kirol, Bernard, G, , MD, FAAO Mailing Address 338 Turnwall Ln City Elgin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Midlands Orthopaedics, PA Receipt For: Primary General Other (specify)		Date of Receipt T11 22 2021 Transaction ID : 11155717 Amount of Each Receipt this Period Memo Item
) ber only)	

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Political Action Committee of th	e America	n Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Veitch, Andrew, John, , MD,FAAOS	itial) or Full Or	ganization Name	Date of Receipt
Mailing Address 13416 Desert Zinnia Ct NE	Chata	Zin Oode	11 / D D / Y Y Y Y Y 11 22 2021
City Albuquerque	State NM	Zip Code 87111	Transaction ID : 11155718 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) University of New Mexico, Dept of Orth		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00	
Full Name of Individual (Last, First, Middle In B. Hire, Justin, M, , MD,FAAOS	itial) or Full Or	ganization Name	Date of Receipt
Mailing Address 3100 Crestwood Lane	1		11 22 2021
City Columbia	State MO	Zip Code 65203	Transaction ID : 11155719 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer (for Individual) Dwight David Eisenhower Army Medical C		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 462.00	
Full Name of Individual (Last, First, Middle In C. Hunt, Stephen, Austin, , MD, FAA		ganization Name	Date of Receipt
Mailing Address 7 Pheasant Run Dr			11 / D D / Y Y Y Y 23 2021
City Basking Ridge	State NJ	Zip Code 07920	Transaction ID : 11156965 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Tri-County Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			▶ 376.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3X)	Lico constato schodulo(a)	FOR LINE NUMBER: PAGE 323 OF 551		
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using th		erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Ortho	ppaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle In A. Friedmann, Elizabeth, , , MD	nitial) or Full Organization Name	Date of Receipt		
Mailing Address 2660B Greenbriar Lane	Mailing Address 2660B Greenbriar Lane			
City Annapolis	State Zip Code MD 21401	Transaction ID : 11156966 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	84.00		
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item		
University of Maryland	Orthopaedic Surgeon			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00			
Full Name of Individual (Last, First, Middle In B. Grosso, Nicholas, P, , MD,FAAOS Mailing Address 10113 Lakeside Ct	Initial) or Full Organization Name	Date of Receipt		
City	State Zip Code	11 22 2021		
Ellicott City	MD 21042	Transaction ID : 11157597 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer (for Individual) Centers for Advanced Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name of Individual (Last, First, Middle In Shall, Lawrence, M, , MD,FAAO		Date of Receipt		
Mailing Address 4545 Commerce St 2606		11 22 Y Y Y Y 2021		
City Virginia Beach	StateZip CodeVA23462	Transaction ID : 11157598 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer (for Individual) Atlantic Orthopaedic Specialists	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00			
SUBTOTAL of Receipts This Page (optional)	↓	834.00		

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

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 324 OF 551 (check only one)	
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthe	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle II Webb, William, F, , MD,FAAOS		Date of Receipt	
Mailing Address 135 F Country Center Dr #25	51 State Zip Code	11 22 2021 Transaction ID : 11157599	
Pagosa Springs	CO 81147	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer (for Individual) Pagosa Springs Medical Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]	
Full Name of Individual (Last, First, Middle In Russell, Jeremy, , , DO, FAAOS	Initial) or Full Organization Name	Date of Receipt	
Mailing Address 222260 Woodbine Lane			
City Wausau	State Zip Code WI 54401	Transaction ID : 11157600 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		
Name of Employer (for Individual) Orthopaedic Associates of Wausau	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]	
Full Name of Individual (Last, First, Middle In Prayson, Michael, J, , MD,FAAO		Date of Receipt	
Mailing Address 30 E Apple St Ste 2200	11 / 22 / 2021		
City Dayton	StateZip CodeOH45409	Transaction ID : 11157601 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	500.00	
Name of Employer (for Individual) Premier Health	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	1	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · · ·	1750.00	
TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 325 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 12 14 15 16 14
Any information copied from such B	eports and Statements ma	l av not be sold or used by any r	person for the purpose of soliciting contributions
			ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Commi	ttee of the Americ	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, Fir A. Prusick, Vincent, , , MD,FAA	st, Middle Initial) or Full C OS	Organization Name	Date of Receipt
Mailing Address 10517 S West B	ay Shore Dr		11 22 2021
City	State	Zip Code	Transaction ID : 11157604
Traverse City	MI	49684	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) Occ	upation (for Individual)	Memo Item
Great Lakes Orthopaedics	Orth	nopaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		250.00	
			-
Full Name of Individual (Last, Fir B. Smith, John, Quentin, , M		Organization Name	Date of Receipt
Mailing Address 3235 S Westburg			
City	0	Zin Onde	11 22 2021
City Eagle	State	Zip Code 83616	Transaction ID : 11157605
		00010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual Treasure Valley Hospital	,	upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General Other (specify) ▼		, 250.00]
Full Name of Individual (Last, Fir C. Maki, Neil, J, , MD, FAA		Organization Name	Date of Receipt
Mailing Address 602 N Acadia Ro Suite 101			11 22 2021
City	State	Zip Code	Transaction ID : 11157606
Thibodaux	LA	70301-2627	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individual Self Employed	·	upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page	(optional)		▶ 1500.00

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee o	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
✓ Full Name of Individual (Last, First, Midd A. Russell, George, V, , Jr, MD,MBA Mailing Address 244 North Natchez Drive City Madison FEC ID number of contributing federal political committee. Name of Employer (for Individual) Univ of Mississippi Med Ctr Receipt For: Primary General Other (specify)	State MS C Occu Orth	rganization Name Zip Code 39110 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 990.00	Date of Receipt
Full Name of Individual (Last, First, Midd B. Daouk, Ayman, Ahmad, , MD,F/ Mailing Address 1240 Poinsettia Ave	Date of Receipt		
City Orlando FEC ID number of contributing federal political committee. Name of Employer (for Individual) Physicians Associates Receipt For: Primary General Other (specify)	Orth	Zip Code 32804	11 22 2021 Transaction ID : 11157618 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Midd C. Terry, Cooper, L, , MD, FAAO Mailing Address 1106 S Lamar Blvd City	Date of Receipt 11 22 2021 Transaction ID : 11157619		
Oxford FEC ID number of contributing federal political committee. Name of Employer (for Individual) Oxford Orthopaedics Receipt For: Primary General Other (specify)	Orth	38655-4732 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 750.00	Amount of Each Receipt this Period 250.00 Memo Item
Primary General	al)	750.00	590.00

SCHEDULE A (FEC Form 3X)		[Use separate schedule(s)	FOR LINE NUMBER: PAGE 327 OF 551		
ITEMIZED RECEIPTS			for each category of the	(check only one)		
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Ar	ny information copied from such Reports and Sta	Itements ma	y not be sold or used by any r			
	for commercial purposes, other than using the r					
\backslash	NAME OF COMMITTEE (In Full)					
$ \rangle$	Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS		
V	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name			
Α.	Gainor, John, W, , MD, FAAOS		gamzatori ramo	Date of Receipt		
	Mailing Address PO Box 1200	M M / D D / Y Y Y Y Y				
		11 22 2021				
	City Santa Barbara	State CA	Zip Code 93102-1200	Transaction ID : 11157620		
			93102-1200	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		1000.00		
	· · · · · · · · · · · · · · · · · · ·					
	Name of Employer (for Individual) Sansum Clinic		ipation (for Individual) opaedic Surgeon	Memo Item		
	Receipt For:					
	Primary General	Aggregate	Year-to-Date ▼			
	Other (specify)		2000.00			
			, ,	-		
D	Full Name of Individual (Last, First, Middle Initia Covey, Capt. Dana, C, , MD, MSc, F	al) or Full Oi	rganization Name	Date of Receipt		
р.	Mailing Address 12835 Three Canyons Point					
	Maining Hadross 12035 Three Carlyons Fornt	11 22 2021				
	City	State	Zip Code	Transaction ID : 11157621		
	San Diego	CA	92130-6861	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		50.00		
	federal political committee.					
	Name of Employer (for Individual)		upation (for Individual)	Memo Item		
	University of California, San Diego	Orth	opaedic Surgeon			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_		
	Other (specify) ▼		218.00			
				-		
_	Full Name of Individual (Last, First, Middle Initia		rganization Name			
C.	, , , , ,	>		Date of Receipt		
	Mailing Address 832 Hanley Ave			11 22 2021		
	City	State	Zip Code	Transaction ID : 11157622		
	Los Angeles	CA	90049	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		500.00		
	federal political committee.	U				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item		
	Cedars Sinai Hospital	Ortho	opaedic Surgeon			
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Other (specify)		1000.00	1		
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s	UBTOTAL of Receipts This Page (optional)			1550.00		
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TOTAL This Period (last page this line number only)......

FEC Schedule A (Form 3X) Rev. 06/2016

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Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Ar or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.
A.	Full Name of Individual (Last, First, Middle Init Navarro, Ronald, Anthony, , MD,FAAOS Mailing Address 18 Wide Loop Rd		rganization Name	Date of Receipt
	City Rolling Hills	State CA	Zip Code 90274	Transaction ID : 11157889 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Kaiser Permanente South Bay Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 924.00	Memo Item
B.	Full Name of Individual (Last, First, Middle Init Gerlinger, COL. (ret) Tad, L, , MD,F/ Mailing Address 596 Provident Ave	Zip Code	Date of Receipt	
	Winnetka	State IL	60093	Transaction ID : 11157890 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Midwest Orthopaedics		upation (for Individual) Iopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
с.	Full Name of Individual (Last, First, Middle Init Lindaman, Matthew, R, , DO, FAA		rganization Name	Date of Receipt
	Mailing Address 2130 E Stonebrook Ln			M M / D D / Y Y Y Y 11 24 2021
	City Eldridge	State IA	Zip Code 52748	Transaction ID : 11157891 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) Orthopaedic Rheumatology Associates Receipt For:	Ortho	upation (for Individual) opaedic Surgeon Year-to-Date ▼	Memo Item
_	Other (specify)		1000.00	
s	UBTOTAL of Receipts This Page (optional)			1334.00
т	OTAL This Period (last page this line number of	only)		

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and S for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	n Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Lieberman, Jay, R, , MD,FAAOS		ganization Name	Date of Receipt
	Mailing Address Department of Orthopaedic Su 1520 San Pablo Street, Suite 2			M M / D D / Y Y Y Y 11 24 2021
	City Los Angeles	State CA	Zip Code 90033	Transaction ID : 11157943 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Keck Med Ctr of USC		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
В.	Full Name of Individual (Last, First, Middle Init Beltran, Michael, John, , MD,FAAOS	S Í	ganization Name	Date of Receipt
	Mailing Address UC Dept of Orthopaedic Surge 231 Albert Sabin Way Room 5	11 26 2021		
	City Cincinnati	State OH	Zip Code 45267-0212	Transaction ID : 11157945 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Department of Orthopaedics and Rehabil		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 924.00]
с.	Full Name of Individual (Last, First, Middle Init Mitros, Stephen, F, , MD, FAAOS	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 51045 Erin Glen Dr			11 / 26 / Y Y Y Y 2021
	City Granger	State IN	Zip Code 46530	Transaction ID : 11157946 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Mitros Orthopaedics		pation (for Individual) ppaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 924.00]
s	UBTOTAL of Receipts This Page (optional)			668.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 330 OF 55		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17		
			person for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Initial) or Fu A. Baker, Donald, Earl, , MD, FAAOS		rganization Name	Date of Receipt		
Mailing Address 215 Little Creek Road	Mailing Address 215 Little Creek Road				
City	State MS	Zip Code 39232	Transaction ID : 11157949		
Flowood	IVIO	39232	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item		
Merit Health Orthopedics	Orth	opaedic Surgeon			
Receipt For:	Aggregate	Year-to-Date ▼	_		
Other (specify) ▼		1000.00]		
Full Name of Individual (Last, First, Middle B. Nagamani, Kevin, K, , MD,FAAOS		rganization Name	Date of Receipt		
Mailing Address 11902 E Lake Cr		11 27 2021			
City	State	Zip Code	Transaction ID : 11157950		
Greenwood Village	CO	80111	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual) Western Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼		756.00]		
Full Name of Individual (Last, First, Middle C. Gramstad, Gregory, D, , MD, F		rganization Name	Date of Receipt		
Mailing Address 6702 SW Canyon Crest Dr			11 27 2021		
City Portland	State OR	Zip Code 97225	Transaction ID : 11157951 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer (for Individual) Rebound Orthopedics & Neurosurgery		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	I	Year-to-Date 750.00]		
SUBTOTAL of Receipts This Page (optional)			584.00		

TOTAL This Period (last page this line number only)...... I I APR I I APR I I APR I

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 331 OF 551
ITE	MIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Anv	information copied from such Reports and St	atements ma	not be sold or used by any pe	erson for the purpose of soliciting contributions
	or commercial purposes, other than using the			
	IAME OF COMMITTEE (In Full)			
	Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
۷ F	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name	
A	Newbern, D, Gordon, , MD, FAAOS	,		Date of Receipt
Ν	Iailing Address 4412 S Lookout St			
ī	Dity	State	Zip Code	11 27 2021 Transaction ID : 11157952
	Little Rock	AR	72205	Amount of Each Receipt this Period
– F	EC ID number of contributing			
	ederal political committee.	С		84.00
Ā	Jame of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Arkansas Specialty Orthopedics		nopaedic Surgeon	
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) v		420.00	
F	ull Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name	
	Pushkarewicz, Michael, J, , MD,FAA			Date of Receipt
N	Aailing Address 1510 Braken Ave	M = M / D = D / Y = Y = Y		
-	Ni# -	Chata	Zin Oada	11 28 2021
	City Nilmington	State DE	Zip Code 19808	Transaction ID : 11157955
-	EC ID number of contributing			Amount of Each Receipt this Period
	ederal political committee.	С		42.00
_	lome of Employer (for Individual)	0.00	upation (for Individual)	Memo Item
	Name of Employer (for Individual) irst State Orthopaedics		nopaedic Surgeon	
F	Receipt For:		Year-to-Date ▼	
	Primary General	, iggi oguto		
	Other (specify) v		, 462.00	
F	ull Name of Individual (Last, First, Middle Initi	ial) or Full O	Iroanization Name	
	Gary, Joshua, Layne, , MD, FAAOS			Date of Receipt
N	Aailing Address 951 Descanso Drive			M = M / D = D / Y = Y = Y = Y
ī	Dity	State	Zip Code	11 28 2021
	La Canada Flintridge	CA	91011	Transaction ID : 11157956 Amount of Each Receipt this Period
_	EC ID number of contributing			
	ederal political committee.	С		84.00
_	lame of Employer (for Individual)	000	upation (for Individual)	Memo Item
	Keck School of Medicine of USC		lopaedic Surgeon	
F	Receipt For:	1	Year-to-Date ▼	
	Primary General	33 - 3		1
	Other (specify)		924.00	1
su	BTOTAL of Receipts This Page (optional)		L	210.00
L.				

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

FOR LINE NUMBER:

PAGE 332 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17		
	Statements may not be sold or used by any political committee	erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Ortho	ppaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle I A. Scales, Darrell, Kevin, , MD,FAAOS Mailing Address 5425 Golf View Dr City Braselton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northeast Georgia Physicians Group Receipt For: Primary General Other (specify) ▼	nitial) or Full Organization Name State Zip Code GA 30517 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 700.00 Topological	Date of Receipt 11 28 2021 Transaction ID : 11157957 Amount of Each Receipt this Period 100.00 Memo Item		
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carolan, Gregory, Francis, , MD,FAAOS			
City Bethlehem FEC ID number of contributing federal political committee. Name of Employer (for Individual) St Luke's Ortho Surg Group	State Zip Code PA 18015 C Occupation (for Individual) Orthopaedic Surgeon	11 28 2021 Transaction ID : 11157958 Amount of Each Receipt this Period 84.00 Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name of Individual (Last, First, Middle I C. Torres, Daniel, , , MD, FAAOS Mailing Address 1488 Shelburne Ct	nitial) or Full Organization Name	Date of Receipt		
City Allentown FEC ID number of contributing federal political committee.	State Zip Code PA 18104	Transaction ID : 11157959 Amount of Each Receipt this Period 85.00		
Name of Employer (for Individual) Lehigh Valley Practioner Group Receipt For: Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 935.00	Memo Item		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	er only)	269.00		

SCHEDULE A (FEC Form 3X)				lea caparata cabadula(a)			NUMBER: PAGE 333 OF 551
ITI	EMIZED RECEIPTS		Use separate schedule(s) for each category of the		\`	ck only	
				Detailed Summary Page		11a 13	11b 11c 12 14 15 16 17
	y information copied from such Reports and St						ourpose of soliciting contributions
or	for commercial purposes, other than using the	name and a	lddr	ess of any political committee	e to so	licit con	tributions from such committee.
\backslash	NAME OF COMMITTEE (In Full)	Amoria	<u>~~</u>	Accordiation of Ortho	<u></u>	dia C	
/	Political Action Committee of the	America	an	Association of Ortho	pae	uic S	urgeons-PAC of AAOS
A.	Full Name of Individual (Last, First, Middle Initi Chandler, David, R, , MD,FAAOS	al) or Full O	rga	nization Name		Date of	Receipt
Π.	illing Address 165 Middle Plantation Ln				-		
						11	28 2021
	City	State		Zip Code		Transa	action ID : 11157960
	Gulf Breeze	FL		32561		Amount	of Each Receipt this Period
	FEC ID number of contributing	С					84.00
	federal political committee.						
	Name of Employer (for Individual)		•	tion (for Individual)		Me	mo Item
	Andrews Institute For Orthopaedics & S	Orth	пора	aedic Surgeon	_		
	Receipt For:	Aggregate	Yea	ar-to-Date V			
	Other (specify) V			924.00			
			-	45 46	<u>ا</u>		
B.	Full Name of Individual (Last, First, Middle Initi Allard, Mark, Michael, , MD,FAAOS	al) or Full O	rga	nization Name		Date of	Receipt
_	Mailing Address 3010 Cortney Circle					M M	
						11	28 2021
	City	State		Zip Code			ction ID : 11157961
	Siloam Springs	AR	_	72761		Amount	of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С					84.00
	Name of Employer (for Individual) Self Employed		•	tion (for Individual)		Me	mo Item
	Receipt For:			aedic Surgeon	_		
	Primary General	Aggregate	Yea	ar-to-Date 🔻			
	Other (specify) v			924.00			
			· /-		-		
c	Full Name of Individual (Last, First, Middle Initi Huddleston, Paul, M, , MD, FAAOS		rga	nization Name		Date of	Receipt
	Mailing Address 31219 Lakeview Ave	·					
						11	28 2021
	City	State		Zip Code		Transa	action ID : 11157962
	Red Wing	MN	_	55066		Amount	of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С					, 250.00
	Name of Employer (for Individual)	0	una	tion (for Individual)	-	Me	mo Item
	Mayo Clinic		•	lion (for mainaual) ledic Surgeon			
	Receipt For:	1		ar-to-Date ▼	_		
	Primary General	33 - 3					
	Other (specify)		-	1000.00			
_							
	UPTOTAL of Descripto This Dass (artists)						418.00
S	UBTOTAL of Receipts This Page (optional)		•••••	••••••	·		, , , , , , , , , , , , , , , , , , , ,

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

PAGE 334 OF

551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Concert only one) Image: The second secon
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican Association of Ortho	paedic SurgeonsPAC of AAOS
-	State Zip Code	Date of Receipt 11 28 2021 Transaction ID : 11157963
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer (for Individual) Walter Reed National Military Medical Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon ggregate Year-to-Date ▼ 1000.00	Memo Item
Full Name of Individual (Last, First, Middle Initial) of Connair, Michael, P, , MD, FAAOS Mailing Address 24 Old Hartford Turnpike		Date of Receipt
City Hamden FEC ID number of contributing federal political committee.	State Zip Code CT 06517	Transaction ID : 11157964 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Self Employed Receipt For: Ag Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon ggregate Year-to-Date ▼ 1000.00	Memo Item
Full Name of Individual (Last, First, Middle Initial) of Hoedt, Christen, , , MD Mailing Address 973 Vinings Blvd	or Full Organization Name	Date of Receipt
City Gallatin FEC ID number of contributing federal political committee.	State Zip Code TN 37066	Transaction ID : 11157965 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Cooper Orthopaedics Surgery Receipt For: Ag Primary General Other (specify)	Occupation (for Individual) Orthopaedic Surgeon ggregate Year-to-Date ▼ 924.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		584.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 335 OF 55	
ITEMIZED RECEIPTS		for each category of the	(check only one)	
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports	and Statements ma	av not be sold or used by any	person for the purpose of soliciting contributions	
			ee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
Political Action Committee c	of the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Mide A. Reid, J, Spence, , MD, FAAOS	lle Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 500 University Drive Department of Orthopae	dics		M M / D D / Y Y Y Y 11 28 2021	
City	State	Zip Code	Transaction ID : 11157966	
Hershey	PA	17036	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		84.00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Penn State	Orth	opaedic Surgeon	-	
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General	00.00			
Other (specify) ▼		924.00	4	
Full Name of Individual (Last, First, Mido B. Giuseffi, Steven, A, , MD,FAAO	dle Initial) or Full O	rganization Name	Date of Receipt	
Mailing Address 4784 Enchanted Pines D				
City	State	Zip Code	Transaction ID : 11157967	
Rapid City	SD	57701	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		84.00	
Name of Employer (for Individual) Black Hills Orthopedic and Spine Cente		upation (for Individual) nopaedic Surgeon	Memo Item	
Receipt For:	Aggregate	Year-to-Date 🔻		
Primary General Other (specify) ▼		924.00		
Full Name of Individual (Last, First, Mido C. King, Brandon, , , MD,FAAOS		rganization Name	Data of Dessist	
Mailing Address 370 S Rogers St	,		Date of Receipt	
Maning Address 370 5 Kogers St			11 28 2021	
City	State	Zip Code	Transaction ID : 11157968	
Northville	MI	48167	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		100.00	
Nome of Employer (for Individual)		unation (for Individual)	Memo Item	
Name of Employer (for Individual) Henry Ford Hospital		upation (for Individual) opaedic Surgeon		
Receipt For:	I			
Primary General	Aggregate	Year-to-Date ▼	_	
Other (specify)		300.00		
			-	
			000.00	
SUBTOTAL of Receipts This Page (option	al)		▶ 268.00	

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

Use separate schedule(s)

FOR LINE NUMBER:

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551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
				opaedic SurgeonsPAC of AAOS		
Α.	Full Name of Individual (Last, First, Middle Initia Hamilton, Christopher, D, , MD, FAAOS	al) or Full O	Organization Name	Date of Receipt		
	Mailing Address 11501 Haydock Ct	11 24 Y Y Y Y 2021				
	City Bakersfield	State CA	Zip Code 93311	Transaction ID : 11158368		
	FEC ID number of contributing			Amount of Each Receipt this Period		
	federal political committee.	С		500.00		
	Name of Employer (for Individual) Self Employed		cupation (for Individual) hopaedic Surgeon	Memo Item		
		Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		500.00]		
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Organization Name			
В.	Jacobs, Joshua, J, , MD,FAAOS			Date of Receipt		
	Mailing Address 2407 Pomona Lane	1-		11 / D D / Y Y Y Y Y 11 24 2021		
	City Wilmette	State IL	Zip Code 60091	Transaction ID : 11158375		
			60091	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		1000.00		
	Name of Employer (for Individual) Rush Univ Med Ctr		cupation (for Individual) thopaedic Surgeon	Memo Item		
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		, 1000.00]		
<u> </u>	Full Name of Individual (Last, First, Middle Initia) Johnson, Gregory, K, , MD, FAAOS		Drganization Name	Date of Receipt		
•.	Mailing Address 288 Groveland St			11 24 2021		
	City	State	Zip Code	Transaction ID : 11158376		
	Haverhill	MA	01830-6669	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		995.00		
	Name of Employer (for Individual) Associates In Orthopedics		cupation (for Individual) hopaedic Surgeon	Memo Item		
	Receipt For:		e Year-to-Date ▼	-		
	Primary General Other (specify)		995.00]		
⊢	UBTOTAL of Receipts This Page (optional)			2495.00		
11	OTAL This Period (last page this line number o	· · · y / · · · · · · · · · · · · · · ·				

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 337 OF 551 (check only one)	
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	× 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using t	l Statements may not be sold or used by any p the name and address of any political committe	e to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orth	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle Wolock, Bruce, , , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt	
Mailing Address 8564 Leisure Hill Dr City	State Zip Code	11 30 2021 Transaction ID : 11158710	
Baltimore	MD 21208	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer (for Individual) Towson Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]	
Full Name of Individual (Last, First, Middle B. Cassidy, Carter, , , MD, FAAOS	Initial) or Full Organization Name	Date of Receipt	
Mailing Address 4890 Faulkirk Lane		12 01 / Y Y Y Y 2021	
City Lexington	State Zip Code KY 40515	Transaction ID : 11159046	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 85.00	
Name of Employer (for Individual) University of Kentucky Res Program	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00]	
Full Name of Individual (Last, First, Middle C. Smith, Scott, A, , MD,FAAOS	Initial) or Full Organization Name	Date of Receipt	
Mailing Address 200 Clovis Dr	11 / D D / Y Y Y Y 11 19 2021		
City Georgetown	StateZip CodeTX78628	Transaction ID : 11159431 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer (for Individual) Texas Orthopedics Round Rock	Occupation (for Individual) Orthopaedic Surgeon	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	1	
SUBTOTAL of Receipts This Page (optional).		585.00	
TOTAL This Period (last page this line number	er only)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 338 OF 551 (check only one)		
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and a or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)				
Political Action Committee of the		ppaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Ir Glusenkamp, Nathan, , ,	nitial) or Full Organization Name	Date of Receipt		
Mailing Address 9400 W Higgins Rd 	State Zip Code	11 22 2021 Transaction ID : 11159433		
Rosemont	IL 60018	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer (for Individual) AAOS	Occupation (for Individual) Chief Quality and Registries Officer	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name of Individual (Last, First, Middle Ir B. Jiranek, William, A, , MD,FAAOS,F	itial) or Full Organization Name	Date of Receipt		
Mailing Address 4709 Creekstone Drive	11 22 2021			
City Durham	State Zip Code VA 27703	Transaction ID : 11159434		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00		
Name of Employer (for Individual) Duke University	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For:	Aggregate Year-to-Date ▼			
Other (specify) ▼	924.00			
Full Name of Individual (Last, First, Middle Ir Mejia, Alfonso, , , MD,MPH,FAA	itial) or Full Organization Name	Date of Receipt		
Mailing Address 5332 South Shore Drive	Mailing Address 5332 South Shore Drive			
City Chicago	State Zip Code IL 60615	Transaction ID : 11159435 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	84.00		
Name of Employer (for Individual) Illinois Association of Orthopedic Sur	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1848.00			
SUBTOTAL of Receipts This Page (optional)	••••••	218.00		
TOTAL This Period (last page this line number	r only)			

FOR LINE NUMBER: PAGE 339 OF 551

		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17		
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)			nopaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle A. Schmidt, Kenneth, , , MD	Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 10811 N 52nd Street	Mailing Address 10811 N 52nd Street				
City Scottsdale	State AZ	Zip Code 85254	Transaction ID : 11159436 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer (for Individual) OrthoArizona		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00]		
Full Name of Individual (Last, First, Middle B. Lange, Jeffrey, K, , MD	Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 28 Exeter Street Apt 403			11 / 26 / Y Y Y Y 2021		
City Boston	State MA	Zip Code 02116	Transaction ID : 11159437 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		20.00		
Name of Employer (for Individual) Brigham and Women's Hospital		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 220.00			
Full Name of Individual (Last, First, Middle C. Leffers, Kevin, John, , MD	Initial) or Full C	rganization Name	Date of Receipt		
Mailing Address 4922 Stratford Rd			M M / D D / Y Y Y Y 11 26 2021		
City Fort Wayne	State IN	Zip Code 46807-2947	Transaction ID : 11159438 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		100.00		
Name of Employer (for Individual) Fort Wayne Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00]		
SUBTOTAL of Receipts This Page (optional))		▶ 170.00		

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

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
		e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Panchbhavi, Vinod, Kumar, , MD,FAAOS		rganization Name	Date of Receipt
	Mailing Address 1165 Rymers Switch Lane	11 29 2021		
	City Friendswood	State TX	Zip Code 77546	Transaction ID : 11159440 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Univ of Texas Medical Branch		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 452.00]
в.	Full Name of Individual (Last, First, Middle Initi Teuscher, David, Dean, , MD,FAAO		organization Name	Date of Receipt
	Mailing Address 6330 Cobblestone Lane			M M / D D / Y Y Y Y 11 29 2021
	City	State	Zip Code	Transaction ID : 11159441
	Arlington	TX	76001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Self Employed		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 850.00]
с.	Full Name of Individual (Last, First, Middle Initi Iorio, Richard, , , MD,FAAOS	ial) or Full O	organization Name	Date of Receipt
	Mailing Address 31 Prince St			M M / D D / Y Y Y Y 11 29 2021
	City Beverly	State MA	Zip Code 01915	Transaction ID : 11159442 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Brigham and Women's Hospital		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 924.00]
s	UBTOTAL of Receipts This Page (optional)			418.00
т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)					
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	17	
Any information copied from such Reports	and Statements ma	ay not be sold or used by any p			
or for commercial purposes, other than usin	ng the name and a	ddress of any political committee	e to solicit contributions from such committ	tee.	
	<i>.</i>				
Political Action Committee of	of the America	an Association of Orth	opaedic SurgeonsPAC of AA	AOS	
Full Name of Individual (Last, First, Mide	dle Initial) or Full C	rganization Name			
A. Arend, Thomas, E, , Jr,			Date of Receipt		
Mailing Address 9400 W Higgins Rd				Y	
City	State	Zip Code	11 29 2021 Transaction ID : 11159443		
Rosemont	IL	60018	Amount of Each Receipt this Period		
FEC ID number of contributing				_	
federal political committee.	C		84.	00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item		
AAOS		ef Executive Officer			
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General			1		
Other (specify) v		336.00			
Full Name of Individual (Last, First, Mido	dle Initial) or Full O	rganization Name			
B. Priore, Anthony, , ,			Date of Receipt		
Mailing Address 9400 W Higgins Rd Ste	M M / D D / Y Y Y	Y			
0:4	Chata	11292021			
City Rosemont	State	Zip Code 60018-4975	Transaction ID : 11159444 Amount of Each Receipt this Period		
FEC ID number of contributing				_	
federal political committee.	С		84.	00	
Name of Employer (for Individual)	0.00	unation (for Individual)	Memo Item		
Name of Employer (for Individual) AAOS		upation (for Individual) ef Marketing Officer			
Receipt For:		Year-to-Date ▼			
Primary General					
Other (specify) v		, 252.00			
Full Name of Individual (Last, First, Mide	le Initial) or Full O	roanization Name			
c. Epps, Howard, R, , MD,FAAC			Date of Receipt		
Mailing Address 1936 Wroxton Road				Y	
City	State	Zip Code	11 30 2021		
City Houston	TX	77005	Transaction ID : 11159445 Amount of Each Receipt this Period		
FEC ID number of contributing				_	
federal political committee.	С		250.0	00	
Name of Employer (for Individual)					
Name of Employer (for Individual) Baylor College of Medicine		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For:	I	Year-to-Date ▼			
Primary General					
Other (specify)		1000.00	1		
Г					
SUBTOTAL of Receipts This Page (option	al)		418.0	00	
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TOTAL This Period (last page this line number only)......

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Lopez, David, Vincent, , MD,FAAOS Mailing Address 27 Courtney Ct City Freehold FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Sports Medicine Speciali Receipt For: Primary General Other (specify) ▼	State NJ C Occu Orth	rganization Name Zip Code 07728 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 924.00	Date of Receipt
Full Name of Individual (Last, First, Middle I B. Greenwald, Alan, G, , MD,FAAOS Mailing Address 14780 Tieton Dr City Yakima FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedics Northwest Receipt For: Primary General Other (specify) ▼	State WA C Occ Ort	rganization Name Zip Code 98908 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 750.00	Date of Receipt
Full Name of Individual (Last, First, Middle I C. Campbell, John, T, , MD,FAAOS Mailing Address 4618 Sheppard Manor Dr City Ellicott City FEC ID number of contributing federal political committee. Name of Employer (for Individual) Inst for Foot & Ankle Recon at Mercy Receipt For: Primary General Other (specify)	State MD C Occu Orth	rganization Name Zip Code 21042 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 12 01 2021 Transaction ID : 11159463 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			584.00

FEC Schedule A (Form 3X) Rev. 06/2016

mmercial purposes, other than using the E OF COMMITTEE (In Full)	e name and a		(check only one) $11a$ 11a11b11c12131415161171819191010111213141516117181919191010111213141516171819
mmercial purposes, other than using the E OF COMMITTEE (In Full)	e name and a		
E OF COMMITTEE (In Full)		an eee of any pointour continuito	e to solicit contributions from such committee
	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
lame of Individual (Last, First, Middle In tnagar, Rishi, , , MD, FAAOS		rganization Name	Date of Receipt
ig Address 14201 Park Center Drive, Sui	te 410		M M / D D / Y Y Y Y 12 01 2021
	State	Zip Code	Transaction ID : 11159470
		20707	Amount of Each Receipt this Period
8	С		1000.00
e of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
•	Orth	opaedic Surgeon	
pt For: Primary General	Aggregate	Year-to-Date V	_
Other (specify) ▼		1000.00	
		rganization Name	Date of Receipt
g Address 1096 Canyon Creek Dr	12 01 2021		
	State	Zip Code	Transaction ID : 11159472
ester Hills	MI	48306	Amount of Each Receipt this Period
8	С		250.00
			Memo Item
pt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify)		, 250.00]
		rganization Name	Date of Receipt
			12 01 2021
	State	Zip Code	Transaction ID : 11159474
n Reading	MA	01864	Amount of Each Receipt this Period
8	С		250.00
	Occupation (for Individual)		Memo Item
]
	el ID number of contributing al political committee. a of Employer (for Individual) sion Orthopedics ipt For: Primary General Other (specify) ▼ Aame of Individual (Last, First, Middle In af, Michael, Augustine, , MD, F/ ag Address 1096 Canyon Creek Dr ester Hills ID number of contributing al political committee. e of Employer (for Individual) ester Knee & Sports Medicine ipt For: Primary General Other (specify) ▼ Name of Individual (Last, First, Middle In Dre, Jeremy, Michael, , MD, FA ag Address 2 Berridge Way In Reading ID number of contributing al political committee. e of Employer (for Individual) teame of contributing al political committee. e of Individual (Last, First, Middle In Dre, Jeremy, Michael, , MD, FA ang Address 2 Berridge Way In Reading ID number of contributing al political committee. e of Employer (for Individual) s Medicine North ipt For: Primary General Other (specify) General Other (specify)	el MD ID number of contributing al political committee. C e of Employer (for Individual) sion Orthopedics Orth primary General Other (specify) ▼ Aggregate tame of Individual (Last, First, Middle Initial) or Full Or saf, Michael, Augustine, , MD, FAAOS ig Address 1096 Canyon Creek Dr tester Hills ID number of contributing al political committee. e of Employer (for Individual) ester Knee & Sports Medicine ipt For: Primary General Other (specify) ▼ Aggregate ipt For: Primary General Other (specify) ▼ Aggregate ipt For: Aggregate Primary General Other (specify) ▼ Aggregate ID number of contributing al political committee. C in Reading MA ID number of contributing al political committee. C in Reading Occu- Orth in For: Aggregate Primary General Other (specify) Aggregate Primary	el State MD Zip Code 20707 ID number of contributing al political committee. C

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

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
A. McCall, Todd, Andrew, , MD,FAAOS Mailing Address 1705 N Halifax Ave		ial) or Full O	rganization Name	Date of Receipt
	01	12 01 2021		
	City Daytona Beach	State FL	Zip Code 32118	Transaction ID : 11159476
		1.2	32110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item
	Ortho Clinic of Daytona Beach	Orth	opaedic Surgeon	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General			1
	Other (specify) v	L	250.00	
в.	Full Name of Individual (Last, First, Middle Initi Bizzigotti, Paul, , , MD, FAAOS	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 8872 Professional Dr Ste B	12 01 Y Y Y Y 12 01 2021		
	City	State	Zip Code	Transaction ID : 11159479
	Cadillac	MI	49601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			
	Name of Employer (for Individual) Cadillac Orthopaedics		upation (for Individual) Iopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Johnson, Timothy, S, , MD,FAAOS		rganization Name	Date of Receipt
	Mailing Address 43854 Kittiwake Dr	M M / D D / Y Y Y Y 12 01 2021		
	City	State	Zip Code	Transaction ID : 11159482
	Leesburg	VA	20176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item
	National Sports Medicine Institute		opaedic Surgeon	-
	Receipt For:	Aggregate	Year-to-Date V	_
	Primary General			1
	Other (specify)	L	500.00	
s	UBTOTAL of Receipts This Page (optional)		•	1000.00
Т	OTAL This Period (last page this line number of	only)	••••••	

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and Stat or for commercial purposes, other than using the n			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial A. Klug, Raymond, A, , MD,FAAOS Mailing Address 3851 Katella Ave #202 City Los Alamitos FEC ID number of contributing federal political committee.	State CA C	Zip Code 90720	Date of Receipt Mark / D / Y
Name of Employer (for Individual) Greater Long Beach Orthopaedic Surgica Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
Full Name of Individual (Last, First, Middle Initial B. Burke, Robert, L, , MD,FAAOS Mailing Address 2341 Blue Bonnet Blvd City Houston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Texas Orthopedic Hospital Receipt For: Primary General Other (specify)	State TX C Occu Orth	rganization Name Zip Code 77030 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial C. Cushing, Michael, V, , MD, FAAOS Mailing Address 385 Highgrove Dr City Fayetteville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Georgia Bone and Joint Receipt For: Primary General Other (specify)	State GA C Occu Ortho	rganization Name Zip Code 30215 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 12 01 2021 Transaction ID : 11159488 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			3000.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Barth, Richard, W, , MD,FAAOS Mailing Address 6516 Goldleaf Dr City Bethesda FEC ID number of contributing federal political committee. Name of Employer (for Individual) Washington Orthopaedics and Sports Med Receipt For: Primary General Other (specify) ▼	State MD C Occ Orth	Drganization Name Zip Code 20817 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle I B. Reinker, Kent, A, , MD,FAAOS Mailing Address 928 Hokulani Street City Honolulu FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	State HI C Occ Ort	Zip Code 96825 Prupation (for Individual) hopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt Transaction ID : 11159493 Amount of Each Receipt this Period Memo Item
Full Name of Individual (Last, First, Middle I C. Broyles, Joseph, E, , MD, FAAO Mailing Address 1371 Elmcrest Dr City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify)	State LA C Occo Orth	Drganization Name Zip Code 70808 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt M12 01 2021 Transaction ID : 11159499 Amount of Each Receipt this Period 1000.00 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			2000.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 347 OF 551	
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)	
Any information copied from such Reports and S or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS	
Full Name of Individual (Last, First, Middle In Lynch, Garrett, J, , MD, FAAOS	iitial) or Full O	rganization Name	Date of Receipt	
Mailing Address 2003 Medical Pkwy Ste 400			12 01 2021	
City Annapolis	State MD	Zip Code 21401-3088	Transaction ID : 11159501	
FEC ID number of contributing federal political committee.	C	21401-3000	Amount of Each Receipt this Period	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Anne Arundel Orthopaedic Surgeons LLC	Orth	nopaedic Surgeon		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]	
Full Name of Individual (Last, First, Middle In 3. Sands, Kenneth, C, , MD,FAAOS	iitial) or Full O	rganization Name	Date of Receipt	
Mailing Address 6985 S Tropical Trail				
City	State	Zip Code	Transaction ID : 11159503	
Merritt Island	FL	32952	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		1000.00	
Name of Employer (for Individual) Health First		upation (for Individual) nopaedic Surgeon	Memo Item	
Receipt For: Primary General	Aggregate	Year-to-Date ▼		
Other (specify) ▼		, 1000.00]	
Full Name of Individual (Last, First, Middle In C. Cafferky, Nathan, , , MD,FAAOS	iitial) or Full O	rganization Name	Date of Receipt	
Mailing Address 32 Millers Loop Rd				
City Edwards	State CO	Zip Code 81632	Transaction ID : 11159505 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	1000.00			
Name of Employer (for Individual) Vail Summit Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon		Memo Item	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]	
SUBTOTAL of Receipts This Page (optional)			2500.00	

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

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full)			ppaedic SurgeonsPAC of AAOS
A.	Full Name of Individual (Last, First, Middle Initia Detch, Robert, Corwin, , MD, FAAOS Mailing Address 2517 Valdivia Way	al) or Full O	rganization Name	Date of Receipt
	City Burlingame	State CA	Zip Code 94010	Transaction ID : 11159507 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer (for Individual) Palo Alto Medical Foundation		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
в.		al) or Full O	rganization Name	Date of Receipt
	Mailing Address Box 422 1000 W Carson St City	State	Zip Code	12 / D D / Y Y Y Y 2021
	Torrance	CA	90509	Transaction ID : 11159508 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer (for Individual) Harbor-UCLA Medical Center		upation (for Individual) Iopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
с.	Full Name of Individual (Last, First, Middle Initia Wynder, Steven, G, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 5290 W 612 N City	State	Zip Code	12 02 2021
	Huntington	IN	46750	Transaction ID : 11159509 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Parkview Ortho Hospital Receipt For:	Orth	ipation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00	
s	UBTOTAL of Receipts This Page (optional)			1334.00
т	OTAL This Period (last page this line number o	nly)	•••••	

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using th			e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Middle I Brophy, Robert, H, , MD,FAAOS Mailing Address 7 Maryhill Dr	nitial) or Full O	rganization Name	Date of Receipt			
St Louis FEC ID number of contributing federal political committee.	MO C	63124	Amount of Each Receipt this Period			
Name of Employer (for Individual) Washington University Orthopedics Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item			
Full Name of Individual (Last, First, Middle I Rana, Adam, J, , MD, FAAOS Mailing Address 12 Landing Woods Ln						
City Falmouth FEC ID number of contributing federal political committee.	State ME	Zip Code 04105-1948	Transaction ID : 11159511 Amount of Each Receipt this Period 100.00			
Name of Employer (for Individual) Maine Medical Center Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1300.00	Memo Item			
C. Full Name of Individual (Last, First, Middle I Smith, Eric, Louis, , MD,FAAOS Mailing Address 1573 Beacon Street						
City Waban	State MA	Zip Code 02468	12 02 2021 Transaction ID : 11159512 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		84.00 Memo Item			
Name of Employer (for Individual) Boston Medical Clinic Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1008.00				
SUBTOTAL of Receipts This Page (optional)			434.00			

FOR LINE NUMBER:

PAGE 350 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and St or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Bahu, Maher, J, , MD,FAAOS Mailing Address 44038 Woodward Suite 200 City Bloomfield Hills FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic Specialists of Oakland Cou Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code MI 48302 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt
B. Full Name of Individual (Last, First, Middle Initi Palmer, Michael, P, , MD, FAAOS Mailing Address 8700 Hopewell Rd	al) or Full Organization Name	Date of Receipt
City Cincinnati FEC ID number of contributing federal political committee. Name of Employer (for Individual) United States Air Force Receipt For: Primary General Other (specify) ▼	State Zip Code OH 45242 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11159515 Amount of Each Receipt this Period 250.00 Memo Item
C. Full Name of Individual (Last, First, Middle Initi Mather, Richard, C, , III, MD,MB Mailing Address 115 Watts St	Date of Receipt	
Durham FEC ID number of contributing federal political committee. Name of Employer (for Individual) Duke Medical Center Receipt For: Primary General Other (specify)	State NC Zip Code 27701 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Transaction ID : 11159517 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	-	1000.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 351 OF 55
IT	EMIZED RECEIPTS		for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Sta	itements ma	ay not be sold or used by any pe	
	for commercial purposes, other than using the r			
\backslash	NAME OF COMMITTEE (In Full)			
	Political Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
/	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
Α.	Worrel, Daniel, A, , MD, FAAOS	,	5	Date of Receipt
	Mailing Address 3304 Wentwood Dr			M = M / D = D / Y = Y = Y
	City	State	Zip Code	12 02 2021
	Dallas	TX	75225	Transaction ID : 11159539
	EEC ID number of contributing			Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual)		upation (for Individual)	
	WB Carrell Clinic		nopaedic Surgeon	
	Receipt For:		Year-to-Date V	
	Primary General	riggregale		
	Other (specify)		1000.00	
				-
R	Full Name of Individual (Last, First, Middle Initia Reiter, Mitchell, Forest, , MD, FAAOS	Date of Receipt		
	Mailing Address 120 Ravine Lake Rd			
		12 02 2021		
	City	State	Zip Code	Transaction ID : 11159549
	Bernardsville	NJ	07924-1408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) The New Jersey Spine Specialists		upation (for Individual)	Memo Item
	Receipt For:		nopaedic Surgeon	
	Primary General	Aggregate	Year-to-Date V	
	Other (specify) V		250.00	
c	Full Name of Individual (Last, First, Middle Initia Drillings, Gary, J, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
С.	Mailing Address 10 Nelson Lane			
				11 30 2021
	City	State	Zip Code	Transaction ID : 11159691
	Montville	NJ	07045	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	North Jersey Orthopaedic Group Receipt For:		opaedic Surgeon	_
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		500.00	
_			-gp	
s	UBTOTAL of Receipts This Page (optional)		•••••	1750.00
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TOTAL This Period (last page this line number only)......

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 352 OF 55 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committee	
/			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Bernholt, David, , , MD Mailing Address 3126 Chapel Woods Cv	Initial) or Full O	rganization Name	Date of Receipt
City Germantown	State TN	Zip Code 38139	11 30 2021 Transaction ID : 11159703
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) Campbell Clinic		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 458.37]
Full Name of Individual (Last, First, Middle Bettin, Clayton, Charles, , MD,FA. Mailing Address 5047 Shady Hall Ct		rganization Name	Date of Receipt
City Memphis	State TN	Zip Code 38117	11 30 2021 Transaction ID : 11159704 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic Receipt For:		upation (for Individual) opaedic Surgeon	Memo Item
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 458.37	1
Full Name of Individual (Last, First, Middle Calandruccio, James, H, , MD,		rganization Name	Date of Receipt
Mailing Address Campbell Clinic <u>1400 S Germantown Rd</u> City Germantown	State TN	Zip Code 38138-2205	11 30 2021 Transaction ID : 11159705
FEC ID number of contributing federal political committee.	С	30130-2203	Amount of Each Receipt this Period
Name of Employer (for Individual) Campbell Clinic		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 458.37	1
SUBTOTAL of Receipts This Page (optional)			125.01
TOTAL This Period (last page this line numb	er only)		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using th		
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Crockarell, John, R, , Jr, MD, FA Mailing Address 1458 W Poplar Ave Ste 100 City Collierville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (anapitu)	nitial) or Full Organization Name State Zip Code TN 38017 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 458.37	Date of Receipt 11 30 2021 Transaction ID : 11159707 Amount of Each Receipt this Period 41.67 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle In B. Ford, Marcus, Christopher, , MD, F Mailing Address 2255 Duntreath Rd	nitial) or Full Organization Name	Date of Receipt
City Germantown FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State TN Zip Code 38139 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 229.24	11 30 2021 Transaction ID : 11159708 Amount of Each Receipt this Period 20.84 20.84 Memo Item
Full Name of Individual (Last, First, Middle In C. Grear, Benjamin, J, , MD,FAAOS Mailing Address 219 Lagrange Creek Drive City Eads		Date of Receipt 11 30 2021 Transaction ID : 11159709 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date 458.37	41.67 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	·	104.18

S	CHEDULE A (FEC Form 3X)			(a)		R LINE			: PAC	GE 354 C)F 551				
IT	EMIZED RECEIPTS		Use separate schedule(for each category of the		È	eck on	ly one	e)							
			Detailed Summary Page		×			11b	11c	12	<u> </u>				
			<u> </u>			13		14	15	16	17				
	y information copied from such Reports and S for commercial purposes, other than using the														
$\left \right\rangle$	NAME OF COMMITTEE (In Full)						_								
	Political Action Committee of the	Orthop	bae	dic S	Surg	jeon	sPA	C of A	AOS						
Α.	Full Name of Individual (Last, First, Middle Init Guyton, James, L, , MD,FAAOS	ial) or Full O	Organization Name		Date of Receipt										
	Mailing Address 6422 Massey Estates Cove					M M	/	D 30	D /	y y y 2021	Y				
	City	State	Zip Code		1 '	Trans	sactio	on ID :	111597	'10					
	Memphis	TN	38120		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						,		41.					
	Name of Employer (for Individual)	Occ	upation (for Individual)			M	lemo	Item							
	Campbell Clinic		hopaedic Surgeon												
	Receipt For:		Year-to-Date ▼		-										
	Primary General	Aggregate		_											
	Other (specify) ▼	L	458.3	7											
B	Full Name of Individual (Last, First, Middle Init Harkess, James, W, , MD,FAAOS	ial) or Full O	Organization Name			Date o	of Rec	eint							
υ.	Mailing Address 9566 Fox Hill Circle S			1	M M		D		YYY	V					
					11 30 2021										
	City	State	Zip Code		Trans	sactio	n ID ·	111597	11						
	Germantown	TN	38139							this Period					
	FEC ID number of contributing federal political committee.	С						,		41.	67				
	Name of Employer (for Individual) Campbell Clinic	Occ Orth	Memo Item												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		, 458.3	7											
с.	Full Name of Individual (Last, First, Middle Init Heck, Robert, Kurt, , Jr, MD, FA	ial) or Full O	Organization Name			Date o	of Rec	eipt							
	Mailing Address 4938 Barfield Rd			11 ^M	/	D 30		2021	Y						
	City Memphis	State TN	Zip Code 38117			Transaction ID : 11159712 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С	41.67												
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon			Memo Item									
	Receipt For:	1	Year-to-Date ▼		1										
	Primary General Other (specify)		458.3												

SUBTOTAL of Receipts This Page (optional)		1	_	_	_	_	_	_	12	5.01	
TOTAL This Period (last page this line number only)	Γ										
										-	

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or used by any pe ame and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the J	American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial Kelly, Derek, Michael, , MD,FAAOS Mailing Address 1458 W Poplar Ave Suite 100 City Collierville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	or Full Organization Name State Zip Code TN 38017 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 458.37 458.37	Date of Receipt
Full Name of Individual (Last, First, Middle Initial B. Mascioli, Anthony, , , MD, FAAOS Mailing Address 226 W Goodwyn City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	o or Full Organization Name State Zip Code TN 38111 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 229.13	Date of Receipt
Full Name of Individual (Last, First, Middle Initial C. Mauck, Benjamin, Matthew, , MD, F Mailing Address 2742 Central Ave City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)		Date of Receipt M11 30 2021 Transaction ID : 11159715 Amount of Each Receipt this Period 20.83 Memo Item
SUBTOTAL of Receipts This Page (optional)		83.33

FOR LINE NUMBER:

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551

address of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
an Approximation of Ortho	
	paedic SurgeonsPAC of AAOS
hopaedic Surgeon	Date of Receipt 11 30 2021 Transaction ID : 11159716 Amount of Each Receipt this Period 41.67 Memo Item
Zip Code 38138-2205	Date of Receipt
Zip Code 38125 Cupation (for Individual) hopaedic Surgeon	Date of Receipt
	Zip Code 38117 cupation (for Individual) thopaedic Surgeon a Year-to-Date 458.37 Organization Name Zip Code 38138-2205 cupation (for Individual) thopaedic Surgeon a Year-to-Date Year-to-Date 458.37 Organization Name Zip Code 38138-2205 Cupation (for Individual) thopaedic Surgeon a Year-to-Date Zip Code 38125 Corganization Name Zip Code 38125 Cupation (for Individual) thopaedic Surgeon a Year-to-Date Year-to-Date

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Richardson, David, R, , MD,FAAOS Mailing Address 636 Center Dr City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State TN C Occu Orth	rganization Name Zip Code 38112 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 458.37	Date of Receipt Transaction ID : 11159719 Amount of Each Receipt this Period 41.67 Memo Item
Full Name of Individual (Last, First, Middle B. Rudloff, Matthew, Ian, , MD, FAAC Mailing Address 10211 Ramblewood Dr City Arlington FEC ID number of contributing federal political committee.		rganization Name Zip Code 38002	Date of Receipt 11 30 2021 Transaction ID : 11159721 Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 458.37	Memo Item
Full Name of Individual (Last, First, Middle Sawyer, Jeffrey, R, , MD, FAAO Mailing Address 4450 Chickasaw Road		rganization Name	Date of Receipt
City Memphis FEC ID number of contributing federal political committee.	State TN	Zip Code 38117	Transaction ID : 11159722 Amount of Each Receipt this Period 41.67
Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 458.37	Memo Item
SUBTOTAL of Receipts This Page (optional)			125.01

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any phe name and address of any political committee	person for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Sheffer, Benjamin, West, , MD,FAAOS Mailing Address 281 Ben Avon Way City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle B. Thompson, Kirk, Michael, , MD Mailing Address 75 St Albans Fairway City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	Initial) or Full Organization Name State Zip Code TN 38111 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 229.13	Date of Receipt 11 30 2021 Transaction ID : 11159724 Amount of Each Receipt this Period 20.83 20.83 Memo Item Memo Item
Full Name of Individual (Last, First, Middle Thompson, Norfleet, Buckner, , Mailing Address 3784 Highland Park Place City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional)	er only)	104.17

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)				(check only one)								
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	ny information copied from such Reports and Sta for commercial purposes, other than using the					for the		pose c	of solici	ting c	ontribu	tions		
	NAME OF COMMITTEE (In Full)													
	Political Action Committee of the	e America	an A	Association of Ortho	pa	edic S	Sur	geor	ารP	AC	of A	AOS		
Α.	Full Name of Individual (Last, First, Middle Initi Throckmorton, Thomas, Ward, , MD,FAA		rgani	zation Name		Date o	of Re	eceipt						
	Mailing Address 4901 Fairfield Circle					M 11	/	30			y y 2021	Y		
	City Memphis	State TN		Zip Code 38117	_				: 1115 9 Receip		Period			
	FEC ID number of contributing federal political committee.	С				<u> </u>					41.	67		
	Name of Employer (for Individual) Campbell Clinic		•	on (for Individual) dic Surgeon		N	/lemo	o Item						
	Receipt For: General Primary General Other (specify) ▼	Aggregate	Year	to-Date ▼ 458.37										
В.	Full Name of Individual (Last, First, Middle Initi Warner, William, C, , Jr, MD, FA	al) or Full O	rgani	zation Name		Date of	of Re	eceipt						
	Mailing Address 215 East Cherry Circle					M 11		30			2021	Ŷ		
	City	State		Zip Code		Tran	sact	ion ID	: 11159	727				
	Memphis	TN		38117		Amour	nt of	Each	Receip	t this	Period			
	FEC ID number of contributing federal political committee.	С									41.	67		
	Name of Employer (for Individual) Campbell Clinic		•	on (for Individual) edic Surgeon		N	/lemo	o Item						
	Receipt For:	Aggregate	Year	-to-Date ▼										
	Other (specify) ▼		,	458.37										
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Weinlein, John, C, , MD,FAAOS	al) or Full O	rgani	zation Name		Date o	of Re	eceipt						
	Mailing Address 633 Valleybrook Dr					11 30 2021								
	City Memphis	State TN		Zip Code 38120-2707					: 11159 Receip		Period			
	FEC ID number of contributing federal political committee.	С				Ē		,	,		41.	67		
	Name of Employer (for Individual) Campbell Clinic		•	on (for Individual) dic Surgeon		N	/lem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year	to-Date ▼ 458.37										
⊢	UBTOTAL of Receipts This Page (optional)					Ľ.		,	. ,		125.	01		
T	OTAL This Period (last page this line number o	only)		••••••				_						

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 360 OF 55 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Folitical Action Committee of t			opaedic SurgeonsFAC of AAOS
Full Name of Individual (Last, First, Middle Williams, Keith, D, , MD, FAAOS	Date of Receipt		
Mailing Address 2336 Pinnacle Creek Dr			11 / D D / Y Y Y Y 11 30 2021
City Germantown	State TN	Zip Code 38138	Transaction ID : 11159729
		30130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		41.67
Name of Employer (for Individual)	Occupation (for Individual)		Memo Item
Campbell Clinic	Orth	nopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼		_
Other (specify) ▼	458.37]
Full Name of Individual (Last, First, Middle I 3. Page, Jean-Maurice, , , MD, FAAC	Date of Receipt		
Mailing Address 405 Ridings Mitchell Creek Rd			
City	State	Zip Code	11 30 2021
London	KY	40741	Transaction ID : 11159761 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) St Joseph Hospital London KY		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	500.00	1
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name	
C. Irvine, David, , , MD, FAAOS Mailing Address 13012 Sunny Dawn Ct			Date of Receipt
			11 30 2021
City Saint Louis	State MO	Zip Code 63127	Transaction ID : 11159763 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00]
SUBTOTAL of Receipts This Page (optional)			1291.67

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

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 361 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Constant only only only only only only only only
Any information copied from such Reports and a or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Clark, Joseph, W, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 5710 Macon Dr	State Zip Code	11 30 2021
Huntsville	AL 35802	Transaction ID : 11159764 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer (for Individual) The Orthopaedic Center	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00]
Full Name of Individual (Last, First, Middle Ir B. Meyer, Steven, J, , MD,FAAOS	l itial) or Full Organization Name	Date of Receipt
Mailing Address 2000 Plum Creek Rd		11 30 2021
City Sioux City	State Zip Code IA 51103	Transaction ID : 11159765
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) CNOS	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle Ir C. Kavookjian, Haik, G, , MD, FAAC		Date of Receipt
Mailing Address 555 Newfield Ave		11 / D D / Y Y Y Y Y 11 30 2021
City Stamford	StateZip CodeCT06905	Transaction ID : 11159767 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) Orgin Health Care Solutions	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)	·····	1500.00
TOTAL This Period (last page this line number	only)	

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kofoed, John, Charles, , MD, FAAOS Date of Receipt Α. Mailing Address 2619 Seminole Ct 1 11 30 2021 City Zip Code State Transaction ID: 11159768 CA Fairfield 94534-7871 Amount of Each Receipt this Period FEC ID number of contributing С 89.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Sutter Medical Group Receipt For: Aggregate Year-to-Date ▼ Primary General 979.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Halsey, David, A, , MD, FAAOS Date of Receipt Mailing Address PO Box 9000 12 2021 #132 03 City State Zip Code Transaction ID : 11160044 MA Edgartown 02539 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Martha's Vineyard Hospital Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Bailey, James, R., MD, FAAOS Date of Receipt Mailing Address 10439 Blue Summit Court М M 12 03 2021 City State Zip Code Transaction ID: 11160045 CA San Diego 92131 Amount of Each Receipt this Period FEC ID number of contributing С 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Naval Medical Center San Diego Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 218.00 Other (specify) 381.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Goertzen, David, Alan, , MD,FAAOS Mailing Address 5050 N Clinton Street City Fort Wayne FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedics Northeast Receipt For: Primary	State IN C Occu Orth	rganization Name Zip Code 46825-5886 upation (for Individual) opaedic Surgeon Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle I		500.00]
B. Mueller, Robert, , , MD, FAAOS Mailing Address 4632 Stonehaven Dr City Columbus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Licking Memorial Hospital Receipt For: Primary General Other (specify) ▼	State OH C Occu Orth	Zip Code 43220 upation (for Individual) iopaedic Surgeon Year-to-Date 300.00	Date of Receipt
Full Name of Individual (Last, First, Middle I Ayers, Michael, E, , MD,FAAOS Mailing Address 2 Prospect Ave City Scituate FEC ID number of contributing federal political committee. Name of Employer (for Individual) South Shore Orthopedics Receipt For: Primary General Other (specify)	State MA C Occu Orth	rganization Name Zip Code 02066-4321 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 364 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	Statements may not be sold or used by any p he name and address of any political committe	e to solicit contributions from such committee.
		opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Stokesbary, Steven, J, , MD, FAAOS	Initial) or Full Organization Name	Date of Receipt
Mailing Address 627 Arrowhead Ct	State Zip Code	12 / D D / Y Y Y Y 12 04 2021
Dakota Dunes	SD 57049	Transaction ID : 11160413 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) CNOS	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.00]
Full Name of Individual (Last, First, Middle Black, David, Albritton, , MD,PhD	Initial) or Full Organization Name	Date of Receipt
Mailing Address 12112 Fairway Drive		M M / D D / Y Y Y Y 12 04 2021
City Little Rock	State Zip Code AR 72212	Transaction ID : 11160414
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Univ of Arkansas	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.00]
Full Name of Individual (Last, First, Middle Prohaska, Matthew, G, , MD,FA		Date of Receipt
Mailing Address 69 Griggs Hill Road		M M / D D / Y Y Y Y 12 04 2021
City Danville	StateZip CodeVT05828	Transaction ID : 11160415 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) NVRH Orthopaedic Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 672.00	1
SUBTOTAL of Receipts This Page (optional).	·····	252.00
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X)		Lleo constate schodulo(s)	FOR LINE NUMBER: PAGE 365 OF 551
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
		Detailed Summary Page	
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full)			
	ne America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Berg, Jeffrey, H, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 1860 Town Center Dr Ste 30	00		M M / D D / Y Y Y Y 12 04 2021
City	State	Zip Code	Transaction ID : 11160417
Reston	VA	20190	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
ТСОА	Orth	opaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General		500.00	1
Other (specify) v		500.00	1
Full Name of Individual (Last, First, Middle In B. Schmidt, Todd, A, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 2865 Lake Park Drive			
	1		12 05 2021
City	State GA	Zip Code	Transaction ID : 11160418
Jonesboro	GA	30236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) OrthoAtlanta		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		1000.00]
Full Name of Individual (Last, First, Middle II		rganization Name	
c. Lintecum, Neal, D, , MD, FAAOS	5		Date of Receipt
Mailing Address 789 N 1500 Road			12 05 2021
City	State KS	Zip Code	Transaction ID : 11160419
Lawrence	ĸS	66049-9194	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00
Name of Employer (for Individual) Self Employed		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2400.00]
SUBTOTAL of Receipts This Page (optional)			950.00

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Dungy, Danton, S, , MD, FAAOS	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 9022 E Ann Way			M M / D D / Y Y Y Y 12 05 2021
City Scottsdale	State AZ	Zip Code 85260	Transaction ID : 11160422 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Dungy Orthopedic Center		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle B. Farber, Daniel, C, , MD,FAAOS	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 300 Fairhill Rd	1		12 06 / Y Y Y Y Y 12 06
City Wynnewood	State PA	Zip Code 19096-1804	Transaction ID : 11160430 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Penn Medicine Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle C. Early, John, S, , MD,FAAOS	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 8210 Walnut Hill Ln Ste 130			12 06 2021
City Dallas	State TX	Zip Code 75231	Transaction ID : 11160431 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Texas Orthopaedic Associates		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional).			1500.00

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S	CHEDULE A (FEC Form 3X)		Liso congrato achadula(c)	FOR LINE NUMBER: PAGE 367 OF 55
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Sta	tements ma	ay not be sold or used by any pe	
	for commercial purposes, other than using the r			
\backslash	NAME OF COMMITTEE (In Full)			
/	Political Action Committee of the	America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
/	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
Α.	Bear, Brian, Jeffrey, , MD, FAAOS	.,	- 3	Date of Receipt
	Mailing Address 1621 National Avenue			M = M / D = D / Y = Y = Y
	City	State	Zip Code	12 06 2021
	City Rockford	IL	61103	Transaction ID : 11160432
		_		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
				Memo Item
	Name of Employer (for Individual) Ortholllinois		upation (for Individual) nopaedic Surgeon	
	Receipt For:			_
	Primary General	Ayyreyate	Year-to-Date V	
	Other (specify) V	L	1000.00	
				-
D	Full Name of Individual (Last, First, Middle Initia Pierce, Troy, D, , MD, FAAOS	al) or Full O	rganization Name	Date of Receipt
D.	Mailing Address 4012 Edgewater PI SE			
	Maning Marcos 4012 Eugewaler PI SE			12 06 2021
	City	State	Zip Code	Transaction ID : 11160433
	Mandan	ND	58554	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	0		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	The Bone & Joint Center	Orth	nopaedic Surgeon	
	Receipt For: Primary General	Aggregate	Year-to-Date V	_
	Other (specify) V		1000.00	
				1
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
C.	Schmale, Gregory, A, , MD, FAAOS	S		Date of Receipt
	Mailing Address 6515 126th Ave NE			12 06 / Y Y Y Y
	City	State	Zip Code	Transaction ID : 11160434
	Kirkland	WA	98033	Amount of Each Receipt this Period
	FEC ID number of contributing	C		84.00
	federal political committee.	С		84.00
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	Seattle Children's		opaedic Surgeon	_
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		1008.00	1
	Other (specify)		7	1
s	UBTOTAL of Receipts This Page (optional)			584.00
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: Markov Mar
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi Burke, Charles, J, , III, MD, F Mailing Address 200 Delafield Rd <u>Ste 4010</u> City Pittsburgh FEC ID number of contributing federal political committee.	al) or Full Organization Name State Zip Code PA 15215-3235	Date of Receipt 12 06 2021 Transaction ID : 11160435 Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) UPMC Receipt For: Primary General Other (specify) V	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1008.00	Memo Item
Full Name of Individual (Last, First, Middle Initi B. Gomez, Gregory, , , MD Mailing Address 6201 Moonfield Dr City	Date of Receipt	
Huntington Beach FEC ID number of contributing federal political committee. Name of Employer (for Individual) Emanate Health Receipt For: Primary General Other (specify) ▼	State Zip Code C 92648 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 600.00	Transaction ID : 11160436 Amount of Each Receipt this Period 50.00 Memo Item
Full Name of Individual (Last, First, Middle Initi C. Green, Daniel, William, , MD,FAAC Mailing Address 535 E 70th St City New York FEC ID number of contributing federal political committee. Name of Employer (for Individual) Hosp for Special Surgery Receipt For: Primary General Other (specify)		Date of Receipt 12 07 2021 Transaction ID : 11162323 Amount of Each Receipt this Period 175.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	r	309.00

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)		(check only one)									
11			for each category of the Detailed Summary Page		X 11a 13		11b 14	11c		12 16		17	
	ny information copied from such Reports and S				n for the		pose of	solicitir		ntributi	ons	17	
	NAME OF COMMITTEE (In Full)												
	Political Action Committee of the	e America	an Association of Ortho	pa	edic S	Sur	geon	sPA	°C c	of AA	OS	3	
Full Name of Individual (Last, First, Middle A. Mosley, Emmett, Wayne, , MD,FAAO			rganization Name		Date o	of Re	eceipt						
	Mailing Address 220 Thompson Pl						12 07 Y Y Y Y 12 07 2021						
	City Roswell	State GA	Zip Code 30075-3522					111623 Receipt 1		Period			
	FEC ID number of contributing federal political committee.	С							_	84.0	0		
	Name of Employer (for Individual) ASPIRUS		upation (for Individual) nopaedic Surgeon		Μ	lemo	ttem						
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify) ▼		1008.00										
В.	Full Name of Individual (Last, First, Middle Ini Kiner, Dirk, W, , MD,FAAOS	tial) or Full O	rganization Name		Date o	of Re	eceipt						
Mailir	Mailing Address 449 Canyon Springs Dr				^M 12	/	07)21)	Y		
	City	State	Zip Code					111623					
	Hixson	TN	37343-2387	_	Amoun	nt of	Each F	Receipt 1	his F	Period		_	
	FEC ID number of contributing federal political committee.	С			<u> </u>			-	_	84.0	0		
	Name of Employer (for Individual) Southern Orthopaedic Trauma Surgeons		upation (for Individual) nopaedic Surgeon		M	lemo	tem						
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		1008.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini Law, Brian, C, , MD,FAAOS	tial) or Full O	rganization Name		Date o	of Re	eceipt						
	Mailing Address 541 E Erie Street Unit 314				12 ^M	/	D 07			021 [°]	Y		
	City Milwaukee	State WI	Zip Code 53202	_				111623 Receipt 1		Period			
	FEC ID number of contributing federal political committee.	С				, .	. ,	_	250.0	0			
	Name of Employer (for Individual) Medical College of Wisconsin		upation (for Individual) opaedic Surgeon		N	lemo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00										
5	SUBTOTAL of Receipts This Page (optional)						y	. ,		418.0	0		

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

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Hsu, Joseph, R, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2816 Hedgewyk Pl			12 07 2021
City Charlotte	State NC	Zip Code 28211	Transaction ID : 11162327 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Carolinas Medical Center		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle B. Gallant, Gregory, G, , MD,MBA,FA Mailing Address 3588 Wellsford Lane		rganization Name	Date of Receipt
City	State	Zip Code	12 07 2021 Transaction ID : 11162328
Doylestown	PA	18902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.33
Name of Employer (for Individual) Rothman Institute		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.30]
Full Name of Individual (Last, First, Middle I C. Baker, James, Douglas, , MD, F		rganization Name	Date of Receipt
Mailing Address 560 S Loop Rd			M M / D D / Y Y Y Y 12 07 2021
City Edgewood	State KY	Zip Code 41017	Transaction ID : 11162329 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Commonwealth Orthopedic Centers		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional).			1333.33

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 371 OF 551 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)		
Political Action Committee of the		ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Spelich, Mark, A, , MD,FAAOS Mailing Address PO Box 8285	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	12 07 2021 Transaction ID : 11162330
Boise FEC ID number of contributing	ID 83707	Amount of Each Receipt this Period
federal political committee.	Occupation (for Individual)	Memo Item
Treasure Valley Hospital Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle I 3. Sullivan, Patrick, Michael, , MD, FA Mailing Address 6001 Westown Pkwy		Date of Receipt
City	State Zip Code	12 07 2021 Transaction ID : 11162337
West Des Moines	IA 50266-7702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) Des Moines Orthopaedic Surgeons	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle I Harvey, Gregory, P, , MD,FAAO		Date of Receipt
Mailing Address 480 Park Avenue Apt 14J City	State Zip Code	12 / 07 / 2021 Transaction ID : 11162340
New York	NY 10022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) Metropolitan Hospital	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	·	2500.00
TOTAL This Period (last page this line numbe	r only)	

FEC Schedule A (Form 3X) Rev. 06/2016

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 372 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)		
/		ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Mejia, Alfonso, , , MD,MPH,FAA Mailing Address 5332 South Shore Drive	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	12 08 2021 Transaction ID : 11162820
Chicago	IL 60615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer (for Individual) Illinois Association of Orthopedic Sur	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1932.00	
Full Name of Individual (Last, First, Middle Ir Gray, F, Scott, , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt
Mailing Address 25 Olmstead Lane		12 08 2021
City Ridgefield	State Zip Code CT 06877	Transaction ID : 11162821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer (for Individual) Connecticut Family Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle Ir Nugent, Matthew, T, , MD, FAAC		Date of Receipt
Mailing Address 1142 Sunburst Way		12 / D D / Y Y Y Y 2021
City Grants Pass	StateZip CodeOR97526-6352	Transaction ID : 11162822 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)	•	684.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER:

PAGE 373 OF

551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and Sta or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initi A. Reddy, Nithin, C, , MD,FAAOS Mailing Address 5436 Soledad Rd City La Jolla FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State CA	Zip Code 92037	Date of Receipt 12 08 2021 Transaction ID : 11162827 Amount of Each Receipt this Period 1000.00 Memo Item
Southern California Permanente Med Grp Receipt For: Primary General Other (specify) ▼	Aggregate	nopaedic Surgeon Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Initi B. Bouvier, Daniel, Patrick, , MD,FAAO Mailing Address 26 Swallow Dr City Hollis		Zip Code 03049-6291	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer (for Individual) New Hampshire Orthopaedic Center Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	1000.00 Memo Item
Full Name of Individual (Last, First, Middle Initi Rivera, Alberto, R, , MD,FAAOS Mailing Address 35 Calle Juan C Borbon Ste 67	,		Date of Receipt
City Guenabo FEC ID number of contributing federal political committee.	PR	Zip Code 00969	Transaction ID : 11162901 Amount of Each Receipt this Period 1000.00
Name of Employer (for Individual) Rivera Shoulder Orthopaedics and Sport Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			3000.00

FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Concerc only one) Image: The second secon
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may not be sold or used by any pe ame and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initia A. Clain, Michael, R, , MD, FAAOS Mailing Address 9 Indian Head Road City Riverside FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Neurosurgery Specialists Receipt For: Primary General Other (specify) ▼	I) or Full Organization Name State Zip Code C 06878 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1008.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initia B. Armstrong, April, D, , MD,FAAOS Mailing Address 30 Hope Drive Bldg A, Suite 2900, EC089 City Hershey FEC ID number of contributing federal political committee. Name of Employer (for Individual) Penn State Health Milton S. Hershey Me Receipt For: Primary General Other (specify) ▼	I) or Full Organization Name State Zip Code PA 17033 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 09 2021 Transaction ID : 11162903 Amount of Each Receipt this Period 125.00 Memo Item
Full Name of Individual (Last, First, Middle Initia C. Barba, Mark, Lucian, , MD, FAAOS Mailing Address 5229 Parliament PI City Rockford FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ortholllinois Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional)		1209.00

FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Bellamy, Jaime, Lyn, , DO,FAAOS Mailing Address 2161 Cranes Creek Rd City Cameron FEC ID number of contributing federal political committee. Name of Employer (for Individual) Salf Employed	State NC C	rganization Name Zip Code 28326 upation (for Individual)	Date of Receipt 12 09 2021 Transaction ID : 11162932 Amount of Each Receipt this Period 250.00 Memo Item
Self Employed Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle B. Pletka, Joshua, D, , MD, FAAOS Mailing Address 575 Turnpike St #11	Date of Receipt		
City North Andover FEC ID number of contributing federal political committee. Name of Employer (for Individual) Upstate Orthopedics Receipt For:	Orth	Zip Code 01845 upation (for Individual) nopaedic Surgeon	Transaction ID : 11162940 Amount of Each Receipt this Period 1000.00 Memo Item
Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle C. Cooke, Shannon, E, , MD,FAA	Initial) or Full O	Year-to-Date ▼ 1000.00 rganization Name	Date of Receipt
Mailing Address 1342 Elmwood Dr	00		12 09 2021
City Abilene	State TX	Zip Code 79605-4906	Transaction ID : 11162950 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Abilene Bone and Joint, LLC Receipt For: Primary Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 500.00	Memo Item
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line numl			1750.00

SCHEDULE A (FEC Form 3X) ľ

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 376 OF 55 (check only one)		
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using th				
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Ortho	ppaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Ir DiRaimondo, Carl, , , MD,FAAOS	nitial) or Full Organization Name	Date of Receipt		
Mailing Address 2331 Woodridge Dr City	State Zip Code	12 09 2021 Transaction ID : 11162960		
Manitowoc	WI 54220	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer (for Individual) Baycare Clinic	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name of Individual (Last, First, Middle Ir B. Siffri, Paul, Charles, , MD, FAAOS	Initial) or Full Organization Name	Date of Receipt		
Mailing Address 101 Putney Bridge Lane		12 09 2021		
City Simpsonville	State Zip Code SC 29681	Transaction ID : 11162962		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer (for Individual) Steadman Hawkins Clinic of the Carolin	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name of Individual (Last, First, Middle Ir . Hansen, Matthew, L, , MD,FAAO		Date of Receipt		
Mailing Address 3362 E Virgil Dr		12 09 / Y Y Y Y 2021		
City Gilbert	StateZip CodeAZ85298	Transaction ID : 11162964 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer (for Individual) Arizona Spine & Joint Hospital	Occupation (for Individual) Orthopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)	·····	1750.00		
TOTAL This Period (last page this line number	r only)			

FOR LINE NUMBER:

PAGE 377 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Subramanian, Navin, , , MD,FAAOS Mailing Address 4611 Shetland Ln City Houston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic Assoc Receipt For: Primary General Other (specify) ▼	State TX C	Zip Code 77027-6207 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt M12 09 2021 Transaction ID : 11162968 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle B. Dennis, Douglas, A, , MD,FAAOS Mailing Address 7250 South Polo Ridge Dr City Littleton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Colorado Joint Replacement Receipt For: Primary General Other (specify) ▼	S State CO C Occ Ort	Zip Code 80128 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 12 09 2021 Transaction ID : 11162970 Amount of Each Receipt this Period 1000.00 1000.00 Memo Item
Full Name of Individual (Last, First, Middle C. Cashmore, Bourck, D, , MD, F/ Mailing Address 225 W Mt Elden Lookout City Flagstaff FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northern Arizona Orthopaedics Receipt For: Primary General Other (specify)	AAOS Rd State AZ C Occu Orth	Zip Code 86001 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt 12 09 2021 Transaction ID : 11163005 Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	,		2000.00

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER: PAGE 378 OF 551

IT	EMIZED RECEIPTS		for ea	eparate schedule(s) ch category of the ed Summary Page	(check o 11a 13		ie) 11b 14	11c 15	12 16	17
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	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Ass	ociation of Ortho	paedic	Sur	geons	sPA	C of A	AOS
A.	Full Name of Individual (Last, First, Middle Initia L'Insalata, John, C, , MD, FAAOS Mailing Address 495 Wooddale Ave	al) or Full O	organizatio	on Name	Date	of Re	ceipt		V V	
	City	State	Zin	Code	12	2	09 on ID : 1		2021	
	Staten Island	NY		301					nis Perioc	ł
	FEC ID number of contributing federal political committee.						7		250	.00
	Name of Employer (for Individual)	Оссі	upation (f	or Individual)		Memo	Item			
	Orthopaedic Surgical Consultant	Orth	nopaedic	Surgeon	_					
	Receipt For: Primary General	Aggregate	Year-to-D	Date 🔻						
	Primary General Other (specify) ▼		-	250.00						
в.	Full Name of Individual (Last, First, Middle Initia Buckley, Steven, L, , MD, FAAOS	al) or Full O	organizatio	on Name	Date	of Re	ceipt			
	Mailing Address 416 Locust Ave SE			12		D D D 10	/ Y	2021	Y	
	City	State		Code			on ID : 1			
	Huntsville	AL	358	301	Amou	int of	Each Re	eceipt th	nis Perioo	d
	FEC ID number of contributing federal political committee.	С	C					- 7	1000	.00
	Name of Employer (for Individual) Crestwood Medical Center		upation (i nopaedic	or Individual) Surgeon		Memo	Item			
	Receipt For:	Aggregate	Year-to-D	Date 🔻						
	Primary General Other (specify) ▼		, .	1000.00						
с.	Full Name of Individual (Last, First, Middle Initia Politi, Joel, Roger, , MD, FAAOS	al) or Full O	organizatio	on Name	Date	of Re	ceipt			
	Mailing Address 116 S Columbia Ave				M 12	2	D D 10	/ Y	2021 Y	Y
	City Columbus	State OH	Zip 432	Code 209			i on ID : Each Re		54 nis Perioc	d
FEC ID number of contributing federal political committee.							9	,	500	
Self Employed Or			upation (f	or Individual) Surgeon		Memo	Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-E	bate ▼ 500.00						
F	UBTOTAL of Receipts This Page (optional)						, . , .	, ,	1750.	.00

IT	EMIZED RECEIPTS		Use separate schedule for each category of th Detailed Summary Pag	ne	check only 11a 13	y one) 11b 14	11c	12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	address of any political con	mmittee to	solicit cor	ntributions	s from suc	commi	ttee.
$\langle \rangle$	Political Action Committee of the	e America	an Association of	Orthopa	aedic S	Surgeo	nsPA	C of A	AOS
Α.	Full Name of Individual (Last, First, Middle Initi McHenry, Timothy, Patrick, , MD, FAAOS		Organization Name		Date of	Receipt			
	Mailing Address 21 W Prentiss Ave				12 ^M	/ D	0 /	2021	Y
	City Greenville	State SC	Zip Code 29605				: 111635 Receipt t		d
	FEC ID number of contributing federal political committee.	С				-7		1000	0.00
	Name of Employer (for Individual) Greenville Health System		upation (for Individual) nopaedic Surgeon		M	emo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.0	00					
в.	Full Name of Individual (Last, First, Middle Initi Bazzini, Robert, M, , MD,FAAOS	al) or Full O	Organization Name			Receipt			
	Mailing Address 14 Lee Way	Ctoto	Zin Code		12 10 2021			Y	
	City Oakland	State NJ	Zip Code 07436				: 111636 Receipt t		d
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Orthopaedic Surgeon				-		250	0.00
	Name of Employer (for Individual) Orthopaedic Hand Specialists				M	emo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.4	00					
с.	Full Name of Individual (Last, First, Middle Initi Nahigian, Kevin, K, , MD, FAAOS	al) or Full O	Organization Name		Date of	Receipt			
	Mailing Address 85 Red Bay Rd				^M 12	/ D 1	D / 1	2021	Y
	City Elgin	State SC	Zip Code 29045				e: 111636 Receipt t		d
FEC ID number of contributing federal political committee.		С				.,	. ,	84	I.00
	Name of Employer (for Individual) Carolina Shoulder & Knee Specialists		upation (for Individual) hopaedic Surgeon		M	emo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.0	00					
s	UBTOTAL of Receipts This Page (optional)			····· >	_	,	,	1334	.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER: PAGE 379 OF 551

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 380 OF 551		
ITEMIZED RECEIPTS		for each category of the	(check only one) X 11a 11b 11c 12		
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports	and Statements ma	ay not be sold or used by anv	person for the purpose of soliciting contributions		
			ee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
			nopaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Mide A. Glassman, Andrew, H, , MD,MS,FA	AAO	rganization Name	Date of Receipt		
Mailing Address 126 North Drexel Avenu	-		12 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Columbus	State OH	Zip Code 43209	Transaction ID : 11163612		
		40208	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		84.00		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item		
Ohio State University Wexner Medical C	Orth	opaedic Surgeon			
Receipt For:	Aggregate	Year-to-Date 🔻			
Primary General		420.00			
Other (specify)		420.00			
Full Name of Individual (Last, First, Mide	dle Initial) or Full O	rganization Name			
B. Lunt, John, G, , MD, FAAOS	-		Date of Receipt		
Mailing Address 5 Logans Way	Mailing Address 5 Logans Way				
City	Otata	Zin Code	12 11 2021		
City	State CT	Zip Code 06811	Transaction ID : 11163616		
Danbury			Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		1000.00		
Name of Employer (for Individual) Hand Center		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General	33 3-10				
Other (specify) v		, 1000.00			
Full Name of Individual (Last, First, Mide C. Bernard, Johnathan, , , MD, M		rganization Name	Date of Receipt		
Mailing Address 21549 Glebe View Dr			12 12 2021		
City	State	Zip Code	Transaction ID : 11163617		
Broadlands	VA	20148	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	5		84.00		
Name of Employer (for Individual) National Sports Medicine Institute		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General		1008.00			
Other (specify)		1000.00			
[
SUBTOTAL of Receipts This Page (option	al)		1168.00		
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TOTAL This Period (last page this line number only)......

FEC Schedule A (Form 3X) Rev. 06/2016

Lise senarate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	f the Americ	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Marinello, Patrick, Gaetano, , MD, F. Mailing Address 43 Bradhaven Rd City Slingerlands FEC ID number of contributing federal political committee. Name of Employer (for Individual) The Bone and Joint Center Receipt For: Primary General Other (specify)	AAOS State NY C Occ Ort	Drganization Name Zip Code 12159 Pupation (for Individual) hopaedic Surgeon Year-to-Date ▼ 1108.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Dodds, Julie, A, , MD,FAAOS Mailing Address 2603 90th Ave	e Initial) or Full C	Organization Name	Date of Receipt
City Lone Rock FEC ID number of contributing federal political committee. Name of Employer (for Individual) Michigan State University Receipt For: Primary General Other (specify) ▼	Ort	Zip Code 50559 supation (for Individual) hopaedic Surgeon Year-to-Date ▼ 1308.00	Transaction ID : 11163619 Amount of Each Receipt this Period 84.00 Memo Item
Full Name of Individual (Last, First, Middle C. Braaton, Paul, J, , MD,FAAOS Mailing Address 1335 Coffee Rd Ste 100 Ste 100 City Modesto FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoMed Receipt For: Primary General Other (specify)	C C Occ Ort	Drganization Name Zip Code 95355 Pupation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1008.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num			252.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 382 OF 55 (check only one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Political Action Committee of the	e name and add	dress of any political committee			
Full Name of Individual (Last, First, Middle Initial) or Espinoza, Luis, M, , MD, FAAOS Mailing Address 5 Savannah Ridge Lane		ganization Name	Date of Receipt		
City Metairie	State LA	Zip Code 70001	12 12 2021 Transaction ID : 11163621 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		84.00		
Name of Employer (for Individual) Orthopaedic Center for Sports Medicine Receipt For: Primary General Other (specify) ▼	Ortho	pation (for Individual) paedic Surgeon 'ear-to-Date ▼ 1008.00	Memo Item		
Full Name of Individual (Last, First, Middle In John, Thomas, K , , MD,FAAOS Mailing Address 522 Eastbrook Rd			Date of Receipt		
City Ridgewood	State NJ	Zip Code 07450-2110	Transaction ID : 11163622 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual) Active Orthopedics and Sports Medicine		pation (for Individual) ppaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 1008.00]		
Full Name of Individual (Last, First, Middle In Mansfield, David, J, , MD,FAAOS Mailing Address 5019 Montoya Rd	iitial) or Full Org	ganization Name	Date of Receipt		
City El Paso	State TX	Zip Code 79922	12 12 2021 Transaction ID : 11163623 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual) El Paso Orthopaedic Surgery Group Receipt For: Primary General Other (specify)	Orthop	oation (for Individual) paedic Surgeon ⁄ear-to-Date ▼ 1008.00	Memo Item		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			252.00		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Keeve, Jonathan, P, , MD,FAAOS Mailing Address 525 S Shoreline Drive City Liberty Lake FEC ID number of contributing federal political committee. Name of Employer (for Individual) Northwest Orthopaedic Specialists Receipt For: Primary General Other (specify) ▼	State WA C Occu Orth	rganization Name Zip Code 99019 Inpation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Ho, Christine, Ann, , MD,FAAOS Mailing Address 11608 Valleydale Dr City Dallas FEC ID number of contributing federal political committee. Name of Employer (for Individual) Texas Scottish Rite Hospital For Child Receipt For: Primary General Other (specify) ▼	State TX C Occu Orth	rganization Name Zip Code 75230 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle Krueger, Chad, A, , MD,FAAOS Mailing Address 705 Kyle Dr City Ambler FEC ID number of contributing federal political committee. Name of Employer (for Individual) Rothman Institute Receipt For: Primary General Other (specify)	State PA C Occu Ortho	rganization Name Zip Code 19002 Ipation (for Individual) opaedic Surgeon Year-to-Date ▼ 1008.00	Date of Receipt 12 13 2021 Transaction ID : 11163628 Amount of Each Receipt this Period 84.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			834.00

FOR LINE NUMBER: PAGE 384 OF 551

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Hogan, MaCalus, Vinson, , MD,MBA,FAA	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 106 Field Brook Lane			12 / D D / Y Y Y Y Y 12 13 2021
	City Gibsonia	State PA	Zip Code 15044	Transaction ID : 11163629 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) University of Pittsburgh Medical Cente		ipation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
в.	Full Name of Individual (Last, First, Middle Initia James, Jeremy, R, , MD, FAAOS	al) or Full Or	ganization Name	Date of Receipt
	Mailing Address 7 Briar Hollow St			12 13 2021
	City Covington	State LA	Zip Code 70433-4511	Transaction ID : 11163630 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual) DISC of Louisiana		ipation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1200.00]
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Espiritu, Michael, T, , MD,FAAOS	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 7 Spanish Bay			12 / D D / Y Y Y Y 12 13 2021
	City North Sioux City	State SD	Zip Code 57049	Transaction ID : 11163631 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer (for Individual) CNOS		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00]
s	UBTOTAL of Receipts This Page (optional)			650.00
т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3	X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 385 OF 551 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only only Image: Check only Image:
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee o	f the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Midd A. Martin, Daniel, J, , Jr, MD, FA		rganization Name	Date of Receipt
Mailing Address 621 S New Ballas Rd Ste	e 3005B		12 13 <u>Y Y Y Y</u>
City Saint Louis	State MO	Zip Code 63141-8200	Transaction ID : 11163711 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Midd B. Paschal, Scott, , , MD, FAAOS	le Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7115 Greenville Ave Ste	310		12 13 2021
City Dallas	State TX	Zip Code 75231	Transaction ID : 11164022 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Midd c. Courtney, Paul, Maxwell, , MD		rganization Name	Date of Receipt
Mailing Address 902 S Front St			12 / D D / Y Y Y Y 12 14 2021
City Philadelphia	State PA	Zip Code 19147	Transaction ID : 11164029 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Rothman Institute		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2008.00	
SUBTOTAL of Receipts This Page (optiona	al)		1584.00

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each cate Detailed Sun		(check only one)
Any information copied from such Reports and or for commercial purposes, other than using t		rson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Associa	tion of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I McGuire, Michael, S, , MD, FAAOS Mailing Address 5478 Saddle Ridge Ct City Las Cruces FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	nitial) or Full Organization Nam	566 vidual)	Date of Receipt
Full Name of Individual (Last, First, Middle I Mills, Mark, F, , MD,FAAOS Mailing Address 78 E Washington St City Chagrin Falls FEC ID number of contributing federal political committee. Name of Employer (for Individual) Panorama Orthopedics & Spine Center Receipt For: Primary General Other (specify)	Itial) or Full Organization Name State Zip Code OH 44022 C Occupation (for Indir Orthopaedic Surgeo Aggregate Year-to-Date ▼	ividual)	Date of Receipt
Full Name of Individual (Last, First, Middle I C. Emerson, Daniel, J, , MD, FAAC Mailing Address 8712 Whetstone Rd City Evansville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic Associates Receipt For: Primary General Other (specify)		vidual)	Date of Receipt M M M M M Y
SUBTOTAL of Receipts This Page (optional)		r	1750.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 387 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Champine, Michael, , , MD, FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2928 Stanford Ave			12 14 2021
City Dallas	State TX	Zip Code 75225	Transaction ID : 11164255 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General		Year-to-Date V	-
Other (specify)	L	1000.00	
Full Name of Individual (Last, First, Middle 3. Grimm, Matthew, R, , MD, FAAO		rganization Name	Date of Receipt
Mailing Address 920 Avenue B			12 16 2021
City	State LA	Zip Code	Transaction ID : 11164766
Marrero FEC ID number of contributing federal political committee.	C	70072	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Jefferson Orthopaedic Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify)		1008.00]
Full Name of Individual (Last, First, Middle C. Scolaro, John, Alan, , MD,FAAC		rganization Name	Date of Receipt
Mailing Address 11772 Las Palmas Dr			12 16 2021
City Santa Ana	State CA	Zip Code 92705-3118	Transaction ID : 11164856 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer (for Individual) UCI Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1584.00

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

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Surdam, Jonathan, William, , MD, FAAO Mailing Address 2519 E Summer Creek Dr		rganization Name	Date of Receipt
	City Bloomington	State IN	Zip Code 47401	Transaction ID : 11164974 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) IU Health		ipation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
в.	Full Name of Individual (Last, First, Middle Initi Lucey, Stephen, Davis, , MD,FAAOS Mailing Address 200 W Wendover Ave		rganization Name	Date of Receipt
	City Greensboro	State NC	Zip Code 27401-1307	12 16 2021 Transaction ID : 11164976 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С		
	Name of Employer (for Individual) Sports Medicine & Joint Replacement		upation (for Individual) Iopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
С.	Full Name of Individual (Last, First, Middle Initi Lee, Brian, Kyoung, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 13340 Chalon Rd	State	Zip Code	12 16 2021
	Los Angeles	CA	90049-1808	Transaction ID : 11164980 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Kerlan-Jobe Orthopaedic Clinic Receipt For:	Ortho	upation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date	1
s	UBTOTAL of Receipts This Page (optional)		······· I	1000.00
Т	OTAL This Period (last page this line number o	only)		

FOR LINE NUMBER: PAGE 389 OF 551

IT	EMIZED RECEIPTS	Jse separate schedule(s) or each category of the Detailed Summary Page	L `	heck only 11a 13	í í	1b	11c 15	12			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay n .ddre	ot be sold or used by any pe ess of any political committee	ersor to s	n for the solicit cor	purpo: ntributi	se of sons fro	solicitine om suc	g contri h comn	butions nittee
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an	Association of Orthc	pa	edic S	urge	eons	PA	C of /	AAOS
A.	Full Name of Individual (Last, First, Middle Initia Melton, Heather, , , MD, FAAOS	al) or Full O	rgar	nization Name		Date of	Rece	ipt			
	Mailing Address 1323 E Wood St City	State		Zip Code		12 T	L	02	/ Y	2021	Y
	Paris	TN		38242		Amount			116498 ceipt th		od
	FEC ID number of contributing federal political committee.	С					-			25	50.00
	Name of Employer (for Individual)		•	tion (for Individual)		Me	emo It	em			
	Henry County Medical Center	Orth	nopa	aedic Surgeon							
	Receipt For: Primary General	Aggregate	Yea	ur-to-Date ▼							
	Other (specify) ▼		-	250.00							
в.	Full Name of Individual (Last, First, Middle Initia Urband, Lindsey, , , MD,FAAOS	al) or Full O	rgai	nization Name		Date of	Rece	ipt			
	Mailing Address 15066 Almond Orchard Lane Suite 403					^M 12	/	D D D 03	/ Y	2021	Ý
	City	State CA		Zip Code 92131					116499	-	
				C			of Ea	ach Re	ceipt tr	nis Peri 8	od 34.00
	Name of Employer (for Individual) San Diego Hand Specialists		•	tion (for Individual) aedic Surgeon		Me	emo It	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1508.00							
<u> </u>	Full Name of Individual (Last, First, Middle Initia Grosso, Matthew, , , MD	al) or Full O	rgai	nization Name		Date of	Rece	ipt			
	Mailing Address 5 Pembroke Dr					^M 12	/	03	/ Y	2021	Ý
	City Avon	State CT		Zip Code 06001	+	Trans Amount			116499	-	od
	FEC ID number of contributing federal political committee.					UI Ea		iceipt ti		34.00	
				Occupation (for Individual) Orthopaedic Surgeon				em			
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 336.00							
⊢	UBTOTAL of Receipts This Page (optional)				_	-	, ,	-	, ,	41	8.00
ΙT	OTAL This Period (last page this line number o	nly)		····· •				_			

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FOR LINE NUMBER:

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		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Tabaie, Sean, , , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1219 Delafield PI NW			12 03 2021
City Washington	State DC	Zip Code 20011	Transaction ID : 11164992 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Children's National Medical Center		upation (for Individual) lopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00]
B. Calfee, Michael, David, , MD, FAA Mailing Address 1720 E Reelfoot Ave Ste 10	OS	rganization Name	Date of Receipt
			12 03 2021
City Union City	State TN	Zip Code 38261-6049	Transaction ID : 11164993 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Advanced Ortho & Sports Med		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle C. Mardjetko, Steven, M, , MD, FA		rganization Name	Date of Receipt
Mailing Address 443 E Illinois Road			12 03 2021
City Lake Forest	State IL	Zip Code 60045	Transaction ID : 11164994 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri		
Name of Employer (for Individual) Illinois Bone and Joint Institute		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4000.00]
SUBTOTAL of Receipts This Page (optional).			2334.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER: PAGE 391 OF 551

		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Redondo, Luis, J, , Jr, MD,FAA	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 10719 W 160TH ST			12 03 2021
City Orland Park	State IL	Zip Code 60467	Transaction ID : 11164995 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Midwest Orthopaedic Consultants		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle B. Blotter, Robert, H, , MD,FAAOS	e Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 1116 Ortman Road Ste 190			M M / D D / Y Y Y Y 12 06 2021
City Marquette	State MI	Zip Code 49855	Transaction ID : 11164996
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Advanced Center of Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle C. Engstrom, Stephen, Matthew, ,			Date of Receipt
Mailing Address 9207 Duncaster Ct			M M / D D / Y Y Y Y 12 06 2021
City Brentwood	State TN	Zip Code 37027	Transaction ID : 11164997 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Vanderbilt Univ-Vanderbilt Ortho Inst		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00]
SUBTOTAL of Receipts This Page (optional)		▶ 1334.00

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Kefalas, John, C, , MD,FAAOS Mailing Address 2905 N Main St Suite G City Decatur FEC ID number of contributing federal political committee. Name of Employer (for Individual) Central Illinois Bone and Joint Receipt For: Primary General Other (specify) ▼	State IL Occu Orthe	ganization Name Zip Code 62526-4276 pation (for Individual) opaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt 12 06 2021 Transaction ID : 11164998 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle In Hettrich, Carolyn, , , MD,MPH,FAA Mailing Address 28A Miller Hill Rd City Dover FEC ID number of contributing	Date of Receipt		
federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1008.00	Memo Item
Full Name of Individual (Last, First, Middle II Holmes, S, Wendell, , Jr, MD,FA Mailing Address 101 Belleclave Rd		ganization Name	Date of Receipt
City Columbia FEC ID number of contributing federal political committee.	State SC	Zip Code 29223	Transaction ID : 11165001 Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Palmetto Health Receipt For: Primary General Other (specify)	Ortho	pation (for Individual) opaedic Surgeon Year-to-Date ▼ 400.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			684.00

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page			
		any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of C	Orthopaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Ir A. Schmitz, Matthew, R, , MD,FAAOS Mailing Address 111 Ottawa Run City San Antonio FEC ID number of contributing federal political committee. Name of Employer (for Individual) San Antonio Military Medical Center Receipt For: Primary General Other (specify) ▼	itial) or Full Organization Name State Zip Code TX 78231 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1150.00 1150.00	Date of Receipt 12 06 2021 Transaction ID : 11165002 Amount of Each Receipt this Period 100.00 Memo Item		
B. Full Name of Individual (Last, First, Middle Ir B. Sheehan, John, P, , MD,FAAOS Mailing Address 6621 Cuming St	Date of Receipt			
City Omaha FEC ID number of contributing federal political committee. Name of Employer (for Individual) Boys Town Receipt For: Primary General Other (specify) ▼	NE 68132 EC ID number of contributing oderal political committee. C Iame of Employer (for Individual) oys Town Occupation (for Individual) Orthopaedic Surgeon eceipt For: Aggregate Year-to-Date ▼ Primary General			
C. Keeney, James, A, , MD,FAAOS Mailing Address 1106 Shallow Ridge Circle	itial) or Full Organization Name	Date of Receipt		
City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) University Missouri Orthopaedic Instit Receipt For: Primary General Other (specify)	State MO Zip Code 65201 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11165004 Amount of Each Receipt this Period 250.00 Memo Item		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number				

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 394 OF 55 (check only one)		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	erson for the purpose of soliciting contributions e to solicit contributions from such committee. opaedic SurgeonsPAC of AAOS				
Full Name of Individual (Last, First, Middle Backe, Henry, A, , Jr, MD,FAA	Initial) or Full C	organization Name	Date of Receipt		
Mailing Address 305 Blackrock Turnpike	State	Zin Codo	12 / D D / Y Y Y Y Y 12 06 2021		
City Fairfield	State CT	Zip Code 06825	Transaction ID : 11165005 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer (for Individual) Orthopaedic Specialty Group PC Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item		
Full Name of Individual (Last, First, Middle Boothby, Michael, Hayden, , MD, Mailing Address 119 Hidden Lake Ranch Ro	FAAOS	organization Name	Date of Receipt		
City Aledo	State TX	Zip Code 76008	12 06 2021 Transaction ID : 11165006 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) The Ortho & Sports Med Institute		upation (for Individual) hopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	1		
Full Name of Individual (Last, First, Middle Chutkan, Norman, Barrington, ,			Date of Receipt		
Mailing Address 1 E Lexington Ave	Chata	Zin Oode	12 08 2021		
City Phoenix	State AZ	Zip Code 85012	Transaction ID : 11165008 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		84.00		
Name of Employer (for Individual) The CORE Institute	Orth	upation (for Individual) lopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00	1		
SUBTOTAL of Receipts This Page (optional).			584.00		
TOTAL This Period (last page this line numb	er only)				

FOR LINE NUMBER:

PAGE 395 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	nd Statements may not be sold or used by any p g the name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of	f the American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Michaud, Marc, J, , MD, FAAOS Mailing Address 11 Cherry Ln City Bedford FEC ID number of contributing federal political committee. Name of Employer (for Individual) NH Orthopaedic Center Receipt For: Primary General Other (specify) ▼	State NH Zip Code 03110 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Boynton, Melbourne, D, , MD,FA Mailing Address 90 Briarwood Lane City Rutland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Ruthland Regional Medical Center Receipt For: Primary General Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle More, Robert, Cameron, , MD, Mailing Address 8100 Wescott Drive Suite 101 City Flemington FEC ID number of contributing federal political committee. Name of Employer (for Individual) MidJersey Orthopaedics Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optiona	l)	2084.00
TOTAL This Period (last page this line num	iber only)	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 396 OF 551 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee. opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Davis, Daniel, Edward, , MD,FAAOS	Initial) or Full C	organization Name	Date of Receipt
Mailing Address 410 Thayer Road	State	Zip Code	12 / 13 / 2021 Transaction ID : 11165013
Swarthmore	PA	19081	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) Thomas Jefferson Univ Hosp Receipt For: Primary General	homas Jefferson Univ Hosp Orthopaed Receipt For: Aggregate Year-t		Memo Item
Uther (specify) ▼ Full Name of Individual (Last, First, Middle	Initial) or Full C	1000.00	
B. Rubinstein, Michael, P, , MD,FAA Mailing Address 27015 Glaramara Lane			Date of Receipt
City Yorba Linda	State CA	Zip Code 92887	Transaction ID : 11165014 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Specialty Orthopedic Group		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle C. Cimino, William, Gerard, , MD,F		organization Name	Date of Receipt
Mailing Address 52 Beach Road Suite 207			12 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fairfield	State CT	Zip Code 06824	Transaction ID : 11165015 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Beach Road Orthopaedics		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00]
SUBTOTAL of Receipts This Page (optional).			584.00
TOTAL This Period (last page this line numb	er only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 397 OF 551			
ITEMIZED RECEIPTS		for each category of the	(check only one)			
		Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports an	d Statements ma	av not be sold or used by any r	person for the purpose of soliciting contributions			
			ee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name				
A. Parsley, Brian, S, , MD,FAAOS,F		Igamzalion Name	Date of Receipt			
Mailing Address 302 Pine Shadows Dr	ailing Address 302 Pine Shadows Dr					
Suite 2400			12 13 2021			
City	State TX	Zip Code	Transaction ID : 11165016			
Houston	1.4	77056	Amount of Each Receipt this Period			
FEC ID number of contributing	С		84.00			
federal political committee.	-					
Name of Employer (for Individual)		upation (for Individual)	Memo Item			
UT Health Physicians	Orth	opaedic Surgeon				
Receipt For:	Aggregate	Year-to-Date ▼	_			
Other (specify) V		1008.00				
			-			
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name				
B. Damalas, Dino, , , MBA			Date of Receipt			
Mailing Address 9400 W Higgins Rd	Mailing Address 9400 W Higgins Rd					
City	City State Zip Code					
Rosemont	IL	60018-4975	Transaction ID : 11165017 Amount of Each Receipt this Period			
FEC ID number of contributing						
federal political committee.	C		84.00			
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item			
AAOS		ef Operating Officer				
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General						
Other (specify) v		, 1008.00	4			
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name				
c. Roberson, Rowland, M, , MD, F			Date of Receipt			
Mailing Address 641 N Lamar Blvd						
City	State	Zip Code	12 14 2021			
City Oxford	MS	38655-3235	Transaction ID : 11165018 Amount of Each Receipt this Period			
FEC ID number of contributing						
federal political committee.	С		84.00			
Name of Employer (for Individual)		upotion (for Individual)	Memo Item			
Name of Employer (for Individual) Specialty Orthopedic Group		upation (for Individual) opaedic Surgeon				
Receipt For:	I	Year-to-Date ▼	—			
Primary General	199109410					
Other (specify)		1008.00				
SUBTOTAL of Doppinto This Dopp (artical			252.00			
SUBTOTAL of Receipts This Page (optional						

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER: PAGE 398 OF 551

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full Lisella, Jordan, Mills, , MD, FAAOS Mailing Address 14 Turner Lane				Date of Receipt
	City Loudonville	State NY	Zip Code 12211	Transaction ID : 11165019 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Capital Region Orthopaedic Group Receipt For: Primary General Other (specify) ▼	Orth	upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1008.00	Memo Item
B.	Full Name of Individual (Last, First, Middle Initia Zanaros, George, , , MD,FAAOS Mailing Address 16 Shaker Bay Rd		Date of Receipt	
	City Latham	State NY	Zip Code 12110	Transaction ID : 11165020 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		84.00
	Name of Employer (for Individual) Capital Region Orthopaedic Group		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1008.00	
с.	Full Name of Individual (Last, First, Middle Initia Brown, Shervondalonn, R, , MD,FA	al) or Full O AOS	rganization Name	Date of Receipt
	Mailing Address 1516 Winterberry Drive			12 / D D / Y Y Y Y 12 14 2021
	City Murfreesboro	State TN	Zip Code 37130	Transaction ID : 11165022 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) Tennessee Orthopaedic Alliance Receipt For: Primary General Other (specify)	Orth	upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Memo Item
s	UBTOTAL of Receipts This Page (optional)		•••••	1168.00
Т	OTAL This Period (last page this line number of	nly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 399 OF 55 (check only one)			
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\overrightarrow{\mathbf{X}}$ 11a 11b 11c 12 13 14 15 16 11			
Any information copied from such Reports and or for commercial purposes, other than using the second s			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
> Political Action Committee of t			opaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Middle Initial) or Full A. Rhoads, David, Philip, , MD,FAAOS		ganization Name	Date of Receipt			
Mailing Address 5613 Harrods Glen Drive	illing Address 5613 Harrods Glen Drive					
City	State	Zip Code	Transaction ID : 11165023			
Prospect	KY	40059	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item			
Ortho Louisville	Ortho	ppaedic Surgeon				
Receipt For:	Aggregate	/ear-to-Date ▼				
Other (specify) ▼		250.00]			
Full Name of Individual (Last, First, Middle B. Spencer, Eric, M, , MD,FAAOS	Initial) or Full Or	ganization Name	Date of Receipt			
Mailing Address 34 Greenhaven Rd	12 16 2021					
City	State	Zip Code				
Rye	NY	10580	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		500.00			
Name of Employer (for Individual) Self Employed		pation (for Individual) opaedic Surgeon	Memo Item			
Receipt For:	Aggregate	/ear-to-Date ▼				
Primary General Other (specify) ▼		, 500.00	1			
Full Name of Individual (Last, First, Middle . Vail, Thomas, Parker, , MD,FAA		ganization Name	Date of Receipt			
Mailing Address 3474 Clay Street			12 16 2021			
City	State	Zip Code	Transaction ID : 11165089			
San Francisco	CA	94118	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		1000.00			
Name of Employer (for Individual) University of California, San Francisc		pation (for Individual) paedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 1000.00]			
SUBTOTAL of Receipts This Page (optional).			1750.00			

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

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 400 OF 551 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Chief only one) Image: Chief only only one) Image: Chief only only only only only only only only
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Molina, Manuel, E, , MD,FAAOS	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 415 Morris Street Suite 104			12 16 / Y Y Y Y 12 16 2021
City Charleston	State WV	Zip Code 25301	Transaction ID : 11165148 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Orthopedic Healthcare Associates, Inc Receipt For: Primary General Other (specify) ▼	1	nopaedic Surgeon Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle II B. Raabe, Todd, Martin, , MD, FAAOS		Organization Name	Date of Receipt
Mailing Address 16987 FM 756			M M / D D / Y Y Y Y 12 16 2021
City Whitehouse	State TX	Zip Code 75791	Transaction ID : 11165150
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual) Azalea Orthopaedic		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle In C. Abbi, Gaurav, , , MD,BS,FAAO	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 1850 Sullivan Ave Ste 330			12 / D D / Y Y Y Y Y 16 / 2021
City Daly City	State CA	Zip Code 94015-2204	Transaction ID : 11165157 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		, 250.00
Name of Employer (for Individual) Santa Clara Valley Med		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)	<u> </u>		1000.00

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Viehe, Thomas, Blake, , MD,FAAOS Mailing Address 34917 Fairview Rd City Oconomowoc FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Associates of Wisconsin Receipt For: Primary General Other (specify) ▼	State WI C Occu Orth	rganization Name Zip Code 53066 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt 12 16 2021 Transaction ID : 11165159 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle McCulloch, Patrick, T, , MD, FAA Mailing Address 307 Buckingham Drive City Venetia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Advanced Ortho & Rehab Receipt For: Primary General Other (specify) ▼	AOS State PA C Occu	rganization Name Zip Code 15367 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 1008.00	Date of Receipt
Full Name of Individual (Last, First, Middle Greene, Robert, Neil, , MD,FA Mailing Address 1211 N 16th Ave City Yakima FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedics Northwest PLLC Receipt For: Primary General Other (specify)	AOS State WA C Occu Orth	rganization Name Zip Code 98902 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1008.00	Date of Receipt Table of Receipt Table of Receipt Transaction ID : 11165232 Amount of Each Receipt this Period Memo Item
Other (specify) SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num		<u>*</u>	668.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Init A. Olsen, Adam, S, , MD Mailing Address 3686 Washington Street <u>Apt 2520</u> City Boston	tial) or Full Or State MA	Zip Code 02130	Date of Receipt		
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For:	Orth	ipation (for Individual) opaedic Surgeon Year-to-Date ▼ 504.00	42.00 Memo Item		
Full Name of Individual (Last, First, Middle Init B. Heckmann, Nathanael, D, , MD Mailing Address 3876 Hampstead Rd					
City La Canada FEC ID number of contributing federal political committee. Name of Employer (for Individual) USC Ortho Residency Program Receipt For: Primary General Other (specify) ▼	Orth	Zip Code 91011 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Transaction ID : 11165234 Amount of Each Receipt this Period 250.00 Memo Item		
Full Name of Individual (Last, First, Middle Init C. Henderson, Christopher, , , MD, F Mailing Address 17 Chatham Hill Circle		rganization Name	Date of Receipt		
City Clarks Summit FEC ID number of contributing federal political committee. Name of Employer (for Individual) Scranton Orthopaedic Specialists		Zip Code 18411	Transaction ID : 11165236 Amount of Each Receipt this Period 500.00 Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)			792.00		

FOR LINE NUMBER: PAGE 403 OF 551

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
				/ person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orl	hopaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Lee, Julia, , , MD, FAAOS Mailing Address 1166 E Turnberry Ave	al) or Full Or	rganization Name	Date of Receipt
				12 17 Y Y Y Y 12 17 2021
	City Fresno	State CA	Zip Code 93730	Transaction ID : 11165238 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Greenville Hospital		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
B	Full Name of Individual (Last, First, Middle Initia Moon, Edward, S, , MD, FAAOS	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 706 Wisconsin St			12 17 2021
	City	State CA	Zip Code	Transaction ID : 11165338
	San Francisco		94107-2736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	250.00		
	Name of Employer (for Individual) Palo Alto Medical Foundation		upation (for Individual) Iopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	Full Name of Individual (Last, First, Middle Initia Winston, Jonathan, , , MD	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 4534 Shadowbrook Court			M M / D D / Y Y Y Y 12 18 2021
	City Bettendorf	State IA	Zip Code 52722	Transaction ID : 11165370 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) ORA Orthopaedics Receipt For:	Ortho	ipation (for Individual) opaedic Surgeon	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00	
SI	JBTOTAL of Receipts This Page (optional)			584.00
т	OTAL This Period (last page this line number o	nly)		•

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PAGE 404 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
	nd Statements may not be sold or used by any p the name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Vakil, Jeffrey, Jahan, , MD, FAAOS Mailing Address 740 Lewis Ln City Ambler FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedicare Receipt For: Primary General Other (specify) ▼	e Initial) or Full Organization Name State Zip Code PA 19002 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Manke, Chad, Richard, , MD, FA Mailing Address 3301 Hidden Pointe Cove City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer (for Individual) Atlantic Orthopaedic Specialists Receipt For: Primary General Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle C. Lehman, William, L, , Jr, MD, F Mailing Address 2605 Colecreek Ln City Rock Hill FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carolina Health Care Receipt For: Primary General Other (specify)		Date of Receipt
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num		1500.00

FOR LINE NUMBER:

PAGE 405 OF

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions
$\left\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Tyndall, William, A, , MD,FAAOS Mailing Address 123 Brittany Ln	al) or Full O	rganization Name	Date of Receipt
	City Hollidaysburg	State PA	Zip Code 16648	Transaction ID : 11165381 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) University Orthopedics		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 1008.00]
B.	Full Name of Individual (Last, First, Middle Initi Woodcock, Jessica, A, , MD,FAAOS	,	rganization Name	Date of Receipt
	Mailing Address 738 Newman Rd	12 19 / Y Y Y Y 2021		
	City New Bern	State NC	Zip Code 28562	Transaction ID : 11165382
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 84.00
	Name of Employer (for Individual) Carolina Orthopedics and Sports Medici		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1008.00]
с.	Full Name of Individual (Last, First, Middle Initi Cooper, Scott, Snow, , MD,FAAOS		rganization Name	Date of Receipt
	Mailing Address 405 NW A St 1101 Horsebarn Road			12 / D D / Y Y Y Y 12 19 2021
	City Bentonville	State AR	Zip Code 72712	Transaction ID : 11165383 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		84.00
	Name of Employer (for Individual) Mercy Clinic Orthopedics		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1158.00]
s	UBTOTAL of Receipts This Page (optional)			252.00
т	OTAL This Period (last page this line number c	only)		

SCHEDULE A (FEC Form 3X)						FOR LINE NUMBER: PAGE 406 OF 551 (check only one)		
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the		\`			
				Detailed Summary Page		11a 13	11b	11c 12 15 16 17
Ar	y information copied from such Reports and Sta	itements ma	av n	ot be sold or used by any pe	erson fo	-		
	for commercial purposes, other than using the r							
\backslash	NAME OF COMMITTEE (In Full)	. .						
\square	Political Action Committee of the	America	an	Association of Ortho	paec	lic S	urgeons-	-PAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full A. Mont, Michael, A, , MD,FAAOS			rga	nization Name	D	ate of	Receipt	
	Mailing Address 2401 W Belvedere Avenue					^M 12	/ D D 19	2021
	City	State		Zip Code		Transa	action ID : 11	1165385
	Baltimore	MD		21215	A	nount	of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С						1000.00
	Name of Employer (for Individual)	Осси	upa	tion (for Individual)	- E	Me	emo Item	
	Cleveland Clinic Foundation	Orth	nopa	aedic Surgoen				
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻				
	Primary General	· · ·		1000.00				
	Other (specify) v	L	7	1000.00				
_	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rga	nization Name			D	
в.	Sregory, Paul, R, , Jr, MD, FA				_		Receipt	
	Mailing Address 4627 King Ranch PI	State Zip Code				12	/ D D 19	2021
	Granite Bay	CA		95746			of Each Ber	165387 ceipt this Period
	FEC ID number of contributing		-			iount		
	federal political committee.	С			1 Ļ	-	- 40- 1- 1	1000.00
	Name of Employer (for Individual) Self Employed		•	tion (for Individual) aedic Surgeon		Me	emo Item	
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻				
	Primary General Other (specify) ▼		,	1000.00				
	Full Name of Individual (Last, First, Middle Initia Patel, Savan, Dixit, , MD,FAAOS	al) or Full O	rga	nization Name		ate of	Receipt	
•.	Mailing Address 3 Acadia Dr				_	M M 12	/ D D 19	2021
	City	State		Zip Code		Trans	action ID : 1	1165389
	South Barrington	IL		60010	A	nount	of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C						500.00
	Name of Employer (for Individual) Self Employed	Occupation (for Individual) Orthopaedic Surgeon			1	Me	emo Item	
	Receipt For: Primary General Other (specify)			ar-to-Date ▼ 500.00				
s	UBTOTAL of Receipts This Page (optional)			•••••			, , ,	2500.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3)	Use separate schedu	FOR LINE NUMBER: PAGE 407 OF 55
ITEMIZED RECEIPTS	for each category of t Detailed Summary Pa	
		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	The name and address of any political of	
		Orthopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Rose, Nicholas, E, , MD, FAAOS		Date of Receipt
Mailing Address 360 San Miguel Dr Ste 70	1	12 19 2021
City	State Zip Code	Transaction ID : 11165391
Newport Beach	CA 92660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250	.00
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	
Scherl, Jonathan, Daniel, , MD,N	1BA,FAA	Date of Receipt
Mailing Address 40 Evergreen PI		12 19 / Y Y Y Y 12 19 2021
City	State Zip Code	Transaction ID : 11165393
Tenafly	NJ 07670	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500	0.00
Full Name of Individual (Last, First, Middle, Gombera, Mufaddal, M, , MD,		Date of Receipt
Mailing Address 323 Hunters Trail		12 20 2021
City Houston	State Zip Code TX 77024	Transaction ID : 11165406 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) Texas Orthopedic Hospital	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000	.00
SUBTOTAL of Receipts This Page (optiona)	1000.00

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	person for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Abrutyn, David, A, , MD, FAAOS Mailing Address 20 Pitney Court City Basking Ridge FEC ID number of contributing federal political committee.	nitial) or Full Organization Name State Zip Code NJ 07920	Date of Receipt Mark / D / Y
Name of Employer (for Individual) Summit Health Management Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Memo Item
Full Name of Individual (Last, First, Middle I McClain, Edward, J, , III, MD, F Mailing Address 281 Canterwood Lane City Wexford FEC ID number of contributing federal political committee. Name of Employer (for Individual) UPMC Receipt For: Primary General Other (specify) ▼	nitial) or Full Organization Name State Zip Code PA 15090 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle I C. Bohsali, Kamal I, , , MD,FAAOS Mailing Address 24636 Deer Trace Drive City Ponte Vedra Beach FEC ID number of contributing federal political committee. Name of Employer (for Individual) Jacksonville Orthopaedic Institute Receipt For: Primary General Other (specify)	nitial) or Full Organization Name State Zip Code FL 32082 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 400.00 400.00	Date of Receipt 12 16 2021 Transaction ID : 11166915 Amount of Each Receipt this Period 100.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		1350.00

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	nd Statements may not be sold or used by any po g the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee o	f the American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl A. Spencer, Samantha, A, , MD,FAAO Mailing Address 9 Hawthorne PI #8-M City Boston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Children's Hospital Boston Receipt For: Primary General Other (specify) ▼		Date of Receipt 12 21 2021 Transaction ID : 11167003 Amount of Each Receipt this Period 1000.00 1000.00 Memo Item
Full Name of Individual (Last, First, Middl B. Shen, Wen, , , MD,FAAOS Mailing Address 33 Pond Hills Ct City Pleasant Valley FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopedic Associates of Dutchess Coun Receipt For:	e Initial) or Full Organization Name State Zip Code NY 12569 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 12 21 2021 Transaction ID : 11167004 Amount of Each Receipt this Period 84.00 Memo Item
Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middl C. Chapman, Cary, B, , MD,FAAG Mailing Address 10903 Blue Palm Street City Plantation FEC ID number of contributing federal political committee. Name of Employer (for Individual)		Date of Receipt 12 21 2021 Transaction ID : 11167005 Amount of Each Receipt this Period 84.00 Memo Item
Miami Orthopedics & Sports Medicine In Receipt For: Primary General Other (specify)	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1008.00	1168.00

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	n Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Stoeckl, Andrew, , , MD, FAAOS Mailing Address 90 Fairlawn Dr	I) or Full Or	ganization Name	Date of Receipt
	Amherst	NY	14226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		83.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	Excelsior Orthopedics	Ortho	ppaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 996.00]
в.	Full Name of Individual (Last, First, Middle Initia Echols, Eddy, L, , Jr, MD,FAA	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 10818 Barbados Isle Dr			12 21 2021
	City	State	Zip Code	Transaction ID : 11167009
	Tampa	FL	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Self Employed		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	1
	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name	
C.	Carroll, Paul, Francis, , MD, FAAOS		-	Date of Receipt
	Mailing Address 170 N Pointe Blvd			12 / D D / Y Y Y Y 12 16 2021
	City Lancaster	State PA	Zip Code 17601	Transaction ID : 11167014
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Ortho Assoc of Lancaster		pation (for Individual) paedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 1000.00]
s	UBTOTAL of Receipts This Page (optional)			1583.00
Т	OTAL This Period (last page this line number or	ıly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 411 OF 55
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Romness, Mark, J, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 1601 Far Hills Rd			12 21 2021
City Charlottesville	State VA	Zip Code 22901	Transaction ID : 11167017 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		150.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
Univ of Virginia Orthopaedics Receipt For:		opaedic Surgeon	
Primary General	Aggregate	Year-to-Date ▼	1
Other (specify)		500.00	
Full Name of Individual (Last, First, Middle Ir B. Edwards, Thomas, Bradley, , MD,F		rganization Name	Date of Receipt
Mailing Address 7401 S Main St	M M / D D / Y Y Y		
City	State	Zip Code	12 21 2021 Transaction ID : 11167025
Houston	ТХ	77030-4509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Texas Orthopedic Hospital		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	_
Other (specify) ▼		250.00	
Full Name of Individual (Last, First, Middle Ir Bagy, Mark, L, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 100 Mac Lane			12 21 2021
City	State	Zip Code	Transaction ID : 11167041
Pierre FEC ID number of contributing	SD	57501	Amount of Each Receipt this Period
federal political committee.	С		1000.00
Name of Employer (for Individual) Avera		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	1
SUBTOTAL of Receipts This Page (optional)		<u>••••••</u>	1400.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma sing the name and a	ay not be sold or used by any puddess of any puddess of any political committed	person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
	of the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Mid A. Hamilton, William, George, , MD,F		rganization Name	Date of Receipt
Mailing Address 8299 Glen Cove Ct			12 / D D / Y Y Y Y 12 21 2021
City Alexandria	State VA	Zip Code 22308	Transaction ID : 11167093 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer (for Individual) Anderson Orthopaedic Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General	Aggregate	Year-to-Date ▼ 2000.00	1
Other (specify) V		2000.00	
Full Name of Individual (Last, First, Mid B. Benz, Robert, J, , MD, FAAOS		rganization Name	Date of Receipt
Mailing Address 2107 Linden Lake Roa			12 21 2021
City	State	Zip Code	Transaction ID : 11167100
Fort Collins	CO	80524	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		750.00
Name of Employer (for Individual) Orthopaedic & Spine Center of the Rock		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		750.00]
Full Name of Individual (Last, First, Mid C. Sherbondy, Paul, Strawn, , N		rganization Name	Date of Receipt
Mailing Address 507 Beaumont Dr			12 22 2021
City State College	State PA	Zip Code 16801-8311	Transaction ID : 11167101 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individual) Penn State Health		upation (for Individual) Iopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00]
SUBTOTAL of Receipts This Page (optic	nal)		2834.00
TOTAL This Period (last page this line n	umber only)		

SCHEDULE A (FEC Form 3	X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 413 OF 551
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions
or for commercial purposes, other than usin			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Political Action Committee o	t the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Midd	le Initial) or Full C	rganization Name	
A. Kirol, Bernard, G, , MD, FAAOS	,	• · ·	Date of Receipt
Mailing Address 338 Turnwall Ln			
City	State	Zip Code	12 22 2021
Elgin	State	29045-9507	Transaction ID : 11167103 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		75.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Midlands Orthopaedics, PA		nopaedic Surgeon	
Receipt For:		Year-to-Date ▼	—
Primary General			
Other (specify) v		900.00	
Full Name of Individual (Last, First, Midd	le Initial) or Full O	Irganization Name	
B. Veitch, Andrew, John, , MD,FAA		ngamzalion name	Date of Receipt
Mailing Address 13416 Desert Zinnia Ct N			M M / D D / Y Y Y Y
0.4		Zin Ond-	12 22 2021
City Albuquerque	State NM	Zip Code 87111	Transaction ID : 11167104
			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Nome of Employer (for Individual)		unation (for Individual)	Memo Item
Name of Employer (for Individual) University of New Mexico, Dept of Orth		upation (for Individual) nopaedic Surgeon	
Receipt For:		Year-to-Date ▼	—
Primary General	, .99109410		
Other (specify) v		, 1008.00	
Full Name of Individual (Last, First, Midd	le Initial) or Full O	roanization Name	
c. Hire, Justin, M, , MD, FAAOS			Date of Receipt
Mailing Address 3100 Crestwood Lane			M M / D D / Y Y Y Y
City	State	Zin Codo	12 22 2021
City Columbia	State MO	Zip Code 65203	Transaction ID : 11167105 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		42.00
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item
Dwight David Eisenhower Army Medical C		opaedic Surgeon	
Receipt For:	I	Year-to-Date ▼	
Primary General		504.00	
Other (specify)		504.00	
SUBTOTAL of Receipts This Page (optional	al)		201.00

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Styron, Joseph, F, , MD, PhD, F Mailing Address 14244 Calderdale Ln City Strongsville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Cleveland Clinic Foundation Receipt For: Primary General Other (specify) ▼	State OH C Occu Orth	rganization Name Zip Code 44136 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt
Full Name of Individual (Last, First, Middle Dines, David, M, , MD,FAAOS Mailing Address 2 Highland Ct City Old Westbury FEC ID number of contributing federal political committee. Name of Employer (for Individual) Hospital for Special Surgery Receipt For: Primary General Other (specify) ▼	State NY C Occu Orth	rganization Name Zip Code 11568 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 12 22 2021 Transaction ID : 11167151 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle Willis, Matthew, Parker, , MD,F Mailing Address 9294 Exton Ln City Brentwood FEC ID number of contributing federal political committee. Name of Employer (for Individual) Tennessee Orthopedic Alliance Receipt For: Primary General Other (specify)	AAOS State TN C Occu Ortho	rganization Name Zip Code 37027-1402 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 12 22 2021 Transaction ID : 11167154 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 415 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir A. Makhuli, Brian, , , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 1748 Woodwalk Creek			12 22 2021
City Atlanta	State GA	Zip Code 30339	Transaction ID : 11167161
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
Resurgens Orthopaedics	Orth	opaedic Surgeon	—
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name of Individual (Last First Mill 9)		regnization Name	-
Full Name of Individual (Last, First, Middle Ir B. Moon, Daniel, K, , MD, MBA, MS,	iitiai) or fuii O	rganization Name	Date of Receipt
Mailing Address 5997 Beeler St			12 23 2021
City	State	Zip Code	Transaction ID : 11168112
Denver	CO	80238	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) University of Colorado School of Medic		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Other (specify) ▼		, 1125.00	
Full Name of Individual (Last, First, Middle Ir Lang, Gerald, J, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 1309 Redan Drive			M M / D D / Y Y Y Y 12 23 2021
City Verona	State WI	Zip Code 53593	Transaction ID : 11168113 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) University of Wisconsin		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		······ •	750.00

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

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	BX)	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 416 OF 551 (check only one) Image: state stat
		Detailed Summary Page	
			y person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	of the Americ	an Association of Ort	thopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Mid Bergmann, Karl, Andrew, , MD, FA		Organization Name	Date of Receipt
Mailing Address CHI Health CUMC Berg	-		12 23 2021
7710 Mercy Road, Suite City	2000 State	Zip Code	12 23 2021 Transaction ID : 11168114
Omaha	NE	68124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) CHI Health		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Mide B. Friedmann, Elizabeth, , , MD	dle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 2660B Greenbriar Lane			12 23 / Y Y Y Y 12 23 2021
City	State	Zip Code	Transaction ID : 11168115
Annapolis	MD	21401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		84.00
Name of Employer (for Individual) University of Maryland		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1008.00	
Full Name of Individual (Last, First, Mid C. Palma, Douglas, , , MD,FAAC		Organization Name	Date of Receipt
Mailing Address 271 White Horse Rd			12 23 2021
City Cochranville	State PA	Zip Code 19330-9472	Transaction ID : 11168116 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Delaware Orthopaedic Specialist		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
			584.00

SUBTOTAL of Receipts This Page (optional)								4.00	
	-		y		y	1	1.0		
		1			1			1	7
TOTAL This Period (last page this line number only)	L		 -	 	-			-	4

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 417 OF 55
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I Puopolo, Steven, M, , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 12 Night Heron Dr			12 21 2021
City Stony Brook	State NY	Zip Code 11790	Transaction ID : 11168136 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual)		upation (for Individual)	Memo Item
St Charles Hospital Receipt For:		opaedic Surgeon	
Primary General	Aggregate	Year-to-Date ▼	
Other (specify) V		1000.00	
Full Name of Individual (Last, First, Middle I 3. Edwards, John, Z, , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 2500 Summit Ridge Trl	12 21 2021		
City	State	Zip Code	
Charlottesville	VA	22911	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Martha Jefferson Medical Group		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00]
Full Name of Individual (Last, First, Middle I C. Russell, George, V, , Jr, MD, MB		rganization Name	Date of Receipt
Mailing Address 244 North Natchez Drive			12 21 2021
City	State	Zip Code	Transaction ID : 11168138
Madison	MS	39110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		90.00
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Univ of Mississippi Med Ctr Receipt For:		opaedic Surgeon	
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1080.00]
SUBTOTAL of Receipts This Page (optional)		······	2090.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

Use separate schedule(s)

FOR LINE NUMBER:

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ΙΤΙ	EMIZED RECEIPTS		1	Use separate schedule(s) for each category of the	1 ° –	heck on	ly or	Ú I			10	
				Detailed Summary Page	-	× 11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the		oose of	f solicitir	ig cont	tributi	ons
	NAME OF COMMITTEE (In Full)											
	Political Action Committee of the				opa	edic S	Sur	geon	sPA	C of	[:] AA	OS
Α.	Full Name of Individual (Last, First, Middle Initi Moseley, Claiborne, Lake, , MD,FAAOS	al) or Full C	Drga	nization Name		Date o	of Re	ceipt				
	Mailing Address 1607 Castle Drive			1		12	1 /	D 21	D /	Y Y 202	21 21	Y
	City Jonesboro	State AR		Zip Code 72401	-				111681			
		7.0.0	_	12401	-	Amoun	nt of	Each F	Receipt 1	his Pe	eriod	_
	FEC ID number of contributing federal political committee.	С				Ľ.				ł	500.0	0
	Name of Employer (for Individual)	Occ	cupa	tion (for Individual)		Μ	lemo	Item				
	St Bernards Orthopedic Associates	Orth	hopa	aedic Surgeon								
	Receipt For:	Aggregate	e Yea	ar-to-Date 🔻								
	Primary General Other (specify)	· · · ·		1000.00								
			-9-		11							
В.	Full Name of Individual (Last, First, Middle Initi Curtis, David, E, , MD, FAAOS	al) or Full C	Orga	nization Name		Date o	of Re	ceipt				
	Mailing Address 1160 E 3900 S Ste 5000					M M		21		202	21	Y
	City	State		Zip Code		Trans	sacti	on ID :	111681	45		
	Salt Lake City	UT		84124-1348		Amoun	nt of	Each F	Receipt t	his Pe	eriod	
	FEC ID number of contributing federal political committee.	С						, ,			250.0	0
	Name of Employer (for Individual) Self Employed			tion (for Individual) aedic Surgeon		M	lemo	Item				
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻								
	Primary General				u L							
	Other (specify) ▼		_	250.00								
C.	Full Name of Individual (Last, First, Middle Initi Bieber, Edward, J, , MD,FAAOS	al) or Full C	Orga	nization Name		Date o	of Re	ceipt				
	Mailing Address 7407 Beverly Road					^M 12	1 /	D 21		202		Y
	City	State		Zip Code					: 111681			
	Bethesda	MD		20814	_	Amoun	nt of	Each F	Receipt 1	his Pe	eriod	
	FEC ID number of contributing federal political committee.	С						y	9	ł	500.0	0
	Name of Employer (for Individual) BCC Orthopaedics		•	tion (for Individual) aedic Surgeon		N	lemo	Item				
	Receipt For:	I	•	ar-to-Date V								
	Primary General				u Li							
	Other (specify)	L	-1	1000.00	4							
s	UBTOTAL of Receipts This Page (optional)							,	,	12	250.00	0
Т	OTAL This Period (last page this line number o	nly)			•	Ľ		_				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 419 OF 551
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and	Statements ma	not be sold or used by any n	
or for commercial purposes, other than using th			
NAME OF COMMITTEE (In Full)			
Political Action Committee of the second	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Navarro, Ronald, Anthony, , MD,FAAO		rganization Name	Date of Receipt
Mailing Address 18 Wide Loop Rd			12 / 24 / Y Y Y Y Y Y Y
City Polling Hills	State CA	Zip Code 90274	Transaction ID : 11168673
Rolling Hills		90274	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Kaiser Permanente South Bay	Orth	nopaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date V	
Primary General			1
Other (specify) v		1008.00	
Full Name of Individual (Last, First, Middle Ir B. Dhillon, Manjit, S, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 12602 Nightingale Drive	12 24 2021		
City	State	Zip Code	Transaction ID : 11168674
Chester	VA	23836	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Southside Regional Medical Center		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	33 - 3 - 4		1
		, 1000.00	1
Full Name of Individual (Last, First, Middle Ir c. Meis, Ryan, C, , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 466 Firethorn Trail			12 24 2021
City	State	Zip Code	Transaction ID : 11168680
Dakota Dunes	SD	57049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) CNOS		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)	I		834.00

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

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FOR LINE NUMBER: PAGE 420 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions the to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Coles, Robert, E, , MD, FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 201 Lands End Rd			M M / D D / Y Y Y Y Y 12 24 2021
City Morehead City	State NC	Zip Code 28557	Transaction ID : 11168682 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Carolinas Center For Surgery		upation (for Individual) Iopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
B. Hartzler, Robert, U, , MD,MS,FAA		rganization Name	Date of Receipt
City San Antonia	State TX	Zip Code	Transaction ID : 11168684
San Antonio FEC ID number of contributing federal political committee.	C	78232	Amount of Each Receipt this Period
Name of Employer (for Individual) TSAOG Orthopaedics		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle I C. Beltran, Michael, John, , MD,FA		rganization Name	Date of Receipt
Mailing Address UC Dept of Orthopaedic Sur 231 Albert Sabin Way Room	5553		12 / D D / Y Y Y Y 12 26 2021
Cincinnati	State OH	Zip Code 45267-0212	Transaction ID : 11168686 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Department of Orthopaedics and Rehabil		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00]
SUBTOTAL of Receipts This Page (optional)			1584.00

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

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 421 OF 55
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and s or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In Mitros, Stephen, F, , MD, FAAOS	Date of Receipt		
Mailing Address 51045 Erin Glen Dr			M M / D D / Y Y Y Y 12 26 2021
City	State	Zip Code	Transaction ID : 11168687
Granger	IN	46530	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
Mitros Orthopaedics	Orth	opaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General Other (specify) ▼		1008.00]
Full Name of Individual (Last, First, Middle In . Norton, Robert, Patrick, , MD,FAAC		ganization Name	Date of Receipt
Mailing Address 17461 Rosella Road			12 26 2021
City	State	Zip Code	Transaction ID : 11168689
Boca Raton	FL	33496	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Florida Spine Associates		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		, 500.00]
Full Name of Individual (Last, First, Middle In . Migliori, Sidney, Premer, , MD,FA		ganization Name	Date of Receipt
Mailing Address 40 Chief Botelho Ct			12 26 2021
City	State	Zip Code	Transaction ID : 11168691
East Greenwich	RI	02818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		580.00
Name of Employer (for Individual) Ortho Rhode Island			Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)			1164.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) Image: Markov field Image: Markov field<		
Any information copied from such Reports and Sta or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Ortho	paedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Initia DiFelice, Gregory, Scott, , MD,FAAOS Mailing Address 515 East 72nd Street <u>Apt 28E</u> City New York FEC ID number of contributing federal relition exercises	al) or Full Organization Name State Zip Code NY 10021	Date of Receipt 12 26 2021 Transaction ID : 11168693 Amount of Each Receipt this Period 500.00		
federal political committee. Name of Employer (for Individual) Hospital For Special Surgery Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Memo Item		
Full Name of Individual (Last, First, Middle Initia B. Schmitz, Matthew, R, , MD,FAAOS Mailing Address 111 Ottawa Run City				
San Antonio FEC ID number of contributing federal political committee. Name of Employer (for Individual) San Antonio Military Medical Center Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78231 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : 11168697 Amount of Each Receipt this Period 250.00 Memo Item		
Full Name of Individual (Last, First, Middle Initia Nagamani, Kevin, K , , MD,FAAOS Mailing Address 11902 E Lake Cr City	State Zip Code	Date of Receipt 12 / 27 / 2021 Transaction ID : 11168698		
Greenwood Village FEC ID number of contributing federal political committee. Name of Employer (for Individual)	CO 80111 C Occupation (for Individual)	Amount of Each Receipt this Period 84.00 Memo Item		
Western Orthopaedics Receipt For: Primary General Other (specify)	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00			
SUBTOTAL of Receipts This Page (optional)		834.00		

SCHEDULE A (FEC Form 3X)		[Use separate schedule(s)	FOR LINE NUMBER: PAGE 423 OF 551	
ITEMIZED RECEIPTS			for each category of the	(check only one)	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Ar	y information copied from such Reports and Sta	itements ma	y not be sold or used by any r		
	for commercial purposes, other than using the r				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	A			
/	Political Action Committee of the	America	an Association of Orth	opaedic SurgeonsPAC of AAOS	
<u> </u>	Full Name of Individual (Last, First, Middle Initia	al) or Full Oi	rganization Name		
Α.	Newbern, D, Gordon, , MD, FAAOS			Date of Receipt	
	Mailing Address 4412 S Lookout St				
	City	State	Zip Code	12 27 2021 Transaction ID : 11168699	
	Little Rock	AR	72205	Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	С		84.00	
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item	
	Arkansas Specialty Orthopedics	Orth	opaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼	· · · ·	504.00	1	
				1	
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name		
В.	Roberts, Jeffrey, , , MD, FAAOS			Date of Receipt	
	Mailing Address 31012 Wilderness Trail			12 27 2021	
	City	State	Zip Code	12 2021 Transaction ID : 11168870	
	Westlake	ОН	44145	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		1000.00	
	federal political committee.	U			
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item	
	Orthopaedic Associates	Orth	opaedic Surgeon		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		1000.00		
				-	
~	Full Name of Individual (Last, First, Middle Initia Hussain, Suleman, M, , MD, FAAO		rganization Name		
U.	Mailing Address 6817 Still Creek Pass	0		Date of Receipt	
				12 27 2021	
	City	State	Zip Code	Transaction ID : 11168927	
	Bettendorf	IA	52722	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
			upation (for Individual)	Memo Item	
	ORA Receipt For:	1	opaedic Surgeon Year-to-Date ▼		
	Primary General	Ayyreyale			
	Other (specify)		250.00		
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	UBTOTAL of Receipts This Page (optional)			1334.00	
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TOTAL This Period (last page this line number only)......

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)	
	y information copied from such Reports and St	atomonto ma		13 14 15 16 17
	for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initi Pushkarewicz, Michael, J, , MD,FAAOS,I	Date of Receipt		
	Mailing Address 1510 Braken Ave			12 / D D / Y Y Y Y 28 / 2021
	City Wilmington	State DE	Zip Code 19808	Transaction ID : 11168932 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer (for Individual) First State Orthopaedics		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 504.00]
в.	Full Name of Individual (Last, First, Middle Initi Gary, Joshua, Layne, , MD,FAAOS Mailing Address 951 Descanso Drive	al) or Full O	Organization Name	Date of Receipt
	City	State	Zip Code	12 28 2021
	La Canada Flintridge	CA	91011	Transaction ID : 11168933 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		84.00
	Name of Employer (for Individual) Keck School of Medicine of USC		cupation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1008.00]
с.	Full Name of Individual (Last, First, Middle Initi Scales, Darrell, Kevin, , MD,FAAO		Drganization Name	Date of Receipt
	Mailing Address 5425 Golf View Dr			12 / D D / Y Y Y Y 28 2021
	City Braselton	State GA	Zip Code 30517	Transaction ID : 11168934 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) Northeast Georgia Physicians Group		upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 800.00]
⊢	UBTOTAL of Receipts This Page (optional)			226.00
ΙT	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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X 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carolan, Gregory, Francis, , MD, FAAOS Date of Receipt Α. Mailing Address 1806 Meadow Ridge Ct 1 12 28 2021 City Zip Code State Transaction ID: 11168935 PA **Bethlehem** 18015 Amount of Each Receipt this Period FEC ID number of contributing С 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon St Luke's Ortho Surg Group Receipt For: Aggregate Year-to-Date ▼ Primary General 1008.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pinto, Mark, C, MD, FAAOS Date of Receipt Mailing Address 7644 Base Lake Drive 12 2021 28 City State Zip Code Transaction ID : 11168936 MI Dexter 48130 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) IHA Orthopaedic Surgery - Chelsea Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 1250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Razi, Afshin, , , MD, FAAOS Date of Receipt Mailing Address 2 Dogwood Road М M 12 28 2021 City Zip Code State Transaction ID: 11168938 NY Great Neck 11024 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Maimonides Medical Center Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 584.00 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X)		llee constato cohodulo(c)	FOR LINE NUMBER: PAGE 426 OF 55
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
		Detailed Summary Page	13 14 15 16 17
			person for the purpose of soliciting contributions
or for commercial purposes, other than using t	the name and a	ddress of any political committe	e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Chandler, David, R, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 165 Middle Plantation Ln			12 / D D / Y Y Y Y Y 12 28 2021
City	State FL	Zip Code	Transaction ID : 11168939
Gulf Breeze		32561	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Andrews Institute For Orthopaedics & S	Orth	nopaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		1008.00	
			-
Full Name of Individual (Last, First, Middle B. Allard, Mark, Michael, , MD,FAAO		rganization Name	Date of Receipt
Mailing Address 3010 Cortney Circle			M M / D D / Y Y Y Y
			12 28 2021
City Siloam Springs	State AR	Zip Code 72761	Transaction ID : 11168940
•		12101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Self Employed		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date 🔻	
Other (specify) ▼		1008.00]
Full Name of Individual (Last, First, Middle C. Hoedt, Christen, , , MD	Initial) or Full O	rganization Name	
Mailing Address 973 Vinings Blvd			Date of Receipt
Maning / Marioso 973 Vinnings Divu			12 28 2021
City	State	Zip Code	Transaction ID : 11168941
Gallatin	TN	37066	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		84.00
Name of Employer (for Individual) Cooper Orthopaedics Surgery		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For:	1	Year-to-Date ▼	_
Other (specify)		1008.00]
SUBTOTAL of Receipts This Page (optional).			252.00

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

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 427 OF 551	
ITEMIZED RECEIPTS		for each category of the	(check only one)	
		Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17	
Any information conied from such Reports and	d Statements ma	l av not be sold or used by any	person for the purpose of soliciting contributions	
			ee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
> Political Action Committee of	the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS	
/ Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name		
A. Reid, J, Spence, , MD, FAAOS		- 3	Date of Receipt	
Mailing Address 500 University Drive			M = M / D = D / Y = Y = Y	
Department of Orthopaedic		Zin Onda	12 28 2021	
City Hershey	State PA	Zip Code 17036	Transaction ID : 11168942	
·		11000	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		84.00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Penn State	Orth	nopaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General		1008.00		
Other (specify) v		1008.00		
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name		
B. Giuseffi, Steven, A, , MD, FAAOS			Date of Receipt	
Mailing Address 4784 Enchanted Pines Dr			12 28 2021	
City	State	Zip Code	Transaction ID : 11168943	
Rapid City	SD	57701	Amount of Each Receipt this Period	
FEC ID number of contributing				
federal political committee.	C		84.00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Black Hills Orthopedic and Spine Cente	Orth	nopaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date ▼		
Other (specify) ▼		1008.00		
		1008.00	-	
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name		
C. Kauk, Justin, R, , MD, FAAOS			Date of Receipt	
Mailing Address 110 Kildaire Park Drive Ste 106			12 28 2021	
City	State	Zip Code	Transaction ID : 11168944	
Cary	NC	27518	Amount of Each Receipt this Period	
FEC ID number of contributing			125.00	
federal political committee.	C		123.00	
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item	
Structure Orthopaedics		opaedic Surgeon		
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General		500.00		
Other (specify)			1	
SUBTOTAL of Receipts This Page (optional)			293.00	

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Init A. Phillips, Frank, M, , MD, FAAOS Mailing Address 401 N Wabash Unit 66D City Chicago FEC ID number of contributing federal political committee. Name of Employer (for Individual) Midwest Orthopaedics At Rush	tial) or Full Organization Name State Zip Code IL 60611 Occupation (for Individual) Orthopaedic Surgeon	Date of Receipt 12 28 2021 Transaction ID : 11168947 Amount of Each Receipt this Period 1000.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Init B. Slappey, Gregory, S, , MD, FAAOS Mailing Address 3347 Oak Grove Church Rd City Carrollton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Carrollton Orthopaedic Clinic Receipt For: Primary General Other (specify) ▼	State Zip Code GA 30117 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 28 2021 Transaction ID : 11169869 Amount of Each Receipt this Period 500.00 Memo Item
Full Name of Individual (Last, First, Middle Init C. Mayerson, Joel, L, , MD,FAAOS Mailing Address 2335 Pinebrook Rd City Upper Arlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) The Ohio State University Receipt For: Primary General Other (specify)	tial) or Full Organization Name State Zip Code OH 43220-4327 C Occupation (for Individual) Orthopaedic Surgeon Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 12 28 2021 Transaction ID : 11169871 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	-	2500.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 429 OF 55' (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Tenholder, Mark, Joseph, , MD,FAAOS		rganization Name	Date of Receipt
Mailing Address 4507 Olde Plantation Place			12 27 2021
City Destin	State FL	Zip Code 32541	Transaction ID : 11169876 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Orthopaedic Associates Receipt For: Primary General Other (specify) ▼		nopaedic Surgeon Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle In B. Wickstrom, Otto, W, , III, MD, F	itial) or Full C	rganization Name	Date of Receipt
Mailing Address 7741 S Zikes Rd			12 17 2021
City Bloomington	State IN	Zip Code 47401	Transaction ID : 11169878 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Indiana University Health		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle In C. Hariri, Sanaz, , , MD, FAAOS	itial) or Full C	rganization Name	Date of Receipt
Mailing Address 1169 Trinity Drive			12 29 2021
City Menlo Park	State CA	Zip Code 94025	Transaction ID : 11170064 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Sports and Joint Replacement Specialis		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 500.00	1
SUBTOTAL of Receipts This Page (optional)			1250.00

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

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FOR LINE NUMBER: PAGE 430 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using th			person for the purpose of soliciting contributions be to solicit contributions from such committee.
			opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle II A. Cordell, Davin, , , MD,FAAOS	nitial) or Full C	organization Name	Date of Receipt
Mailing Address 325 Williamson Place			12 30 2021
City Corpus Christi	State TX	Zip Code 78411	Transaction ID : 11170066 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Washington University Orthopedics		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle In B. Levy, Jonathan, Chad, , MD,FAAO		Organization Name	Date of Receipt
Mailing Address 51 Compass Ln			12 30 Y Y Y Y Y 12 12 12 12 12 12 12 12 12 12 12 12 12 1
City Ft Lauderdale	State FL	Zip Code 33308-2009	Transaction ID : 11170068 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Holy Cross Orthopedic Institute		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle II C. Bushnell, Brandon, Dubose, , MI			Date of Receipt
Mailing Address 60 Fallen Branch Circle SE			M M / D D / Y Y Y Y 12 30 2021
City Rome	State GA	Zip Code 30161	Transaction ID : 11170092 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) Harbin Clinic Orthopedics and Sports M	Occupation (for Individual) Orthopaedic Surgeon		Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)			1750.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 431 OF 55 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	× 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th		
/		opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Belagaje, Sudhir, R, , MD	nitial) or Full Organization Name	Date of Receipt
Mailing Address 955 Ovalene Lane SW	State Zip Code	12 / D D / Y Y Y Y 12 23 2021
Marietta	GA 30064-7540	Transaction ID : 11170102 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) OrthoAtlanta LLC	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle Ir B. Bell, Joshua, Alan, , MD	l itial) or Full Organization Name	Date of Receipt
Mailing Address 2201 Newnan Crossing Blvd Suite 100		12 / 23 / Y Y Y Y Y Y 2021
City Newnan	State Zip Code GA 30265	Transaction ID : 11170103 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Peidmont Orhtopedics / OrthoAtlanta	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250,00]
Full Name of Individual (Last, First, Middle Ir Blackwood, Steven, E, , MD	hitial) or Full Organization Name	Date of Receipt
Mailing Address 338 Lakemoore Dr NE		12 23 2021
City Atlanta	StateZip CodeGA30342	Transaction ID : 11170104 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) OrthoAtlanta	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	1
SUBTOTAL of Receipts This Page (optional)	·	750.00
TOTAL This Period (last page this line number	^r only)	

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Bowles, Richard, J., , MD Mailing Address 9602 Bay Hill Dr City State Louisville KY FEC ID number of contributing federal political committee. Name of Employer (for Individual) Occupation (for Individual) OrthoAtlanta Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼			Date of Receipt 12 23 2021 Transaction ID : 11170105 Amount of Each Receipt this Period 250.00 Memo Item
Other (specify) ▼		250.00]
Full Name of Individual (Last, First, Middle B. Brcka, David, A, , MD, FAAOS Mailing Address 272 Greenwood Lane City Peachtree City FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoAtlanta LLC Receipt For: Primary General Other (specify) ▼	State GA C Occ Ort	Zip Code 30269 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 12 23 2021 Transaction ID : 11170106 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle C. Bui, Tuan, L, , MD,FAAOS Mailing Address 2221 Sever Rd City Lawrenceville FEC ID number of contributing federal political committee. Name of Employer (for Individual) OrthoAtlanta LLC Receipt For: Primary General Other (specify)	State GA C Occu Orth	rganization Name Zip Code 30043-4028 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 250.00	Date of Receipt 12 23 2021 Transaction ID : 11170107 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line numl			750.00

Use separate schedule(s)

FOR LINE NUMBER:

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551

IT.			Use separate schedule(s)	(check only one)				
11			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
\rangle		e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS				
Α.	Full Name of Individual (Last, First, Middle Initi Dalal, Snehal, Chinu, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1391 Harris Rd			12 23 / Y Y Y Y 12 23 2021				
	City Lawrenceville	State GA	Zip Code 30043	Transaction ID : 11170108 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) opaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00					
В.	Full Name of Individual (Last, First, Middle Initi Duffield, Mark, , , DO	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1668 Mulkey Rd Ste A			12 23 2021				
	City	State	Zip Code	Transaction ID : 11170112				
	Austell	GA	30106-1163	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) nopaedic Surgeon	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00					
с.	Full Name of Individual (Last, First, Middle Initi Fowler, Donald, Edward, , III, MD,I		rganization Name	Date of Receipt				
	Mailing Address 801 West Conway Dr NW			12 / D D / Y Y Y Y Y 12 23 2021				
	City Atlanta	State GA	Zip Code 30327	Transaction ID : 11170117 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) OrthoAtlanta LLC Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item				
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00					
s	UBTOTAL of Receipts This Page (optional)		•••••	750.00				
т	OTAL This Period (last page this line number c	only)						

FOR LINE NUMBER: PAGE 434 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	of the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Midd A. Francke, Eric, I, , MD, FAAOS	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1418 Oakridge View Dr			M M / D D / Y Y Y Y 12 23 2021
City Mableton	State GA	Zip Code 30126-7605	Transaction ID : 11170118 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) OrthoAtlanta LLC		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Midd B. Ghattas, Timothy, Noshi, , MD, Mailing Address 1240 Eagles Landing Pk	FAAOS	rganization Name	Date of Receipt
City	State GA	Zip Code	Transaction ID : 11170119
Stockbridge FEC ID number of contributing federal political committee.	C	30281	Amount of Each Receipt this Period
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Midd C. Jaffe, Matthew, Ben, , MD, FA		rganization Name	Date of Receipt
Mailing Address 75 North Devereaux Cou	urt		12 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Atlanta	State GA	Zip Code 30327	Transaction ID : 11170120 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) OrthoAltanta LLC		ipation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)		▶ 750.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

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SCHEDULE A (FEC Form 3	X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 435 OF 551		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)		
			v person for the purpose of soliciting contributions ttee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Political Action Committee of	of the America	an Association of Ort	hopaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Midd Johnston, Richard, B, , III, MD, F		rganization Name	Date of Receipt		
Mailing Address 4575 Bryn Mawr Circle N	٩W		12 23 2021		
City Atlanta	State GA	Zip Code 30327	Transaction ID : 11170121 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00			
Full Name of Individual (Last, First, Mide B. Jones, Virginia, Mooney, , MD,	FAAOS	rganization Name	Date of Receipt		
Mailing Address 1265 Highway 54 West					
City Fayetteville	State GA	Zip Code 30214	Transaction ID : 11170122 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00			
Full Name of Individual (Last, First, Mide C. Jordan, Susan, Stewart, , MD		rganization Name	Date of Receipt		
Mailing Address 810 W Wesley Rd NW			12 23 2021		
City Atlanta	State GA	Zip Code 30327	Transaction ID : 11170123 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (option	al)		750.00		

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 436 OF 551 (check only one)			
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
or for commercial purposes, other than usin			person for the purpose of soliciting contributions be to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Political Action Committee o	f the America	an Association of Orth	opaedic SurgeonsPAC of AAOS			
Full Name of Individual (Last, First, Midd Kasow, Douglas, , , DO,FAAOS		rganization Name	Date of Receipt			
Mailing Address 3469 Knollwood Drive N	N		M M / D D / Y Y Y Y 12 23 2021			
City Atlanta	State GA	Zip Code 30305	Transaction ID : 11170124			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
OrthoAtlanta LLC	Orth	nopaedic Surgeon				
Receipt For:	Aggregate	Year-to-Date ▼	_			
Other (specify) ▼		250.00				
Full Name of Individual (Last, First, Midd 3. Lamberson, Keith, Andrew, , M		rganization Name	Date of Receipt			
Mailing Address 2102 Jarrod Pl	12 23 2021					
City	State	Zip Code	Transaction ID : 11170125			
Smyrna	GA	30080	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) nopaedic Surgeon	Memo Item			
Receipt For:	Aggregate	Year-to-Date 🔻				
Primary General Other (specify) ▼		250.00				
Full Name of Individual (Last, First, Midd C. Lee, Yong, S, , MD	le Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 900 Circle 75 Parkway S	te 1700		M M / D D / Y Y Y Y 12 23 2021			
City	State	Zip Code	Transaction ID : 11170127			
Atlanta	GA	30339-3087	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
		upation (for Individual) opaedic Surgeon	Memo Item			
Receipt For: Primary General Other (specify)	I	Year-to-Date ▼ 250.00]			
SUBTOTAL of Receipts This Page (optiona	al)		750.00			

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			berson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	n Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Lichtenfeld, William, , , MD	nitial) or Full Or	ganization Name	Date of Receipt
Mailing Address 900 Circle 75 Pkwy Suite 17			12 / 23 / Y Y Y Y 12 23
City Atlanta	State GA	Zip Code 30339-3087	Transaction ID : 11170132 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) OrthoAtlanta, LLC	Occu Phys	pation (for Individual) ician	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle I B. Littleton, Travis, Wayne, , MD Mailing Address 529 Collier Rd NW	nitial) or Full Or	ganization Name	Date of Receipt
City	State	Zip Code	12 23 2021 Transaction ID : 11170133
Atlanta	GA	30318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) OrthoAtlanta		pation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle I C. Maguire, Richard, R, , MD, FAA		ganization Name	Date of Receipt
Mailing Address 2332 Whiting Bay Courts			12 23 2021
City Kennesaw	State GA	Zip Code 30152	Transaction ID : 11170134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) OrthoAtlanta LLC	'	pation (for Individual) paedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional)			750.00

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

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FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Mathers, Michael, Jonathan, , MD	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 486 Kingswood Ln NW			12 / D D / Y Y Y Y 23 / 2021
City Atlanta	State GA	Zip Code 30305-2802	Transaction ID : 11170137 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
B. Hull Name of Individual (Last, First, Middle McHenry, Michael, A, , MD Mailing Address 900 Circle 75 Parkway Ste		rganization Name	Date of Receipt
City	State	Zip Code	12 23 2021 Transaction ID : 11170143
Atlanta	GA	30339-3087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) OrthoAtlanta, LLC		upation (for Individual) rsician	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle C. Morgan, Brian, Edward, , MD,FA		rganization Name	Date of Receipt
Mailing Address 5960 Wigwam Way			12 23 Y Y Y Y Y 12 23 2021
City Flowery Branch	State GA	Zip Code 30542	Transaction ID : 11170144 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional).			750.00

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FEC Schedule A (Form 3X) Rev. 06/2016

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ITEMIZED RECEIPTS for each category of the Detailed Summary Page Ita itb itc it2 its itc itc Ary information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee to solicit contributions from such committee to solicit contributions from such committee of the American Association of Orthopaedic SurgeonsPAC of AAOS NAME OF COMMITTEE (in Full) Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS Full Name of Individual (tast, First, Middle Initial) or Full Organization Name Date of Receipt A. Orcutt, Daniel, R., MD, FAAOS Date of Receipt Mailing Address 2670 Emerald Dr C City State Zip Code Jonesboro GA 30236-5232 Name of Employer (for Individual) Orcutpaedic Surgeon Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation (for Individual) Magregate Year-to-Date ▼ Mailing Address 140 Briar Meadow Court C Transaction ID : 11170148 Amount of Each Receipt this Period FUI Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt 12 23 2021 Transaction ID : 11170148 Amount of Each Receipt this Period 250.00 12 23	S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 439 OF 551			
Ary Information copied from such Reports and Statements may not be solid or used by any person for humpse of soliciting contributions from such committee or solicit contributions from such committee. NAME OF COMMITTEE (in Full) POILtical Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt City State 200 Code Jonesboro GA 200 Code Name of Employer (for Individual) Occupation (for Individual) Onthorgedic Surgeon Receipt For: General Occupation (for Individual) Other (specify) Ga 30215-5675 FeC ID number of contributing tederal policical committee C 12 23 Other (specify) General Occupation (for Individual) Memo Item Other (specify) General Occupation (for Individual) Date of Receipt City Ga 30215-5675 Feed ID number of contributing tederal policical committee Transaction ID : 11170148 Annot of Each Receipt IN Aggregate Year-to-Date V Date of Receipt 12 23 2021 City Barle Ame of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt	IT	TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)			
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FEC Schedule A (Form 3X) Rev. 06/2016

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	Mailing Address 254 Meadow Path Drive			12 / D D / Y Y Y Y 23 2021			
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B.	Full Name of Individual (Last, First, Middle Initia Porter, Jake, , , III, MD,MP	al) or Full O	rganization Name	Date of Receipt			
	Mailing Address 350 Sidney Lane						
				12 23 2021			
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ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Orthe	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Williams, Sharrona, S, , MD, FAAOS Mailing Address 1265 W Hwy 54 Ste 102	al) or Full O	rganization Name	Date of Receipt
				12 23 Y Y Y Y Y 12 23
	City Fayetteville	State GA	Zip Code 30214	Transaction ID : 11170167 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
R	Full Name of Individual (Last, First, Middle Initia Wimbush, Tracy, E, , MD	al) or Full O	rganization Name	Date of Receipt
υ.	Mailing Address 900 Circle 75 Parkway Ste 1700			12 23 2021
	City Atlanta	State GA	Zip Code 30339-3087	Transaction ID : 11170169 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) OrthoAtlanta LLC		upation (for Individual) sician	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00]
С.	Full Name of Individual (Last, First, Middle Initia Duwelius, Paul, J, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 16925 Scott Ct			M M / D D / Y Y Y Y 12 30 2021
	City Lake Oswego	State OR	Zip Code 97034	Transaction ID : 11170261 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) Orthopedic & Fracture Specialists		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
s	UBTOTAL of Receipts This Page (optional)			1500.00
Т	OTAL This Period (last page this line number o	nly)		

FOR LINE NUMBER:

PAGE 444 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the America	n Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Gross, Thomas, P, , MD, FAAOS Mailing Address 116 Southlake Road City Columbia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Midlands Orthopaedics Receipt For: Primary General Other (specify) ▼	State SC C Occu Ortho	ganization Name Zip Code 29223 pation (for Individual) opaedic Surgeon //ear-to-Date ▼ 1000.00	Date of Receipt M M M M Y
Full Name of Individual (Last, First, Middle B. Huddleston, James, Irvin, , III, Mi Mailing Address 103 Harkins Road City Woodside FEC ID number of contributing federal political committee. Name of Employer (for Individual) Stanford Medicine Outpatient Center Receipt For: Primary General Other (specify) ▼	D,FA State CA C Occu Ortho	ganization Name Zip Code 94062 pation (for Individual) opaedic Surgeon //ear-to-Date ▼ 250,00	Date of Receipt 12 30 2021 Transaction ID : 11170341 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle Bugbee, William, , , MD,FAAOS Mailing Address 13219 Winstanley Way City San Diego FEC ID number of contributing federal political committee. Name of Employer (for Individual) Scripps Clinic Medical Group Receipt For: Primary General Other (specify)	S State CA C Occup Ortho	ganization Name Zip Code 92130 pation (for Individual) paedic Surgeon /ear-to-Date ▼ 500.00	Date of Receipt 12 30 2021 Transaction ID : 11170352 Amount of Each Receipt this Period 500.00 Memo Item
Scripps Clinic Medical Group Receipt For: Primary General	Ortho Aggregate Y	paedic Surgeon /ear-to-Date ▼ 500.00	Memo Item

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 445 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Ir Reynolds, Kirk, Allen, , MD,FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 11901 Fairway Dr 	State Zip Code	12 / 31 / 2021 Transaction ID : 11170356
Little Rock	AR 72212	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer (for Individual) Arkansas Specialty Orthopaedics	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00]
Full Name of Individual (Last, First, Middle Ir Chalal, Joseph, B, , MD, FAAOS	itial) or Full Organization Name	Date of Receipt
Mailing Address 1005 Brooks Lane		12 31 2021
City Delray Beach	State Zip Code FL 33483	Transaction ID : 11170359 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Preferred Orthopedics of the Palm Beac	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle Ir Ficke, James, R , , MD,FAAOS,F	itial) or Full Organization Name	Date of Receipt
Mailing Address 10715 Pot Spring Rd		12 31 2021
City Cockeysville	StateZip CodeMD21030-3019	Transaction ID : 11170366 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer (for Individual) Johns Hopkins	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1450.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 446 OF 551

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle A. Sterba, William, R, , MD,FAAOS	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 1867 S Wiesbrook Rd	01-1-	Z'n Orde	12 31 2021
City Wheaton	State IL	Zip Code 60189-7850	Transaction ID : 11170368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) NM RMG Orthopaedics		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle B. Elzaim, Haissam, S, , MD, FAAO		Organization Name	Date of Receipt
Mailing Address 112 Cardinal Ave	-		12 31 2021
City McAllen	State TX	Zip Code 78504	Transaction ID : 11170370 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Self Employed		cupation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle C. White, Lydia, , , MD	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 905 Battleview Place			12 31 2021
City Murfreesboro	State TN	Zip Code 37128-2203	Transaction ID : 11170741 Amount of Each Receipt this Period
Tennessee Orthopedic Alliance Or			1000.00
		upation (for Individual) nopaedic Surgeons	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)			1500.00
TOTAL This Period (last page this line numb	per only)		

FOR LINE NUMBER:

PAGE 447 OF

551

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle I A. Hearty, Thomas, M, , MD, FAAOS	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 2116 Woodside Rd			12 31 2021
City Ann Arbor	State MI	Zip Code 48104	Transaction ID : 11170743 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) IHA		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Full Name of Individual (Last, First, Middle I B. Mejia, Alfonso, , , MD, MPH, FAA	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 5332 South Shore Drive			12 31 2021
City Chicago	State IL	Zip Code 60615	Transaction ID : 11170745 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1209.00
Name of Employer (for Individual) Illinois Association of Orthopedic Sur		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3225.00]
Full Name of Individual (Last, First, Middle I C. Lanighan, Kevin, W, , MD, FAAC		rganization Name	Date of Receipt
Mailing Address 5527 Pine Loch Ln			12 23 2021
City Williamsville	State NY	Zip Code 14221	Transaction ID : 11171645 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer (for Individual) Northtown Orthopedics		upation (for Individual) opaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional).			2709.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

FOR LINE NUMBER: PAGE 448 OF 551

ITEMIZED RECEIPTS			1	Jse separate schedule(s) or each category of the Detailed Summary Page	L `	heck on X 11a 13	ly on	e) 11b 14	11c	12		17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay n Iddro	ot be sold or used by any pe ess of any political committee	erson to s	for the solicit co	purp	ose of utions f	solicitin rom suc	g contri h comr	ibutions nittee	
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an	Association of Orthc	pa	edic S	Sur	geons	sPA	C of <i>i</i>	AAOS	I
A.	Full Name of Individual (Last, First, Middle Initia Gudeman, Scott, D, , MD,FAAOS Mailing Address 3132 Golfview Dr	al) or Full O	Irga	nization Name		Date o		· .				
	City	State		Zip Code		12		23	JL	202 ²	Y Y 1	
	Greenwood	IN		46143					111716 eceipt t		od	
	FEC ID number of contributing federal political committee.	С				<u> </u>		-		100	00.00]
	Name of Employer (for Individual) Ortholndy South		•	tion (for Individual) aedic Surgeon		N	1emo	Item				
	Receipt For:		•		_							
	Primary General	Aggregate	Yea	ur-to-Date ▼								
	Other (specify) V		-	1000.00								
B.	Full Name of Individual (Last, First, Middle Initia Mileski, Robert, Allen, , MD, FAAOS	al) or Full O	rga	nization Name		Date c	of Re	ceipt				
	Mailing Address 8555 E Voltaire			1		M 12	/	D D D 23	/ Y	y 2021	Y Y	
	City	State		Zip Code		Trans	sacti	on ID :	1117164	17		
	Scottsdale	AZ	85260			Amour	nt of	Each R	eceipt t	nis Peri	iod	
	FEC ID number of contributing federal political committee.	C				Ē		,		2	50.00	
	Name of Employer (for Individual) Phoenix Orthopedic Group		•	tion (for Individual) aedic Surgeon		N	lemo	Item				
	Receipt For:	Aggregate	Yea	ur-to-Date ▼								
	Primary General Other (specify) ▼		,	500.00								
с.	· · · · ·	al) or Full O	rga	nization Name		Date o	of Re	ceipt				
	Mailing Address 2221 Wankel Way					^M 12	1 /	D D D 23	/ Y	2021		
	City Oxnard	State CA		Zip Code 93030				-	111716 eceipt t	-	iod	
FEC ID number of contributing federal political committee.								,	,		00.00]
Ventura Orthopedics C			•	tion (for Individual) edic Surgeon		N	lemo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 500.00								
⊢	UBTOTAL of Receipts This Page (optional)				-	Ľ.		, . 	- - -	175	50.00]
1.0	OTAL This Period (last page this line number o	rny)		▶		land a		,		- 10 C	- 10 M	

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 449 OF 55		
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)		
			person for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)			opaedic SurgeonsPAC of AAOS		
Full Name of Individual (Last, First, Middle Le, Theodore, Toan, , MD,FAAOS	Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 7735 Hartford Hills Lane	ing Address 7735 Hartford Hills Lane				
City Montgomery	State OH	Zip Code 45242	Transaction ID : 11172405		
FEC ID number of contributing	С		Amount of Each Receipt this Period 300.00		
federal political committee.	C				
Name of Employer (for Individual) UOCC		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For:		Year-to-Date V			
Primary General	riggi oguto				
Other (specify) v		300.00			
Full Name of Individual (Last, First, Middle 3. Calcei, Jacob, G, , MD	Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 18400 Shelburne Rd			12 16 2021		
City	State	Zip Code	Transaction ID : 11172408		
Shaker Heights	OH	44118	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		250.00		
Name of Employer (for Individual) Hospital for Special Surgery-Cornell		upation (for Individual) nopaedic Surgeon	Memo Item		
Receipt For:	Aggregate	Year-to-Date ▼			
Other (specify) ▼		250.00]		
Full Name of Individual (Last, First, Middle C. Kuhn, John, E, , MD, FAAOS	Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 3724 Richland Avenue			12 16 2021		
City Nashville	State TN	Zip Code 37205	Transaction ID : 11172409 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		1000.00		
Name of Employer (for Individual) Vanderbilt Univ Med Ctr		upation (for Individual) opaedic Surgeon	Memo Item		
Receipt For:	I	Year-to-Date ▼			
Primary General Other (specify)		1000.00]		
SUBTOTAL of Receipts This Page (optional)			1550.00		

TOTAL This Period (last page this line number only)...... 1 1 4p 1 1 4p 1 1 4p 1

FOR LINE NUMBER:

PAGE 450 OF

551

ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	in Association of Ortho	opaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Ticker, Jonathan, B, , MD,FAAOS	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1 3rd Ave Apt 1022			12 16 Y Y Y Y 2021
	City Mineola	State NY	Zip Code 11501-4351	Transaction ID : 11172411 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) Orlin & Cohen Orthopaedic Group		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
В.	Full Name of Individual (Last, First, Middle Initi Lombardi, John, A, , MD, FAAOS Mailing Address 420 Hudson Ave	ial) or Full Or	ganization Name	Date of Receipt
				12 17 2021
	City Clarendon Hills	State IL	Zip Code 60514	Transaction ID : 11172412 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer (for Individual) DuPage Medical Grp		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
с.	Full Name of Individual (Last, First, Middle Initi Culp, Brian, Matthew, , MD,FAAO	ial) or Full Or S	ganization Name	Date of Receipt
	Mailing Address 1805 Barclay Blvd			12 20 2021
	City Princeton	State NJ	Zip Code 08540-5891	Transaction ID : 11172413 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) Princeton Orthopaedic Associates		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 1000.00	
s	JBTOTAL of Receipts This Page (optional)		•••••	1250.00

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 451 OF 55'
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a	nd Statements ma	ay not be sold or used by any	person for the purpose of soliciting contributions
			ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Political Action Committee of	the America	an Association of Orth	nopaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name	
Freedman, Brett, , , MD,FAAOS	,	5	Date of Receipt
Mailing Address 1257 Fox Grove Place SV	V		
City	State	Zip Code	12 20 2021 Transaction ID : 11172415
Rochester	MN	55902	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	С		1000.00
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
Mayo Clinic		nopaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		1000.00	
Other (specify) V		1000.00	
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name	
B. Snyder, Matthew, J, , MD, FAAC)S	- g	Date of Receipt
Mailing Address 14912 Chopine Pass	M = M / D = D / Y = Y = Y		
City	State	Zip Code	12 21 2021
Roanoke	IN	46783-9308	Transaction ID : 11172416 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	С		250.00
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item
The Orthopedic Hospital of Lutheran He		nopaedic Surgeon	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			
Other (specify) v		, 1000.00	_
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name	
c. Jiranek, William, A, , MD, FAAC		3 ¹	Date of Receipt
Mailing Address 4709 Creekstone Drive			
City	State	Zip Code	12 22 2021 Transaction ID : 11172417
Durham	VA	27703	Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		84.00
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
Duke University		opaedic Surgeon	-
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		1008.00	
Other (specify)		7 7 7	
SUBTOTAL of Receipts This Page (optiona	I)		1334.00
			· · · · · · · · · · · · · · · · · · ·

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

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 452 OF 551 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the second sec	he American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle II Glusenkamp, Nathan, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 9400 W Higgins Rd 	State Zip Code	12 22 2021 Transaction ID : 11172418
Rosemont	IL 60018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) AAOS	Occupation (for Individual) Chief Quality and Registries Officer	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle II Mejia, Alfonso, , , MD,MPH,FAA	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5332 South Shore Drive		12 24 2021
City Chicago	State Zip Code IL 60615	Transaction ID : 11172420
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 84.00
Name of Employer (for Individual) Illinois Association of Orthopedic Sur	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2016.00	
Full Name of Individual (Last, First, Middle In Schmidt, Kenneth, , , MD	nitial) or Full Organization Name	Date of Receipt
Mailing Address 10811 N 52nd Street		12 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Scottsdale	StateZip CodeAZ85254	Transaction ID : 11172421 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) OrthoArizona	Occupation (for Individual) Orthopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify)		
SUBTOTAL of Receipts This Page (optional)	·····	184.00
TOTAL This Period (last page this line numbe	r only)	

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FOR LINE NUMBER:

PAGE 453 OF

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of t	the America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Lange, Jeffrey, K, , MD Mailing Address 28 Exeter Street Apt 403 City Boston FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	State MA C Occu	rganization Name Zip Code 02116 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 240.00	Date of Receipt
Full Name of Individual (Last, First, Middle B. Leffers, Kevin, John, , MD Mailing Address 4922 Stratford Rd City Fort Wayne FEC ID number of contributing federal political committee. Name of Employer (for Individual) Fort Wayne Orthopaedics Receipt For: Primary General Other (specify) ▼	State IN C Occ. Ort	rganization Name Zip Code 46807-2947 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.00	Date of Receipt
Full Name of Individual (Last, First, Middle C. Prather, John, T, , MD, FAAOS Mailing Address 4425 Paulsen Street City Savannah FEC ID number of contributing federal political committee. Name of Employer (for Individual) Chatham Orthopaedic Associates Receipt For: Primary General Other (specify)	State GA C Occu Orth	rganization Name Zip Code 31405 upation (for Individual) opaedic Surgeon Year-to-Date ▼ 1000.00	Date of Receipt 12 28 2021 Transaction ID : 11172424 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional).			370.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		FOR LINE NUMBER: PAGE 454 OF 551 (check only one)			
ITE	MIZED RECEIPTS		for each category of the	(check only				
			Detailed Summary Page	▲ 11a 13	11b 11c 12 14 15 16 17			
Any	information copied from such Reports and St	atements ma	y not be sold or used by any p	-				
	r commercial purposes, other than using the							
	AME OF COMMITTEE (In Full)							
∕ ⊦	Political Action Committee of the	e America	an Association of Orth	opaedic S	SurgeonsPAC of AAOS			
<u>لا</u>	ull Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name					
	Arend, Thomas, E, , Jr,	,	.	Date of	Receipt			
Μ	ailing Address 9400 W Higgins Rd			M				
	ity	State	Zip Code	12	28 2021 action ID : 11172425			
	Rosemont	IL	60018		of Each Receipt this Period			
FI	EC ID number of contributing							
	deral political committee.	С			84.00			
N	ame of Employer (for Individual)	Occi	pation (for Individual)	— Ме	emo Item			
	AOS		f Executive Officer					
R	eceipt For:	Aggregate	Year-to-Date ▼					
-	Primary General		420.00	1				
l	Other (specify)		420.00					
Fi	ull Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name					
в. <u></u>	Panchbhavi, Vinod, Kumar, , MD,FA		-	Date of	Receipt			
Μ	Mailing Address 1165 Rymers Switch Lane							
C	ty State Zip Code				28 2021			
	riendswood	ТХ	77546		action ID : 11172426 of Each Receipt this Period			
FI	EC ID number of contributing	<u> </u>						
fe	deral political committee.	C			84.00			
N	ame of Employer (for Individual)	Оссі	upation (for Individual)	Me	emo Item			
_	niv of Texas Medical Branch	Orth	opaedic Surgeon	_				
R	eceipt For: Primary General	Aggregate Year-to-Date ▼						
-	Other (specify) V		536.00	1				
L								
	ull Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name					
	Priore, Anthony, , ,				Receipt			
IVI	ailing Address 9400 W Higgins Rd Ste 100			12	28 2021			
	ity	State	Zip Code	Trans	action ID : 11172427			
- F	Rosemont	IL	60018-4975	Amount	of Each Receipt this Period			
	EC ID number of contributing	С			84.00			
ie	deral political committee.				<u>y</u> y <u>x</u>			
	ame of Employer (for Individual)		ipation (for Individual)	Me	emo Item			
	AOS eceipt For:	1	f Marketing Officer					
[Primary General	Aggregate	Year-to-Date ▼					
-	Other (specify)		336.00					
·			,					
					252.00			
SUE	BTOTAL of Receipts This Page (optional)		······)					

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

1.

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American	Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middl Teuscher, David, Dean, , MD,FAAO Mailing Address 6330 Cobblestone Lane City Arlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Employed Receipt For: Primary General Other (specify) ▼	S State TX C Occupa	Zip Code 76001 tion (for Individual) aedic Surgeon	Date of Receipt 12 28 2021 Transaction ID : 11172428 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middl B. Iorio, Richard, , , MD,FAAOS Mailing Address 31 Prince St City Beverly FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brigham and Women's Hospital Receipt For: Primary General Other (specify) ▼	State MA C	Zip Code 01915 tion (for Individual) aedic Surgeon	Date of Receipt
Full Name of Individual (Last, First, Middl C. Lopez, David, Vincent, , MD,F, Mailing Address 27 Courtney Ct City Freehold FEC ID number of contributing federal political committee. Name of Employer (for Individual) Orthopaedic & Sports Medicine Speciali Receipt For: Primary General Other (specify)	AAOS State NJ C	Zip Code 07728 tion (for Individual) aedic Surgeon	Date of Receipt 12 ' 30 ' 2021 Transaction ID : 11172431 Amount of Each Receipt this Period 84.00 Memo Item
Orthopaedic & Sports Medicine Speciali Receipt For: Primary General	Orthopa Aggregate Yes	aedic Surgeon ar-to-Date ▼ 1008.00	418.00

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FOR LINE NUMBER: PAGE 456 OF 551

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements maname and a	ay not be sold or used by any address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ort	hopaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Kofoed, John, Charles, , MD, FAAOS Mailing Address 2619 Seminole Ct	ll) or Full O	organization Name	Date of Receipt
	City Fairfield	State CA	Zip Code 94534-7871	Transaction ID : 11172694 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		89.00
	Name of Employer (for Individual) Sutter Medical Group Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1068.00	
в.	Full Name of Individual (Last, First, Middle Initia Bernholt, David, , , MD	l) or Full O	organization Name	Date of Receipt
	Mailing Address 3126 Chapel Woods Cv			12 / D D / Y Y Y Y 2021
	City Germantown	State TN	Zip Code 38139	Transaction ID : 11172695 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		41.67
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.04	
с.	Full Name of Individual (Last, First, Middle Initia Calandruccio, James, H, , MD, FAA		Organization Name	Date of Receipt
	Mailing Address Campbell Clinic 1400 S Germantown Rd	State	Zip Code	12 / D D / Y Y Y Y 31 2021
	City Germantown	TN	38138-2205	Transaction ID : 11172696 Amount of Each Receipt this Period
Campbell Clinic O		С		41.67
			upation (for Individual) nopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.04	
⊢	UBTOTAL of Receipts This Page (optional)			

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma	ay not be sold or used by any puddress of any political committee	person for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee o	f the Americ	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Midd Crockarell, John, R, , Jr, MD, FA Mailing Address 1458 W Poplar Ave	le Initial) or Full C	organization Name	Date of Receipt
Ste 100			12 31 2021
City Collierville	State TN	Zip Code 38017	Transaction ID : 11172698 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.04]
Full Name of Individual (Last, First, Midd Ford, Marcus, Christopher, , MD Mailing Address 2255 Duntreath Rd		rganization Name	Date of Receipt
City Germantown	State TN	Zip Code 38139	12 31 2021 Transaction ID : 11172709 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.84
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) hopaedic Surgeon	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.08]
Full Name of Individual (Last, First, Midd C. Grear, Benjamin, J, , MD,FAA		organization Name	Date of Receipt
Mailing Address 219 Lagrange Creek Driv	ve		12 / D D / Y Y Y Y 12 31 2021
City Eads	State TN	Zip Code 38028	Transaction ID : 11172710 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		41.67
Name of Employer (for Individual) Campbell Clinic Receipt For:	Orth	upation (for Individual) opaedic Surgeon	Memo Item
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.04]
SUBTOTAL of Receipts This Page (optional	al)		104.18
TOTAL This Period (last page this line nur	nber only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 458 OF 55
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne America	an Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle II Guyton, James, L, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 6422 Massey Estates Cove			12 31 2021
City Memphis	State TN	Zip Code 38120	Transaction ID : 11172711 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Campbell Clinic Receipt For:		opaedic Surgeon Year-to-Date ▼	
Primary General Other (specify) ▼		500.04]
Full Name of Individual (Last, First, Middle In 3. Harkess, James, W, , MD,FAAOS	nitial) or Full O	rganization Name	Date of Receipt
Mailing Address 9566 Fox Hill Circle S	12 31 2021		
City	State	Zip Code	Transaction ID : 11172712
Germantown	TN	38139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		500.04]
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Heck, Robert, Kurt, , Jr, MD, FA			Date of Receipt
Mailing Address 4938 Barfield Rd			12 31 2021
City	State TN	Zip Code	Transaction ID : 11172713
Memphis FEC ID number of contributing federal political committee.	C	38117	Amount of Each Receipt this Period 41.67
Name of Employer (for Individual)		upation (for Individual)	Memo Item
Campbell Clinic Receipt For:		opaedic Surgeon Year-to-Date ▼	_
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.04]
SUBTOTAL of Receipts This Page (optional)			125.01

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

Use separate schedule(s)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Statements may not be sold or used by any per he name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Kelly, Derek, Michael, , MD,FAAOS Mailing Address 1458 W Poplar Ave Suite 100 City Collierville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	Initial) or Full Organization Name State Zip Code TN 38017 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.04 500.04	Date of Receipt
Full Name of Individual (Last, First, Middle B. Mascioli, Anthony, , , MD, FAAOS Mailing Address 226 W Goodwyn		Date of Receipt
City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State Zip Code TN 38111 C Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 249.96	12 31 2021 Transaction ID : 11172716 Amount of Each Receipt this Period 20.83 Memo Item
Full Name of Individual (Last, First, Middle C. Mauck, Benjamin, Matthew, , MI Mailing Address 2742 Central Ave City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual)	D, FAAOS State Zip Code TN 38111 C Occupation (for Individual)	Date of Receipt 12 31 2021 Transaction ID : 11172717 Amount of Each Receipt this Period 20.83 Memo Item
Campbell Clinic Receipt For: Primary General Other (specify)	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 249.96	
SUBTOTAL of Receipts This Page (optional).		83.33

FOR LINE NUMBER: PAGE 460 OF 551

	PTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only 11a 13	/ one)	11c 15	12 16 17
			not be sold or used by any pe ess of any political committee				
	E (In Full)		Association of Ortho				
Full Name of Individua A. Mihalko, Marc, J, ,	I (Last, First, Middle Initial) (MD, FAAOS	or Full Orga	nization Name	Date of	Date of Receipt		
Mailing Address 4079	Barfield Road			12 ^M	/ D D 31	/ Y	2021
City Memphis		State TN	Zip Code 38117		action ID : 11 of Each Rec		Period
FEC ID number of cor federal political commi	Ű.					-	41.67
Name of Employer (for Campbell Clinic	Individual)		tion (for Individual) aedic Surgeon	Me	emo Item		
Receipt For: Primary Other (specify)	General	ggregate Yea	ar-to-Date ▼ 500.04				
B. Murphy, Garnett,	I (Last, First, Middle Initial) Andrew, , MD,FAAOS		nization Name	Date of	Receipt		
	S Germantown Rd			^M 12	/ D D 31	/ Y	2021
City Germantown		State TN	Zip Code 38138-2205		action ID : 11 of Each Rec		Period
FEC ID number of cor federal political commi	Ű.	C				-	41.67
Name of Employer (fo Campbell Clinic	r Individual)		tion (for Individual) aedic Surgeon	Me	emo Item		
Receipt For: Primary Other (specify)	General	ggregate Yea	ar-to-Date ▼ 500.04				
Full Name of Individua C. Phillips, Barry, E	I (Last, First, Middle Initial)	or Full Orga	nization Name	Date of	Receipt		
Mailing Address 8681		_	1	^M 12	/ D D 31		2021
City Memphis		State TN	Zip Code 38125		action ID : 11 of Each Rec	-	Period
FEC ID number of contributing federal political committee.		С			y	, ,	20.83
Name of Employer (for Campbell Clinic	r Individual)		tion (for Individual) aedic Surgeon	Me	emo Item		
Receipt For: Primary Other (specify)	General	ggregate Yea	ar-to-Date ▼ 249.96				
SUBTOTAL of Receipts	This Page (optional)		•••••		· · · · ·	3	104.17

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Imag
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Richardson, David, R, , MD,FAAOS Mailing Address 636 Center Dr City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State TN C Occu Orth	Zip Code 38112 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500.04	Date of Receipt
В.	Full Name of Individual (Last, First, Middle Initia Rudloff, Matthew, Ian, , MD, FAAOS Mailing Address 10211 Ramblewood Dr City Arlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify) ▼	State TN C Occ Ort	Zip Code 38002 upation (for Individual) nopaedic Surgeon Year-to-Date ▼ 500,04	Date of Receipt
С.	Full Name of Individual (Last, First, Middle Initia Sawyer, Jeffrey, R, , MD, FAAOS Mailing Address 4450 Chickasaw Road City Memphis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Campbell Clinic Receipt For: Primary General Other (specify)	State TN C Occu Orth	Zip Code 38117 upation (for Individual) iopaedic Surgeon Year-to-Date ▼ 500.04	Date of Receipt M M / J 2021 Transaction ID : 11172724 Amount of Each Receipt this Period 41.67 41.67 Memo Item Memo Item
s	UBTOTAL of Receipts This Page (optional)		▶	125.01
Т	OTAL This Period (last page this line number or	חly)	••••••	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one) **X** 11a 11b 11c 12 **Detailed Summary Page** 13 14 15 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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sheffer, Benjamin, West, , MD, FAAOS Date of Receipt Α. Mailing Address 281 Ben Avon Way 1 2021 12 31 City Zip Code State Transaction ID: 11172725 TN Memphis 38111-7702 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orthopaedic Surgeon Campbell Clinic Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Thompson, Kirk, Michael, , MD Date of Receipt Mailing Address 75 St Albans Fairway 12 31 2021 City State Zip Code Transaction ID : 11172726 ΤN Memphis 38111 Amount of Each Receipt this Period FEC ID number of contributing С 20.83 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Campbell Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primarv General Other (specify) 249.96 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Thompson, Norfleet, Buckner, MD, FAAOS Date of Receipt С. Mailing Address 3784 Highland Park Place М M 12 31 2021 City State Zip Code Transaction ID : 11172727 ΤN Memphis 38111 Amount of Each Receipt this Period FEC ID number of contributing С 41.67 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Campbell Clinic** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 104.17 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and St. for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS		
Α.	Full Name of Individual (Last, First, Middle Initi Throckmorton, Thomas, Ward, , MD,FAA		rganization Name	Date of Receipt		
	Mailing Address 4901 Fairfield Circle			12 / D D / Y Y Y Y 12 31 2021		
	City Memphis	State TN	Zip Code 38117	Transaction ID : 11172728 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		41.67		
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) opaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.04			
В.	Full Name of Individual (Last, First, Middle Initi Warner, William, C, , Jr, MD, FA	al) or Full O	rganization Name	Date of Receipt		
υ.	Mailing Address 215 East Cherry Circle			12 31 2021		
	City Memphis	State TN	Zip Code 38117	Transaction ID : 11172729 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		41.67		
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) nopaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.04			
<u> </u>	Full Name of Individual (Last, First, Middle Initi Weinlein, John, C, , MD,FAAOS	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 633 Valleybrook Dr			M M / D D / Y Y Y Y 12 31 2021		
	City Memphis	State TN	Zip Code 38120-2707	Transaction ID : 11172730 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		41.67		
	Name of Employer (for Individual) Campbell Clinic		upation (for Individual) opaedic Surgeon	Memo Item		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.04			
s	UBTOTAL of Receipts This Page (optional)			125.01		
Т	OTAL This Period (last page this line number o	nly)	•			

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	n Association of Ortho	opaedic SurgeonsPAC of AAOS
<u> </u>	Full Name of Individual (Last, First, Middle Initi Williams, Keith, D, , MD, FAAOS Mailing Address 2336 Pinnacle Creek Dr	al) or Full Or	ganization Name	Date of Receipt
				12 31 2021
	City	State	Zip Code	Transaction ID : 11172731
	Germantown	TN	38138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	Campbell Clinic	Ortho	opaedic Surgeon	
	Receipt For:	Aggregate `	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.04]
в.	Full Name of Individual (Last, First, Middle Initi Bettin, Clayton, Charles, , MD,FAAO	,	ganization Name	Date of Receipt
	Mailing Address 5047 Shady Hall Ct	12 31 2021		
	City	State	Zip Code	Transaction ID : 11172735
	Memphis	TN	38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual) Campbell Clinic		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 500.04	
<u></u>	Full Name of Individual (Last, First, Middle Initi Jemison, D, Marshall, , MD,FAAOS		ganization Name	Date of Receipt
	Mailing Address 538 West Brow Rd	12 31 Y Y Y Y Y 12 31 2021		
	City Lookout Mountain	State TN	Zip Code 37350	Transaction ID : 11172775
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Hayes Hand Center		pation (for Individual) ppaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Y	fear-to-Date ▼ 500.00]
	UBTOTAL of Receipts This Page (optional)			583.34

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only 11a	11b	11c	12	
	y information copied from such Reports and St for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full)							
$\left \right\rangle$	Political Action Committee of the	opaedic S	Surgeon	sPA	C of AA	AOS		
Α.	Full Name of Individual (Last, First, Middle Initi Pollard, James, Alan, , MD,FAAOS	al) or Full O	rganization Name	Date of	Receipt			
	Mailing Address 4800 Stevens			12 ^M	/ D D D 31		у у 2021	Y
	City Pine Bluff	State AR	Zip Code 71603		action ID :			
	FEC ID number of contributing federal political committee.	С					250.0	00
	Name of Employer (for Individual)	Occu	pation (for Individual)	M	emo Item			
	Jefferson Regional Orthopaedic and Spi	Orth	opaedic Surgeon					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼		250.00]				
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name					
Β.	Sanders, Steven, M, , MD, FAAOS			Date of	Receipt			
	Mailing Address 9124 Eagle Hills Dr			12 / D D / Y Y Y Y 12 31 2021				Y
	City	State	Zip Code		action ID :			
	Las Vegas	NV	89134	Amount	t of Each R	Receipt th	his Period	
	FEC ID number of contributing federal political committee.	С					500.0	00
	Name of Employer (for Individual) Bone & Joint Specialists		upation (for Individual) opaedic Surgeon	M	emo Item			
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼		, 500.00	1				
<u>с.</u>	Full Name of Individual (Last, First, Middle Initi Roth, Alan, I, , MD,FAAOS	al) or Full O	rganization Name	Date of	Receipt			
	Mailing Address 318 Mockingbird Valley Rd			M M 12	/ D D 31		2021	Y
	City	State KY	Zip Code		action ID :			
	Louisville		40207	Amount	t of Each R	Receipt th	nis Period	
					, , ,		200.0	00
			ipation (for Individual) opaedic Surgeon	М	emo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00]				
s	UBTOTAL of Receipts This Page (optional)					,	950.0	00
т	OTAL This Period (last page this line number o	nly)			-	-		

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FOR LINE NUMBER: PAGE 466 OF 551

ITEMIZED RECEIPTS	Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using t		person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle Mailing Address 64 Brookside Dr City East Schodack FEC ID number of contributing federal political committee.		Date of Receipt 12 12 12 12 12 12 12 1 12 1 1 1 1 1 1
Name of Employer (for Individual) Ortho NY Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Memo Item
Full Name of Individual (Last, First, Middle B. Hoellrich, Rudolf, , , MD,FAAOS Mailing Address 84553 Pheasant Ln City Pleasant Hill FEC ID number of contributing federal political committee. Name of Employer (for Individual) Slocum Center Receipt For: Primary General Other (specify) ▼	Initial) or Full Organization Name State Zip Code OR 97455 C Occupation (for Individual) Orthopaedic Surgeon Othopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Full Name of Individual (Last, First, Middle) C. Lechner, Jonathan, D, , MD,FAA Mailing Address 240 Temple Street Apt 601 City Fredonia FEC ID number of contributing federal political committee. Name of Employer (for Individual) Bradford Regional Med Center Receipt For: Primary General Other (specify) Other (specify)		Date of Receipt 12 31 2021 Transaction ID : 11172786 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	er only)	1000.00

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Т	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)			
• •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS			
<u>А.</u>	Full Name of Individual (Last, First, Middle Init Mess, Charles, Francis, , Jr, MD,FAA	ial) or Full C	organization Name	Date of Receipt			
	Mailing Address 19300 Pyrite Lane			12 31 Y Y Y Y 2021			
	City Brookeville	State MD	Zip Code 20833	Transaction ID : 11172787 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer (for Individual) Potomac Valley Orthopaedic Associates Receipt For:	Orth	upation (for Individual) nopaedic Surgeon	Memo Item			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00				
В.	Full Name of Individual (Last, First, Middle Init Hansen, Heather, , , MD	ial) or Full C	organization Name	Date of Receipt			
	Mailing Address 1109 Osprey Falls Circle City	State	Zip Code	12 31 2021			
	Billings	MT	59106	Transaction ID : 11172789 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		1000.00			
	Name of Employer (for Individual) SCL Health		upation (for Individual) hopaedic Surgeon	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
С.	Full Name of Individual (Last, First, Middle Init Elliott, James, S, , MD,FAAOS	ial) or Full C	organization Name	Date of Receipt			
	Mailing Address 3616 Timberline Dr	1		12 / D D / Y Y Y Y 12 31 2021			
	City Billings	State MT	Zip Code 59102	Transaction ID : 11172790 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		1000.00			
	Name of Employer (for Individual) OrthoMontana		upation (for Individual) opaedic Surgeon	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00				
⊢	UBTOTAL of Receipts This Page (optional)			2250.00			
Т	OTAL This Period (last page this line number of	only)	••••••				

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551

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
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	NAME OF COMMITTEE (In Full) Political Action Committee of the	e America	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Init Klepps, Steve, , , MD, FAAOS	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1466 Shade Tree Cir	01-1-	Zin Onda	12 31 2021
	City Billings	State MT	Zip Code 59102-7964	Transaction ID : 11172791 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) Montana Ortho & Sports Med		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
R	Full Name of Individual (Last, First, Middle Init Miller, Benjamin, James, , MD,MS,F		ganization Name	Date of Receipt
υ.	Mailing Address 62 Sumac Ct	07 09 2021		
	City Iowa City	State IA	Zip Code 52246	Transaction ID : 11239324
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) University of Iowa		upation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	Refund(s) on Schedule B Totaling \$1000.00 This changes the YTD Total to \$1000.00
С.	Full Name of Individual (Last, First, Middle Init Gibson, Brett, W, , MD,FAAOS	ial) or Full Or	rganization Name	Date of Receipt
	Mailing Address 2046 Pheasant Ct	State	Zip Code	08 / 28 / 2021
	Bethlehem	PA	18015	Transaction ID : 11239325 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		0.00
	Name of Employer (for Individual) St. Luke's Orthopaedic Specialists		pation (for Individual) opaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 0.00	Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$0.00
s	UBTOTAL of Receipts This Page (optional)			1000.00
Т	OTAL This Period (last page this line number of	only)		

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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 469 OF 551 (check only one)
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Political Action Committee of the	America	an Association of Ortho	paedic SurgeonsPAC of AAOS
Α.	Full Name of Individual (Last, First, Middle Initia Lin, Jason, Seitetsu, , MD, FAAOS	al) or Full O	Organization Name	Date of Receipt
	Mailing Address 3640 NW Goldfinch Drive			M M / D D / Y Y Y Y 11 01 2021
	City Corvallis	State OR	Zip Code 97330-3487	Transaction ID : 11239326 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		0.00
	Name of Employer (for Individual) Samaritan Orthopaedics and Sports Medi		upation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 0.00	Refund(s) on Schedule B Totaling \$300.00 This changes the YTD Total to \$0.00
В.	Full Name of Individual (Last, First, Middle Initia Watson, Troy, S, , MD, FAAOS	al) or Full O	Organization Name	Date of Receipt
	Mailing Address 75 Kittansett Loop			M M / D D / Y Y Y Y 11 05 2021
	City	State	Zip Code	Transaction ID : 11239327
	Henderson	NV	89052-6694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		0.00
	Name of Employer (for Individual) Desert Orthopaedic Center		supation (for Individual) hopaedic Surgeon	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$750.00
с.	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Organization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		

Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	•	0.00
TOTAL This Period (last page this line number	438839.09	

SCHEDULE A (FEC Form 3X) ľ

FOR LINE NUMBER:

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551

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any part and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of th	ne American Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name of Individual (Last, First, Middle In A. Price For Congress Mailing Address P.O. Box 425	nitial) or Full Organization Name	Date of Receipt
City Roswell	GA 30077	Transaction ID : 11162935 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00386755	2000.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00]
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Mailing Address		Date of Receipt
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FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
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Full Name of Individual (Last, First, Middle In	nitial) or Full Organization Name	Date of Receipt
Mailing Address		
City	State Zip Code	Amount of Each Descript this Poried
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
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SCHEDULE B (FEC Form 3X)	Use separate schedu		IE NUMBER: PAGE 471 OF 551									
ITEMIZED DISBURSEMENTS	for each category of Detailed Summary P	the X 21	b 22 23 26 27									
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Associa	ation of Ortho	ppaedic SurgeonsPAC of AAOS									
Full Name (Last, First, Middle Initial) A. Huntington National Bank			Date of Disbursement									
Mailing Address 678 Lee St			07 06 2021									
City Des Plaines Purpose of Disbursement	StateZip CodeIL60018		FEC Identification Number									
Bank fees deducted from account		001	C Transaction ID : 10980810									
Candidate Name		Category/ Type	Amount of Each Disbursement this Period									
Office Sought: House Dis Senate President	sbursement For: Primary Gene Other (specify) ▼	eral	Bank fees deducted from accou									
State: District:												
Full Name (Last, First, Middle Initial) B. Huntington National Bank			Date of Disbursement									
Mailing Address 678 Lee St	07 15 2021											
City Des Plaines Purpose of Disbursement	State Zip Code IL 60018		FEC Identification Number									
Bank fees deducted from account		001 Category/	C Transaction ID : 10987816 Amount of Each Disbursement this Period									
Senate	Sbursement For:	Туре	122.11 Bank fees deducted from accord									
State: District:	Other (specify)		Memo Item									
Full Name (Last, First, Middle Initial) C. Huntington National Bank			Date of Disbursement									
Mailing Address 678 Lee St			08 / 03 / Y Y Y Y 2021									
City Des Plaines	State Zip Code IL 60018		FEC Identification Number									
Purpose of Disbursement Bank fees deducted from account Candidate Name		001	C Transaction ID : 11082187									
		Category/ Type	Amount of Each Disbursement this Period									
Office Sought: House Dis Senate President	sbursement For: Primary Gene Other (specify) ▼	eral	228.52 Bank fees deducted from accor									
State: District:			Memo Item									
SUBTOTAL of Disbursements This Page (opt	onal)	••••••	497.71									
TOTAL This Period (last page this line number	er only)	••••••	, , , , , , , , , , , , , , , , , , , ,									

CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		arate schedule(s) category of the		heck o	nly o				_	PAGE 472 OF 551						
-		Summary Page		X 2	lb Ba	22 28b	23		26 29	27 30b						
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NAME OF COMMITTEE (In Full) Political Action Committee of the	American	Association	of (Orth	opa	edic S	Surge	ons	PA	C of AAOS						
Full Name (Last, First, Middle Initial) Huntington National Bank Mailing Address 678 Lee St						Date of		rseme	ent / Y	2021						
City	State	State Zip Code														
Des Plaines Purpose of Disbursement	IL		FEC Identification Number													
Bank fees deducted from account Candidate Name			Cat	001 egory/		Tra	nsacti of Ea			2188 ment this Period						
Office Sought: House Disburs	sement For:	General	Т	ype	_				-	87.89						
State: District:	Other (specify)						Bank fees deducted from acc									
Full Name (Last, First, Middle Initial)			Date of	Disbu	rseme	nt										
Mailing Address 678 Lee St	_	м м 07	/ [12	/ Y	2021										
City Des Plaines			FEC Id	entifica	tion N	lumber										
Purpose of Disbursement Bank fees deducted from account Candidate Name)01 egory/		C Transaction ID : 11082189 Amount of Each Disbursement this											
Office Sought: House Disburs	General	Т	уре			-1-	Bai	nk fees	122.06 deducted from acc							
State: District:	Other (spe	Primary General Other (specify)					mo Itei	n								
Full Name (Last, First, Middle Initial) Huntington National Bank							Date of Disbursement									
Mailing Address 678 Lee St						07 / D D / Y Y Y Y 07 19 2021										
City Des Plaines	State IL	Zip Code 60018				FEC Identification Number										
Purpose of Disbursement Bank fees deducted from account Candidate Name	[Cat)01 egory/ ype	Transaction ID : 11082190 Amount of Each Disbursement this Period												
Office Sought: House Disburs Senate President	fice Sought: House Disbursement For: Senate Primary General President Other (specify) ▼									91.87 s deducted from acc						
State: District: SUBTOTAL of Disbursements This Page (optional)			•			· · ·			301.82						

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NAME OF COMMITTEE (In Full) Political Action Committee	of the Ame	rican	Association	of C	Drtho	bae	edic S	Surgeo	ns-	-PA	C of /	AAOS					
Full Name (Last, First, Middle Initial) A. Huntington National Bank							Date of	Disburse	emer	nt / Y	YY	Ý	_				
Mailing Address 678 Lee St	1		1			07 26 2021											
City Des Plaines Purpose of Disbursement	State IL	State Zip Code IL 60018							FEC Identification Number								
Bank fees deducted from account				0	01		C										
Candidate Name					egory/ /pe			of Each			nent thi						
Office Sought: House Senate President	Disbursement Prim Othe		General ify) ▼					mo Item	Ban	م k fees		1.64 ed from a	ccour				
State: District:							Ivie	mo item					_				
Full Name (Last, First, Middle Initial) B. Huntington National Bank								Disburse		nt							
Mailing Address 678 Lee St			07		29	/ Y	2021	Y									
City Des Plaines Purpose of Disbursement	State IL		-	_	entificatio	n Nı	umber		1								
Bank fees deducted from account Candidate Name		Ca						nsaction				s Period					
Office Sought: House Senate President	Prim	isbursement For:							1	164.40 educted from acc	ccou						
State: District:		Other (specify)					Me	mo Item									
Full Name (Last, First, Middle Initial) C. Huntington National Bank							Date of	Disburse	emer	nt							
Mailing Address 678 Lee St						-	08		Б 6	/ Y	2021	Y					
City Des Plaines	State IL)	Zip Code 60018				FEC Id	entificatio	n Nı	umber							
Purpose of Disbursement Bank fees deducted from account			[0	01												
Candidate Marile	didate Name							of Each	Disl	ourser	nent thi	s Period					
Office Sought: House Senate President	Disbursement Prim Othe		General ify) ▼		_			mo Item	Ban	k fees		9.56 ed from a	Iccou				
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	Political Action Committee of the	American	Association	of (Ortho	ра	edic S	Surgeo	ns	·PA(C of A	AOS				
	Full Name (Last, First, Middle Initial) Huntington National Bank						Date of	Disburse	_	t						
	Mailing Address 678 Lee St					FEC Identification Number										
	City Des Plaines	State IL	Zip Code 60018													
	Purpose of Disbursement Bank fees deducted from account	001						Transaction ID : 11097								
	Candidate Name				egory/ /pe			of Each				Period				
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General						Bank	fees	226.9 deducted					
	State: District:			Memo Item												
	Full Name (Last, First, Middle Initial) Huntington National Bank						Date of	Disburse		t						
	Mailing Address 678 Lee St		08		9	/ Y	2021	Y								
	City Des Plaines									mber						
	Purpose of Disbursement Bank fees deducted from account		001					nsaction	ID : '	11101	661					
	Candidate Name	Category/ Type					Amount	ent this	Period							
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe				i.49 ed from acco										
	State: District:		ciry)				Me	mo Item								
C.	Full Name (Last, First, Middle Initial) Huntington National Bank						Date of	Disburse	ment	t						
	Mailing Address 678 Lee St						м м 08	/ D 1	^р 6	/ Y	2021	Y				
	City Des Plaines	State IL	Zip Code 60018				FEC Ide	entificatior	n Nu	mber						
	Purpose of Disbursement Bank fees deducted from account			0	01		C Transaction ID : 11101662									
	Candidate Name		Category/ Type					Amount of Each Disbursement this Per								
	Office Sought: House Disburs Senate President	Senate Primary General							632.35 Bank fees deducted from an Memo Item							
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\backslash	NAME OF COMMITTEE (In Full)														
$\Big $	Political Action Committee of the	American	Association	of (Ortho	opa	aedic S	Surgeo	ons	PA	C c	of AAC	DS		
Α.	Full Name (Last, First, Middle Initial) Huntington National Bank						Date c	of Disburs		ent		V V			
	Mailing Address 678 Lee St														
	City Des Plaines	State IL	Zip Code 60018				FEC Identification Number								
	Purpose of Disbursement Bank fees deducted from account	001						C Transaction ID : 11101663							
	Candidate Name				egory/ /pe	1						this Period			
	Office Sought: House Disburse Senate President	ement For: Primary	General				L		Bai	nk fees	-	286.46 ucted fro	m accou		
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B.	Full Name (Last, First, Middle Initial) Huntington National Bank						Date c	of Disburs		ent			_		
	Mailing Address 678 Lee St		08	/ D	30	/ Y)21							
	City Des Plaines	State Zip Code IL 60018								lumber		_			
	Purpose of Disbursement Bank fees deducted from account		001					ansactio	n ID	: 1110	1664				
	Candidate Name	Category/ Type						Amount of Each Disbursement thi							
	Office Sought: House Disburse Senate President	rsement For: Primary General Other (specify)					273.98 Bank fees deducted from								
	State: District:		Siry)				Me	emo Item							
C.	Full Name (Last, First, Middle Initial) Huntington National Bank						Date c	of Disburs		ent			_		
	Mailing Address 678 Lee St						09	/ D	15	/ Ү)21			
	City Des Plaines	State IL	Zip Code 60018				FEC lo	lentificati	on N	lumber		_			
	Purpose of Disbursement Bank fees deducted from account	ose of Disbursement							C Transaction ID : 11111786						
	Candidate Name		Amount of Each Disbursement this Pe							riod					
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General Gify) ▼							nk fees	s ded	133.77 ucted fro	om accou		
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 476 OF 551									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl 21b 28a	y one) 22 23 26 27 28b 28c 29 30b									
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NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Associatio	n of Orthop	paedic SurgeonsPAC of AAOS									
Full Name (Last, First, Middle Initial) A. Huntington National Bank			Date of Disbursement									
Mailing Address 678 Lee St			10 04 2021									
City Des Plaines Purpose of Disbursement	State Zip Code IL 60018		FEC Identification Number									
Bank fees deducted from account		001	Transaction ID : 11119510									
Candidate Name		Category/ Type	Amount of Each Disbursement this Period									
Office Sought: House Disbu	ursement For: Primary General Other (specify) ▼		Bank fees deducted from account									
State: District:												
Full Name (Last, First, Middle Initial) B. Huntington National Bank			Date of Disbursement									
Mailing Address 678 Lee St		09 07 2021										
City Des Plaines Purpose of Disbursement	State Zip Code IL 60018		FEC Identification Number									
Bank fees deducted from account		001 Category/	Transaction ID : 11119579 Amount of Each Disbursement this Period									
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State: District:			Memo Item									
Full Name (Last, First, Middle Initial) C. Huntington National Bank			Date of Disbursement									
Mailing Address 678 Lee St			09 / 13 / Y Y Y Y 2021									
City Des Plaines	State Zip Code IL 60018		FEC Identification Number									
Purpose of Disbursement Bank fees deducted from account Candidate Name		001	C Transaction ID : 11119580									
		Category/ Type	Amount of Each Disbursement this Period									
Office Sought: House Disbu	ursement For: Primary General Other (specify) ▼		Bank fees deducted from accou									
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NAME OF COMMITTEE (In Fu		American	Association	of (Drthop	aedic	Surgeo	nsF	PAC	of AAOS					
Full Name (Last, First, Middle A. Huntington National I	,					Date	of Disburs	ement	Y	YYYY					
Mailing Address 678 Lee St			1			09 20 2021									
City Des Plaines Purpose of Disbursement		State IL	Zip Code 60018		FEC Identification Number										
Bank fees deducted from account	unt			0	01	 Invalue 	ransactior	1D:1	11195	81					
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Full Name (Last, First, Middle B. Huntington National I	,						of Disburs								
Mailing Address 678 Lee St		09		27	Y	2021									
City Des Plaines Purpose of Disbursement		State IL	Zip Code 60018		FEC	Identificatio	on Num	lber	-						
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City Des Plaines		State IL	Zip Code 60018				Identificatio	n Num	ıber						
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Office Sought: House Senate Preside		ment For: Primary Other (spec	General cify) ▼				lemo Item	Bank	fees d	educted from accou					
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SUBTOTAL of Disbursements Th	iis Page (optional).				····· >				,	524.56					
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Office Sought: House Disbursement For: Senate Primary General President Other (specify) Memo Item State: District: Disbursement For: Full Name (Last, First, Middle Initial) Date of Disbursement B. Huntington National Bank Date of Disbursement Mailing Address 678 Lee St City State Zip Code Des Plaines IL 60018 Purpose of Disbursement 001 Transaction I	PAGE 478 OF 551									
or for commercial purposes, other than using the name and address of any political committee to solicit contributions NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeon Full Name (Last, First, Middle Initial) A. Huntington National Bank Mailing Address 678 Lee St City State Des Plaines IL Purpose of Disbursement Bank fees deducted from account Candidate Name Office Sought: House Disbursement For: Senate Primary Other (specify) Memo Item B. Huntington National Bank Date of Disbursement For: State: District: Full Name (Last, First, Middle Initial) Date of Disbursement B. Huntington National Bank Date of Disbursement Mailing Address 678 Lee St City City State Zip Code Bank fees deducted from account Code City State Zip Code Des Plaines IL State Eic Identification Purpose of Disbursement Goulta FEC Identification <tr< th=""><th>26 27 29 30b</th></tr<>	26 27 29 30b									
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	e (Last, First, Middle Initial) Igton National Bank					[Date of	Disburs		t	Ŷ	
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Full Name (Last, First, Middle Initial) A. Huntington National Bank Mailing Address 678 Lee St						Date of	Disburse			Y Y Y 2021		
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-	Full Name (Last, First, Middle Initial) Matsui For Congress					Date of Disbursement
	Mailing Address PO Box 1738					07 28 2021
	City Sacramento	State CA	Zip Code 95812			FEC Identification Number
	Purpose of Disbursement			1.00	11	C C00409219 Transaction ID : 11077751
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_	State: CA District: 05 Full Name (Last, First, Middle Initial) Citizens For Boyle					Date of Disbursement
	Mailing Address PO Box 14310	07 28 2021				
	City Philadelphia Purpose of Disbursement		FEC Identification Number			
	Candidate Name Boyle, Brendan, F., Rep., Office Sought: x House Disburse	ment For:	2022	Cate)11 egory/ ype	Transaction ID : 11077753 Amount of Each Disbursement this Period 2500.00
		Primary Other (spe	General cify)			Memo Item
-	Full Name (Last, First, Middle Initial) Josh Gottheimer For Congress					Date of Disbursement
	Mailing Address PO Box 584					07 / 28 / Y Y Y Y 2021
	City Ridgewood	State NJ	Zip Code 07451			FEC Identification Number
	Purpose of Disbursement Candidate Name Gottheimer, Joshua, S., Rep.,			Cate	911 egory/ ype	C C00573949 Transaction ID : 11077754 Amount of Each Disbursement this Period
	Office Sought: Senate President State: NJ District: 05	ement For: 2 Primary Other (spe	General			1000.00 Memo Item
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Political Action Committee of the A	merican	Association	of C	Drth	ора	edic S	Surg	jeor	nsF	PAC	of AAOS		
Full Name (Last, First, Middle Initial) A. Pascrell For Congress						Date of	f Dist	ourse	ment				
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Mailing Address PO Box 100						07		28	3		2021		
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B. Julia Brownley For Congress						Date of	f Dist	ourse	ment				
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Mailing Address PO Box 2018						07		28	3	<u> </u>	2021		
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Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS A Kathleen Rice For Congress Mailing Address PO Box 744 Date of Disbursement Office Sought State Purpose of Disbursement 01 Cardidate Name Disbursement For: 2022 Primary General Office Sought House Purpose of Disbursement Bar Other (specify) B Building America's Republican Representation (BARR PAC) Mailing Address 402 S Capital St, SE Other (specify) Office Sought House Purpose of Disbursement Disbursement For: 2022 City State: Nating Address 402 S Capital St, SE City Office Sought: House Office Sought: Disbursement For: 2022 City State Office Sought: Disbursement For: 2022 City State Office Sought: Disbursement For: 2022 City State Office Sought: Disbursement For: 2022 State: Disbursement for: 2022 Office Sought: State												
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Α.	Full Name (Last, First, Middle Initial) Kurt Schrader For Congress						Date of	Disb	ursei	nent					
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C.	John Carter For Congress						Date of	Disb		_			_		
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Full Name (Last, First, Middle Initial) A. Gallego For Arizona				Date of Disbursement
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Mailing Address PO Box 1710				07 28 2021
City	State	Zip Code		FEC Identification Number
Phoenix	AZ	85001		
Purpose of Disbursement			011	C C00558627
Candidate Name				Transaction ID : 11077767
Gallego, Ruben, , Rep.,			Category/ Type	Amount of Each Disbursement this Period
	sement For:	2022		5000.00
	x Primary	General		7 7 7 7 7
State: AZ District: 07	Other (spe	ecify) 🔻		Memo Item
Full Name (Last, First, Middle Initial)				
B. Cartwright For Congress				Date of Disbursement
				M M / D D / Y Y Y Y
Mailing Address PO Box 414				07 28 2021
City	State	Zip Code		FEC Identification Number
Scranton Purpose of Disbursement	PA	18501		0 000500000
			011	С соо5о9968
Candidate Name			Category/	Transaction ID : 11077768 Amount of Each Disbursement this Period
Cartwright, Matt, A., Rep.,			Type	
	sement For:	2022		1000.00
	Primary	General		
State: PA District: 08	Other (spe	ecity)		Memo Item
Full Name (Last, First, Middle Initial)				
C. Cole For Congress				Date of Disbursement
Mailing Address P.O. Box 722256				07 28 2021
City	State	Zip Code		FEC Identification Number
Norman	ОК	73070		
Purpose of Disbursement			014	C C00379735
Candidate Name			011	Transaction ID : 11077769
Cole, Thomas, , Rep.,			Category/ Type	Amount of Each Disbursement this Period
	sement For:	2022	.160	2500.00
Sonoto	Primary	General		
President	Other (spe	ecify) 🔻		Memo Item
State: OK District: 04				
SUBTOTAL of Disburgements This Days (unitary)	`			8500.00
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	for commercial purposes, other than using the na							
\square	NAME OF COMMITTEE (In Full)							
	Political Action Committee of the A	American	Association	of C	Drth	opa	aedic Surgeons	PAC of AAOS
Δ	Full Name (Last, First, Middle Initial)						Date of Disburseme	nt
	Diana Degette For Congress						M M / D D	
	Mailing Address P.O. Box 61337						07 28	2021
	City	State	Zip Code				FEC Identification N	umber
	Denver Purpose of Disbursement	CO	80206				0	
	Fulpose of Disbursement			0	11	11	C C00311639	
	Candidate Name			Cate	egory/	,	Transaction ID Amount of Each Dis	: 11077770 bursement this Period
	DeGette, Diana, , Rep.,				/pe			
		ement For: 2						1000.00
	Senate x President	Primary Other (spec	General					
	State: CO District: 01	Other (spec	City) 🔻				Memo Item	
	Full Name (Last, First, Middle Initial)							
В.	Peter Meijer For Congress						Date of Disburseme	nt
						_		
	Mailing Address P.O. Box 68554						07 28	2021
	City Grand Rapids	State MI	Zip Code 49516				FEC Identification N	umber
	Purpose of Disbursement		49510	_	_		C C00710962	
				0	11	ш	Transaction ID :	11077771
	Candidate Name				gory/	'		bursement this Period
	Meijer, Peter, James, Rep., Office Sought: x House Disburse	ment For:		Ту	/pe			1000.00
		Primary	2022 General					1000.00
	President	Other (spec					Memo Item	
_	State: MI District: 03	1					Wento item	
~	Full Name (Last, First, Middle Initial)						Date of Disburseme	-
С.	David Rouzer For Congress							
	Mailing Address PO Box 3142						07 / 28	2021
	City	State	Zip Code				FEC Identification N	umber
	Wilmington Purpose of Disbursement	NC	28406					
	Purpose of Disbursement			0	11	11	C C00501643	
	Candidate Name				egory/	,	Transaction ID	: 11077772 bursement this Period
	Rouzer, David, C., Rep.,				/pe			
		ment For: 2	2022					3500.00
	Senate x	Primary Other (anal	General				-	
	State: NC District: 07	Other (spec	uny) ▼				Memo Item	
s	UBTOTAL of Disbursements This Page (optional).)			5500.00
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 491 OF 551					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a						
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NAME OF COMMITTEE (In Full) Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial) A. Walberg For Congress				Date of Disbursement					
Mailing Address PO Box 1362				07 28 2021					
City Jackson	State MI	Zip Code 49204		FEC Identification Number					
Purpose of Disbursement			011	C C00390724 Transaction ID : 11077776					
Walberg, Tim, , Rep.,	ment For: 2	2022	Category/ Type	Amount of Each Disbursement this Period 2500.00					
Senate X President	Primary Other (spec	General		Memo Item					
State: MI District: 07 Full Name (Last, First, Middle Initial) B. Jim Banks For Congress, Inc.				Date of Disbursement					
Mailing Address PO Box 11431									
City Fort Wayne Purpose of Disbursement									
Candidate Name			011 Category/	C C00577999 Transaction ID : 11077777 Amount of Each Disbursement this Period					
· · ·	ment For: ; Primary	2022 General	Туре	1000.00					
State: IN District: 03	Other (spec	cify)		Memo Item					
Full Name (Last, First, Middle Initial) C. Free State PAC				Date of Disbursement					
Mailing Address PO Box 2712 Suite 115				07 / 28 / Y Y Y Y Y 2021					
City Topeka	State KS	Zip Code 66601		FEC Identification Number					
Purpose of Disbursement Moran LPAC Candidate Name			011 Category/	C C00455717 Transaction ID : 11077782 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ment For: Primary	General	Туре	5000.00 Moran LPAC					
State: District:	Other (spe	uny) ▼		Memo Item					
SUBTOTAL of Disbursements This Page (optional).			•••••	8500.00					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 492 OF 551								
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a									
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NAME OF COMMITTEE (In Full) Political Action Committee of the A	Americar	Association	of Orthop	aedic SurgeonsPAC of AAOS								
Full Name (Last, First, Middle Initial) A. DOCS PAC				Date of Disbursement								
Mailing Address PO Box 26141		1		07 28 2021								
City Alexandria	State VA	Zip Code 22313		FEC Identification Number								
Purpose of Disbursement Marshall LPAC			011	C C00632323								
Candidate Name			Category/ Type	Transaction ID : 11077783 Amount of Each Disbursement this Period								
Office Sought: House Disburse Senate President	туре	5000.00 Marshall LPAC										
State: District: Full Name (Last, First, Middle Initial)	Other (spe	- ,, ,		Memo Item								
B. Bera For Congress				Date of Disbursement								
Mailing Address PO Box 582496				08 25 2021								
City Elk Grove Purpose of Disbursement	State CA	Zip Code 95758		FEC Identification Number								
Candidate Name Bera, Ami, , Rep., MD			011 Category/ Type	Transaction ID : 11093537 Amount of Each Disbursement this Period								
••	ement For: Primary Other (spe	General		2500.00								
State: CA District: 07				Memo Item								
Full Name (Last, First, Middle Initial) C. Alamo PAC				Date of Disbursement								
Mailing Address 816 Congress Ave, Suite 960 Frost Bank Plaza				08 25 2021								
City Austin Purpose of Disbursement Cornyn LPAC	State TX	Zip Code 78701	011	FEC Identification Number								
Candidate Name	011 Category/ Type	Transaction ID : 11093541 Amount of Each Disbursement this Period										
Office Sought: House Disburse Senate President District:	Туре	5000.00 Cornyn LPAC Memo Item										
SUBTOTAL of Disbursements This Page (optional).			••••••	12500.00								
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S	CHEDULE B (FEC Form 3X)			FOR		NUMBER: PAGE 493 OF 55							
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\land	NAME OF COMMITTEE (In Full)												
	Political Action Committee of the A	merican	Association	of Ort	thopa	aedic SurgeonsPAC of AAOS							
Α.	Full Name (Last, First, Middle Initial) Michael Burgess For Congress					Date of Disbursement							
	Mailing Address PO Box 2334		08 25 2021										
	City Senton	State TX	Zip Code 76202			FEC Identification Number							
	Purpose of Disbursement			011		С С00372532							
	Candidate Name			Catego	rv/	Transaction ID : 11093543 Amount of Each Disbursement this Period							
	Burgess, Michael, C., Rep., M.D.			Туре		2000.00							
	Senate X	ment For: 2 Primary Other (spec	General			2000.00							
	State: TX District: 26		Memo Item										
B	Full Name (Last, First, Middle Initial) Barragan For Congress					Date of Disbursement							
						M M / D D / Y Y Y Y							
	Mailing Address 1840 South Gaffey Street #421					09 15 2021							
	City San Pedro	State CA	Zip Code 90731			FEC Identification Number							
	Purpose of Disbursement			011		С С00577353							
	Candidate Name			011 Catego	rv/	Transaction ID : 11107426 Amount of Each Disbursement this Period							
	Barragan, Nanette, Diaz, Rep.,			Туре									
	° ^	ment For: 2 Primary	2022 General			2500.00							
	State: CA District: 44	Other (spec				Memo Item							
_	Full Name (Last, First, Middle Initial)												
C.	Friends Of Dan Kildee					Date of Disbursement							
	Mailing Address P.O. Box 248					09 15 2021							
	City Flint	State MI	Zip Code 48501			FEC Identification Number							
	Purpose of Disbursement					С соо499947							
	Candidate Name Kildoo Don Ron	011 Catego		Transaction ID : 11107427 Amount of Each Disbursement this Period									
	Kildee, Dan, , Rep.,Office Sought:xKHouseDisburser	ment For: 2	2022	Туре	,	2500.00							
	Senate x President	Primary Other (spec	General cify) ▼			Mama Itam							
_	State: MI District: 05		• •			Memo Item							
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IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			heck	only	one)								
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\setminus	NAME OF COMMITTEE (In Full)														
	Political Action Committee of the A	American	Association	of C	Drth	opa	aedic Surgeons-	-PAC of AAOS							
Α.	Full Name (Last, First, Middle Initial) Susan Wild For Congress						Date of Disbursement								
	Mailing Address 1636 N Cedar Crest Blvd #183						09 15 2021								
	-	State Zip Code PA 18104					FEC Identification N	umber							
	Allentown Purpose of Disbursement	FA	18104	_		_	C C00658567								
				0	11		Transaction ID :	11107428							
					egory	/		bursement this Period							
	Wild, Susan, Ellis, Rep., Office Sought: x House Disburse	ment For:		Ту	ype			2500.00							
	Senate	Primary	General												
	State: PA District: 07		Memo Item												
_	Full Name (Last, First, Middle Initial)														
В.	Pete Sessions For Congress						Date of Disburseme								
	Mailing Address 1512 Lake Air Dr Ste 117						09 / D D / Y Y Y Y 2021								
		State Zip Code					FEC Identification Number								
	Waco Purpose of Disbursement	ТХ	76710			_	C C00303305								
				0	011		Transaction ID :	11107/29							
	Candidate Name				gory	/	Amount of Each Disbursement this Perio								
	Sessions, Peter, Anderson, Rep., Office Sought: x House Disburse	ment For:	2022	Ту	/pe		2500.00								
	Senate	1	General												
	President	Other (spe	cify)				Memo Item								
	State: TX District: 17														
C.	Full Name (Last, First, Middle Initial) Bera For Congress						Date of Disbursemen	nt							
	Mailing Address PO Box 582496						09 / D D 15	/ Y Y Y Y 2021							
	-	State	Zip Code			+	FEC Identification N	umber							
	Elk Grove Purpose of Disbursement	CA	95758												
				0	11	11	C C00461061	44407420							
	Candidate Name			Cate	gory	/		bursement this Period							
	Bera, Ami, , Rep., MD	. =			Туре										
	Office Sought: K House Disburse Senate	ment For: 2	2022 X General				1000.00								
	President	Other (spe	•••				Memo Item								
_	State: CA District: 07														
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	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	7 one) 22 ★ 23 26 27 28b 28c 29 30b								
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<u> </u>	NAME OF COMMITTEE (In Full)												
	Political Action Committee of the A	Americar	Association	n of Orthop	aedic SurgeonsPAC of AAOS								
	Full Name (Last, First, Middle Initial) Re-Joyce PAC				Date of Disbursement								
	Mailing Address 824 S Milledge Avenue Suite 101				09 15 2021								
	City	State GA	Zip Code		FEC Identification Number								
	Athens Purpose of Disbursement Joyce LPAC	GA	30605	011	C C00691501								
	Candidate Name			Category/ Type	Transaction ID : 11107431 Amount of Each Disbursement this Period								
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		5000.00 Joyce LPAC								
	State: District:		-) / •		Memo Item								
В.	Full Name (Last, First, Middle Initial) Fitzpatrick for Congress Mailing Address PO Box 185				Date of Disbursement								
	City Langhorne Purpose of Disbursement	State PA	Zip Code 19047		FEC Identification Number								
-	Candidate Name Fitzpatrick, Michael, , ,			011 Category/ Type	C C00404236 Transaction ID : 11107432 Amount of Each Disbursement this Period								
		ement For: Primary Other (spe	General		500.00 Memo Item								
	State: PA District: 08 Full Name (Last, First, Middle Initial)												
	Friends Of Mike Lee Inc				Date of Disbursement								
	Mailing Address PO Box 1537				09 15 2021								
	City Salt Lake City	State UT	Zip Code 84110		FEC Identification Number								
	Purpose of Disbursement Candidate Name Lee, Mike, , Sen.,			011 Category/ Type	C C00473827 Transaction ID : 11107433 Amount of Each Disbursement this Period								
		Primary	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1000.00								
	State: UT District:	Other (spe	ony) ▼		Memo Item								
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SCHEDULE B (FEC Form 3X)			FO	RLIN	E NUMBER:	PAGE 496 OF 551								
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NAME OF COMMITTEE (In Full)														
Political Action Committee of the A	American	Association	of C	Orthc	paedic Surgeor	nsPAC of AAOS								
Full Name (Last, First, Middle Initial) A. Texans For Ronny Jackson					Date of Disbursement									
Mailing Address PO Box 53058														
City Amarillo	State TX	Zip Code 79159			FEC Identification	FEC Identification Number								
Purpose of Disbursement			01	11	C C0073053	1 ID : 11107436								
Candidate Name			Cate	gory/		Disbursement this Period								
Jackson, Ronny, Lynn, Rep.,			Ту	ре		1500.00								
Office Sought: X House Disburse Senate X President														
State: TX District: 13		(ilig)			Memo Item									
Full Name (Last, First, Middle Initial) B. Fitzpatrick for Congress					Date of Disburser	ment								
Mailing Address PO Box 185														
City Langhorne	State PA	Zip Code 19047			FEC Identification	Number								
Purpose of Disbursement			0'	11	C C0040423	6 ID : 11107438								
Candidate Name			Cate	gory/		Amount of Each Disbursement this Period								
Fitzpatrick, Michael, , ,			Ту	pe		2000.00								
	ment For: ; Primary	2022 General				2000.00								
State: PA District: 08	Other (spec				Memo Item	Memo Item								
Full Name (Last, First, Middle Initial)					Date of Disburser	ment								
Mailing Address PO Box 541					09 / D									
City Belleville	State KS	Zip Code 66935			FEC Identification	Number								
Purpose of Disbursement			01	1	C C0045831	5								
Candidate Name Moran, Jerry, , Sen.,			Cate	gory/		ID: 11107443 Disbursement this Period								
	ment For: 2	2022	,	-		1000.00								
X Senate President	Primary Other (spe	General cify) ▼			Memo Item									
State: KS District:														
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	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only									
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)		.										
	Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS								
Δ	Full Name (Last, First, Middle Initial)				Date of Disbursement								
	Jacobs For Congress												
	Mailing Address PO Box 387				09 15 2021								
	City	State NY	Zip Code		FEC Identification Number								
	Clarence Purpose of Disbursement		14031		C C00706788								
				011									
	Candidate Name			Category/	Transaction ID : 11107445 Amount of Each Disbursement this Period								
	Jacobs, Christopher, , ,			Туре									
		ment For: 2			1500.00								
	Senate x	Primary Other (spe	General										
	State: NY District: 27		city) V		Memo Item								
	Full Name (Last, First, Middle Initial)												
Β.	Emmer For Congress				Date of Disbursement								
	Mailing Address DO D												
	Mailing Address PO Box 998				09 24 2021								
	City	State	Zip Code		FEC Identification Number								
	Anoka Purpose of Disbursement	MN	55303		C C005 45740								
				011	C C00545749								
	Candidate Name			Category/	Transaction ID : 11113292 Amount of Each Disbursement this Period								
	Emmer, Tom, Earl, Rep., Jr.			Туре									
		ment For:			2500.00								
	Senate x	-	General		8								
	State: MN District: 06	Other (spec	ury)		Memo Item								
_	Full Name (Last, First, Middle Initial)												
C.	Drew Ferguson For Congress Inc.				Date of Disbursement								
	Mailing Address PO Box 71067				09 24 2021								
	-	State	Zip Code		FEC Identification Number								
	Newnan Purpose of Disbursement	GA	30271		C 000007000								
				011	C C00607838								
	Candidate Name			Category/	Transaction ID : 11113293 Amount of Each Disbursement this Period								
	Ferguson, A. Drew, , Rep.,			Туре									
		ment For: 2			2500.00								
	Senate x	Primary Other (spe	General										
	State: GA District: 03	Culei (spe	Giry) ▼		Memo Item								
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SCHEDULE B (FEC Form 3X)					INE N	IUMBER:		PAGE 498 OF 551						
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NAME OF COMMITTEE (In Full)	_	_	_							_				
Political Action Committee of the	Americar	n Association	of C	Drth	iopa	edic S	Surg	eor	nsF	AC	of AAOS			
Full Name (Last, First, Middle Initial) A. Carol For Congress						Date of Disbursement								
Mailing Address 228 S. Washington Street Suite 115														
City	State	Zip Code				FEC Identification Number								
Alexandria Purpose of Disbursement	VA	22314				0	0.05	565			-			
			01	11			C006	-	1.00					
Candidate Name			Cate		/				I D : 11 Disbur		5 It this Period			
Miller, Carol, Devine, Rep.,				pe	′	Anouli	. 01 L	aon	Jobul	Joinel				
Office Sought: 🗶 House Disbur	sement For:	2022				L					2500.00			
	× Primary	General					,		,					
State: WV District: 03	Other (spe	ecify) 🔻				Me	mo Ite	em						
Full Name (Last, First, Middle Initial)														
B. Kurt Schrader For Congress						Date of	Disb	ursei	nent					
Mailing Address PO Box 3314							/	D 24			2021			
City	State	Zip Code				FEC Identification Number								
Oregon City	OR	97045				C C00446906								
Purpose of Disbursement			0.	11	11									
Candidate Name					,	Transaction ID : 11113296 Amount of Each Disbursement this Period								
Schrader, Kurt, , Rep.,			Cate Ty		/									
	sement For:	2022				1500.00								
	x Primary	General												
State: OR District: 05	Other (spe	ecify)				Memo Item								
Full Name (Last, First, Middle Initial)						Date of	Dich		ment					
C. Kurt Schrader For Congress							, ,	D			YYYY			
Mailing Address PO Box 3314						09		24			2021			
City	State	Zip Code				FEC Id	entific	ation	Num	ber				
Oregon City Purpose of Disbursement	OR	97045				\mathbf{C}	0004	4000	^	-	-			
			01	11		С	C004	-	- 1	44000				
Candidate Name		Cate	aorv	/	Transaction ID : 11113297 Amount of Each Disbursement this Period									
Schrader, Kurt, , Rep.,				Type										
	sement For:					1000.00								
Senate	Primary	General												
State: OR District: 05	Other (spe	ecity) 🔻				Memo Item								
State: OR District: 05						_	_		_	_				
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	for commercial purposes, other than using the na										
\setminus	NAME OF COMMITTEE (In Full)										
	Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS						
^	Full Name (Last, First, Middle Initial)				Date of Disbursement						
А.	Wenstrup For Congress										
	Mailing Address PO Box 9551				09 24 2021						
	City	State	Zip Code		FEC Identification Number						
	Cincinnati Purpose of Disbursement	OH	45209		C C00407848						
				011	C C00497818						
	Candidate Name			Category/	Transaction ID : 11113298 Amount of Each Disbursement this Period						
	Wenstrup, Brad, , Rep.,			Туре							
		ment For: 2			2500.00						
	Senate x President	Primary Other (spe	cify)								
	State: OH District: 02		oliy) v		Memo Item						
_	Full Name (Last, First, Middle Initial)										
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C.	Dr Kim Schrier For Congress				Date of Disbursement						
	Mailing Address PO Box 2728				09 24 2021						
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A. Mike Johnson For Louisiana											
Mailing Address 2900 Clearview Pkwy Suite 206		09 24 2021									
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B. Garret Graves For Congress				Date of Disbursement							
Mailing Address PO Box 64845											
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C. Lori Trahan For Congress Commi	ttee			Date of Disbursement							
Mailing Address PO Box 1161				09 24 2021							
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Α.	Full Name (Last, First, Middle Initial) Fitzpatrick for Congress						Date of Disbursement		
	Mailing Address PO Box 185						09 24 2021		
	City	State Zip Code					FEC Identification Number		
	Langhorne	PA	19047						
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	Candidate Name			Category/ Type		,	Transaction ID : 11113371 Amount of Each Disbursement this Period		
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в.	Armstrong For Congress					Date of Disbursement			
	Mailing Address 1515 Burnt Boat Drive Box 112						09 / 24 2021		
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	Bismarck ND 58503								
	Purpose of Disbursement 011					11	C C00670547 Transaction ID : 11113373		
	Candidate Name								
	Armstrong, Kelly, , Rep.,				egory vpe	′	Amount of Each Disbursement this Period		
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C.	Michael Burgess For Congress						Date of Disbursement		
	Mailing Address PO Box 2334						09 24 <u>Y Y Y Y Y</u> 2021		
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	Denton TX 76202								
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	Full Name (Last, First, Middle Initial) Schneider For Congress Mailing Address PO Box 1318					Date of Disbursement				
	City Deerfield	State IL	Zip Code 60015		FEC Identification Number					
	Purpose of Disbursement	C C00495952 Transaction ID : 11113378								
	Candidate Name Schneider, Bradley, , Rep., Office Sought: x House Disburse	ment For: 2	2022	Categ Typ		Amount of Each Disbursement this Period 2500.00				
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В.	Full Name (Last, First, Middle Initial)		Date of Disbursement							
	Mailing Address PO Box 15320		09 24 2021							
	City Washington Purpose of Disbursement	1	FEC Identification Number C C00498873 Transaction ID : 11113380							
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	Full Name (Last, First, Middle Initial) Bennet For Colorado		Date of Disbursement							
	Mailing Address PO Box 3078					09 24 2021				
	City Denver Purpose of Disbursement	State CO	Zip Code 80201			FEC Identification Number				
	Candidate Name Bennet, Michael, F., Sen.,	01 Categ Typ	gory/	C C00458398 Transaction ID : 11113381 Amount of Each Disbursement this Period						
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NAME OF COMMITTEE (In Full)	\ m o r! o o -	Apposition	at 0		andia Curranana DAO of AAOO					
Political Action Committee of the	American	ASSOCIATION	or O	nnop	aeuic SurgeonsPAC OT AAUS					
Full Name (Last, First, Middle Initial) A. Friends Of McCormick	Date of Disbursement									
					M M / D D / Y Y Y Y					
Mailing Address PO Box 134		09 24 2021								
City	State GA	Zip Code			FEC Identification Number					
Suwanee Purpose of Disbursement	GA	30024			0 000700747					
			011		C C00706747					
Candidate Name			Categ	orv/	Transaction ID : 11113383 Amount of Each Disbursement this Period					
McCormick, Richard, , ,			Тур							
	ement For:				2500.00					
Senate x President	Primary Other (spe	General			8					
State: GA District: 07	Other (spe	City) 🔻			Memo Item					
Full Name (Last, First, Middle Initial)										
B. Texans For Jodey Arrington					Date of Disbursement					
		09 24 2021								
Mailing Address PO Box 6687										
City	State TX	Zip Code 79493			FEC Identification Number					
Lubbock Purpose of Disbursement			0 000500057							
			011	011	C C00588657					
Candidate Name			Categ	orv/	Transaction ID : 11113384 Amount of Each Disbursement this Period					
Arrington, Jodey, Cook, Rep.,			Тур							
	ement For:									
President X	Primary Other (and	General								
State: TX District: 19	Other (spe	city)			Memo Item					
Full Name (Last, First, Middle Initial)										
C. Doing Right - Results, Action, Uni	ty, Leade	ership PAC			Date of Disbursement					
Mailing Address PO Box 3433					09 / D D / Y Y Y Y 24 2021					
City	State	Zip Code			FEC Identification Number					
Palm Desert	CA	92261								
Purpose of Disbursement Ruiz LPAC			014		C C00569871					
Candidate Name	011		Transaction ID : 11113385							
	Categ Typ		Amount of Each Disbursement this Period							
Office Sought: House Disburse	Office Sought: House Disbursement For:									
Senate					Ruiz LPAC					
State: District:	Other (spe	сіту) 🔻			Memo Item					
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ITEMIZED DISBURSEMENTS			arate schedule(s) category of the		heck	only	one)					
			Summary Page			21b 28a	22 X 23 26 27 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na				any	persor	n for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)											
\square	Political Action Committee of the A	American	Association	n of (Orth	nopa	edic SurgeonsPAC of AAOS					
Α.	Full Name (Last, First, Middle Initial) Boozman For Arkansas						Date of Disbursement					
	Mailing Address PO Box 671						FEC Identification Number					
	City	State	Zip Code									
	Rogers	AR	72757									
	Purpose of Disbursement			0)11	11	C C00476317					
	Candidate Name			Cate	egory		Transaction ID : 11113386 Amount of Each Disbursement this Period					
	Boozman, John, , Sen.,				ype							
		ment For:					1000.00					
	X Senate President	Primary Other (spe	ify) ▼				Memo Item					
	State: AR District:											
B.	Full Name (Last, First, Middle Initial) Giddy Up PAC		Date of Disbursement									
	Mailing Address 3858 Walnut Street			09 / 24 / Y Y Y Y 09 24								
	City	State	Zip Code				FEC Identification Number					
	Denver											
	Purpose of Disbursement Hickenlooper LPAC		0	011		C C00687582						
	Candidate Name			Category/			Transaction ID : 11113388 Amount of Each Disbursement this Period					
	Office Cought Llouge Dishurse				Туре		2500.00					
	Office Sought: House Disburse Senate	ment For: Primary										
	President	Other (spe	cify) General				Hickenlooper LPAC					
	State: District:	1					Memo Item					
C.	Full Name (Last, First, Middle Initial) Maggie For Nh						Date of Disbursement					
-							M M / D D / Y Y Y Y					
	Mailing Address PO Box 298						09 24 2021					
	City	State	Zip Code				FEC Identification Number					
	Concord Purpose of Disbursement	NH	03302			_	C C00588772					
				0	011		Transaction ID : 11113949					
	Candidate Name		Cate	egory	/	Amount of Each Disbursement this Period						
	Hassan, Margaret, Wood, Sen.,			ype		4500.00						
	La Sonato	ement For: ; Primary	2022 General				1500.00					
	x Senate President	Other (spe										
_	State: NH District:		<i></i>				Memo Item					
Γ							5000.00					
s	UBTOTAL of Disbursements This Page (optional).						5000.00					
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SCHEDULE B (FEC Form 3X)	PAGE 508 OF 551					
ITEMIZED DISBURSEMENTS Use separate schedule(s) (check only one)	y one)					
Detailed Summary Page 28a 28b	X 23 26 27 28c 29 30b					
Any information copied from such Reports and Statements may not be sold or used by any person for the p						
or for commercial purposes, other than using the name and address of any political committee to solicit cont						
Political Action Committee of the American Association of Orthopaedic Su	urgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial)						
A. Maggie For Nh Date of	Date of Disbursement					
	2.					
City State Zip Code FEC Ide	ntification Number					
Concord NH 03302	00588772					
011	saction ID : 11113950					
Candidate Name Category/ Amount	of Each Disbursement this Period					
Hassan, Margaret, Wood, Sen.,	1000.00					
Office Sought: House Disbursement For: 2022 x Senate Primary x General	1000.00					
President Other (specify)	no Item					
State: NH District:						
Full Name (Last, First, Middle Initial)						
Mailing Address PO Box 298 09	24 2021					
City State Zip Code FEC Ide	ntification Number					
Durness of Dishursement	C C00588772					
011 Tra	saction ID : 11114047					
Candidate Name Hassan, Margaret, Wood, Sen., Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disbursement For: 2022	1000.00					
X Senate Primary X General						
President Other (specify)	no Item					
State: NH District:						
	Disbursement					
M _ M						
Mailing Address 370 East South Temple Ste 580	01 2021					
City State Zip Code FEC. Ide	ntification Number					
Salt Lake City UT 84111						
011	00738872					
Candidate Name Category/ Amount	nsaction ID: 11117972 of Each Disbursement this Period					
Moore, Blake, David, Rep., Type	· · · · · ·					
	4500.00					
Office Sought: House Disbursement For: 2022	1500.00					
Senate Primary General						
Senate Primary General	1500.00 no Item					
Senate President State: UT District: 01	no Item					
Senate x Primary General President Other (specify) ▼						

S	CHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER: PAGE 509 OF 551						
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(che	ck only ☐21b	y one) 22 🗶 23 26 27						
		Detailed	Summary Page		28a	28b 28c 29 30b						
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\mathbb{N}	NAME OF COMMITTEE (In Full)											
	Political Action Committee of the A	American	Association	of Or	rthopa	aedic SurgeonsPAC of AAOS						
Α.	Full Name (Last, First, Middle Initial) Friends Of Dave Joyce	Date of Disbursement										
	Mailing Address 9856 Archer Ln					10 01 2021						
	City Dublin	State OH	Zip Code 43017			FEC Identification Number						
	Purpose of Disbursement			011		C C00527457						
	Candidate Name			Catego	orv/	Transaction ID : 11117973 Amount of Each Disbursement this Period						
	Joyce, Dave, , Rep.,			Туре								
	Senate 🗶	ment For: 2 Primary	2022 General			1500.00						
	State: OH District: 14	Other (spec	cify) 🔻			Memo Item						
в.	Full Name (Last, First, Middle Initial) Friends Of Dusty Johnson		Date of Disbursement									
			M M / D D / Y Y Y Y									
	Mailing Address PO Box 278		10 01 2021									
	City Mitchell	State SD		FEC Identification Number								
	Purpose of Disbursement	-	C C00628917									
	Candidate Name			011		Transaction ID : 11117974						
	Johnson, Dustin, , Rep.,			Catego Type		Amount of Each Disbursement this Period						
	·	ment For:	2022	Type		1500.00						
		Primary	General									
	State: SD District: 00	Other (spec	cify)			Memo Item						
C.	Full Name (Last, First, Middle Initial) Garbarino For Congress					Date of Disbursement						
	Mailing Address PO Box 101					10 01 2021						
	City Bayport	State NY	Zip Code 11705			FEC Identification Number						
	Purpose of Disbursement			_	_	C C00729954						
	Candidate Name			011	_	Transaction ID : 11117975						
	Garbarino, Andrew, R., Rep.,	ory/	Amount of Each Disbursement this Period									
	Senate x	Senate Primary Genera										
	State: NY District: 02	Other (spec	city) 🔻			Memo Item						
Γ						EE00.00						
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SCHEDULE B (FEC Form 3X)			FOR LIN	E NUMBER: PAGE 510 OF 551				
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		Summary Page	28					
Any information copied from such Reports and State or for commercial purposes, other than using the ne								
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$\left \right\rangle$ Political Action Committee of the i	Americar	Association	of Ortho	ppaedic SurgeonsPAC of AAOS				
Full Name (Last, First, Middle Initial) A. Jaime For Congress	Date of Disbursement							
Mailing Address PO Box 1614	10 / D D / Y Y Y Y 10 01 2021							
City Ridgefield	State WA	Zip Code 98642		FEC Identification Number				
Purpose of Disbursement	с							
	011	C C00472704 Transaction ID : 11117977						
Candidate Name			Category/	Amount of Each Disbursement this Period				
Herrera-Beutler, Jaime, L., Rep., Office Sought: Y House Disburse	ement For:	2022	Туре	1500.00				
Office Sought: X House Disburse		General						
State: WA District: 03	Other (spe	ecify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)								
B. Nevadans For Steven Horsford	Nevadans For Steven Horsford							
Mailing Address PO Box 336664	10 / D D / Y Y Y Y Y 2021							
City		FEC Identification Number						
North Las Vegas Purpose of Disbursement	0 00000000							
	011	C C00668228						
Candidate Name			Category/	Transaction ID : 11117978 Amount of Each Disbursement this Period 1500.00				
Horsford, Steven, Alexander, Rep			Туре					
••	ement For:							
President X	Primary Other (spe	General						
State: NV District: 04		(only)		Memo Item				
Full Name (Last, First, Middle Initial)				Date of Disbursement				
C. Peter Meijer For Congress								
Mailing Address P.O. Box 68554								
City	State	Zip Code		FEC Identification Number				
Grand Rapids Purpose of Disbursement	MI	49516		C C00710962				
			011					
Candidate Name	Transaction ID : 11117979 Amount of Each Disbursement this Period							
	Meijer, Peter, James, Rep.,							
Office Sought: X House Disburse		1500.00						
President	Primary Other (spe	General						
State: MI District: 03		(Ciry) V		Memo Item				
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SCHEDULE B (FEC Form 3X)				FOR LINE I				
	EMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b			
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\backslash	NAME OF COMMITTEE (In Full)							
\sum	Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS			
Α.	Full Name (Last, First, Middle Initial) Katko For Congress				Date of Disbursement			
	Mailing Address 228 S Washington St Ste 115	10 / D D / Y Y Y Y 2021						
	City	State	Zip Code		FEC Identification Number			
	Alexandria Purpose of Disbursement	VA	22314					
				011	C C00556365			
	Candidate Name			Category/	Transaction ID : 11117980 Amount of Each Disbursement this Period			
	Katko, John, , Rep.,			Type				
	Office Sought: X House Disburse	ement For: 2	2022 General		1500.00			
	President	Other (spe			Memo Item			
В.	Full Name (Last, First, Middle Initial) Elaine For Congress		Date of Disbursement					
	Mailing Address PO Box 66191		10 01 2021					
	City		FEC Identification Number					
	Virginia Beach Purpose of Disbursement		C C00664375					
		011						
	Candidate Name	Category/	Transaction ID : 11117981 Amount of Each Disbursement this Period					
	Luria, Elaine, G., Rep.,			Туре				
		ment For:			1500.00			
	President	-	General		-			
	State: VA District: 02	Other (spe	city)		Memo Item			
с.	Full Name (Last, First, Middle Initial) Salazar For Congress				Date of Disbursement			
0.	Salazar Für Congress							
	Mailing Address 47 Flintlock Drive P.O. Box 677		10 01 <u>2021</u>					
	City Shirley	State NY	Zip Code 11967		FEC Identification Number			
	Purpose of Disbursement				C C00714261			
				011	Transaction ID : 11117982			
	Candidate Name	Category/	Amount of Each Disbursement this Period					
	Salazar, Maria, Elvira, Rep.,	mont For		Туре	1500.00			
		Office Sought: X House Disbursement For: 2022 Senate Y Primary General						
	President X	Other (spe						
	State: FL District: 27		-, -		Memo Item			
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SCHEDULE B (FEC Form 3X)			FO		NUMBER: PAGE 512 OF 551			
ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page		21b 28a				
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NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican	Association	of C	Orthop	aedic SurgeonsPAC of AAOS			
Full Name (Last, First, Middle Initial) A. Meuser For Congress Mailing Address PO Box 183				Date of Disbursement				
3	State	Zip Code			FEC Identification Number			
Hudson Purpose of Disbursement	Hudson WI 54016 Purpose of Disbursement 011							
Candidate Name			Cate		Transaction ID: 11117983 Amount of Each Disbursement this Period			
Meuser, Daniel, , Rep., Office Sought:	ment For: 2 Primary Other (spec	General	Ту	pe	1500.00 Memo Item			
Full Name (Last, First, Middle Initial) B. Mike Gallagher For Wisconsin Mailing Address PO Box 1027	ke Gallagher For Wisconsin							
City Green Bay Purpose of Disbursement Candidate Name Gallagher, Michael, John, Rep.,	11 gory/ pe	FEC Identification Number C C00610212 Transaction ID : 11117984 Amount of Each Disbursement this Period						
Office Sought: X House Disburser	ment For: 2 Primary Other (spec	General		<u>, pc</u>	1500.00			
Full Name (Last, First, Middle Initial) C. Tom O'Halleran For Congress								
Mailing Address PO Box 63992					10 01 Y Y Y Y 2021			
Phoenix Purpose of Disbursement Candidate Name	Phoenix AZ 85082 Purpose of Disbursement							
O'Halleran, Tom, , Rep., Office Sought: Senate President State: AZ District: 01	ment For: 2 Primary Other (spec	General	Cate Ty		1500.00 Memo Item			
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	for commercial purposes, other than using the na												
\backslash	NAME OF COMMITTEE (In Full)			-									
\angle	Political Action Committee of the A	American	Association	of C	Drth	opa	edic Sur	geor	ารPA		of AAOS		
Α.	Full Name (Last, First, Middle Initial) Darren Soto For Congress						Date of Dis	sburse	ment				
	Darren Solo i or Congress		M M / D D / Y Y Y Y										
	Mailing Address PO Box 421349						10 01 2021						
	City	State	Zip Code				FEC Identif	ication	Numbe	r			
	Kissimmee Purpose of Disbursement	FL	34742					50407			-		
				01	11	11	•)58107	- 1	1700			
	Candidate Name			Cate	gory/				ID : 111 ° Disburse		6 t this Period		
	Soto, Darren, Michael, Rep.,				pe					-			
		ment For: 2						7			1500.00		
	Senate x President	Primary Other (spec	General										
	State: FL District: 09		, (j)				Memo	ltem					
	Full Name (Last, First, Middle Initial)												
В.	Spanberger For Congress						Date of Dis	burse	ment				
	Mailing Address DO Day 2424		10 ^M	D 0'			021						
	Mailing Address PO Box 3121												
	City State Zip Code VA 23058						FEC Identification Number						
	Glen Allen Purpose of Disbursement		C C00649913										
		11	0										
	Candidate Name			Cate	gory/		Transaction ID : 11117987 Amount of Each Disbursement this Period						
	Spanberger, Abigail, A., Rep.,			Ту									
		1	2022					7			1500.00		
	Senate x	Primary Other (spec	General										
	State: VA District: 07		- 31				Memo	ltem					
_	Full Name (Last, First, Middle Initial)												
C.	Pete Stauber For Congress						Date of Dis	sburse	ment				
	Mailing Address 23 W Central Entrance					-	м м / 10	D 01			021		
	Pmb #333	-	1					_					
	City Duluth	State MN	Zip Code 55811				FEC Identif	ication	Numbe	r			
	Purpose of Disbursement		33011		_		C coo	065069)7		_		
				01	11				 ID : 111	1798	8		
	Candidate Name Category/										t this Period		
	Stauber, Pete, , Rep., Ty Office Sought: Image: Senate Image: Senate Image: Senate Image: Senate<				pe						1500.00		
								,	-9-	-			
	President Other (specify)						Memo	ltem					
_	State: MN District: 08	-											
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SCHEDULE B (FEC Form 3X)			FOR LINE I	PAGE 514 OF 551				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one)				
		Summary Page	21b 28a	22 ★ 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na			d by any perso	n for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)								
Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS				
Full Name (Last, First, Middle Initial) A. Steil For Wisconsin, Inc.	Date of Disbursement							
Mailing Address 1818 Milton Ave # 1448								
City Janesville	State WI	Zip Code 53545		FEC Identification Number				
Purpose of Disbursement		00040		С С00677286				
Candidate Name			011	Transaction ID : 11117989				
Steil, Bryan, George, Rep.,			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: X House Disburse	ment For: 2 Primary	2022 General		1500.00				
State: WI District: 01	Other (spe	cify) 🔻		Memo Item				
Full Name (Last, First, Middle Initial)								
B. Suozzi For Congress	Suozzi For Congress							
Mailing Address PO Box 669	10 01 Y Y Y Y Y 2021							
City Glen Cove	State NY	Zip Code 11542		FEC Identification Number				
Purpose of Disbursement	011	С С00607200						
Candidate Name	e Name			Transaction ID: 11117990 Amount of Each Disbursement this Period				
Suozzi, Thomas, R., Rep.,			Category/ Type					
Office Sought: 🗶 House Disburse	ment For: ; Primary	·		1500.00				
President	Other (spe	••		Memo Item				
State: NY District: 03	1							
Full Name (Last, First, Middle Initial) C. Susie Lee For Congress	Full Name (Last, First, Middle Initial) Susie Lee For Congress							
Mailing Address 5130 S Fort Apache Rd Ste 215-382								
City Las Vegas	State NV	Zip Code 89148		FEC Identification Number				
Purpose of Disbursement		00140		C C00655613				
Candidate Name	Candidate Name							
Lee, Susie, , Rep.,	Category/ Type	Amount of Each Disbursement this Period						
	Office Sought: House Disbursement For: 2022							
State: NIX District: as	Primary Other (spe	General cify) ▼		Memo Item				
State: NV District: 03								
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SCHEDULE B (FEC Form 3X)					OR L	INE N	NUMBER: PAGE 515 OF 551					
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)		_		_							
\angle	Political Action Committee of the A	American	Associatior	n of (Orth	hopa	aedic Surgeo	onsF	PAC	of AAOS		
	Full Name (Last, First, Middle Initial) Valadao For Congress						Date of Disburg					
	Mailing Address 5132 North Palm Avenue #227						10 01 Y Y Y Y Y 2021					
	City	State	Zip Code				FEC Identificati	on Numl	her			
	Fresno	CA	93704							_		
	Purpose of Disbursement					- L	C C00499	392				
	Candidate Name			0)11	_	Transactio					
	Valadao, David, , ,				egory	y/	Amount of Eac	n Disbur	seme	nt this Period		
		ement For: 2	2022	1	ype					1500.00		
	Senate	Primary	General						<u> </u>	- 48-		
	State: CA District: 21	Other (spe					Memo Item					
	Full Name (Last, First, Middle Initial)											
В.	Van Taylor Campaign		Date of Disburs	sement								
				D /		Y Y Y						
	Mailing Address 1900 Preston Road #267 - Pmb 2		10 01 2021									
	City State Zip Code Plano TX 75093						FEC Identificati	on Numl	ber			
	Plano Purpose of Disbursement											
		C	011		C C00653	_						
	Candidate Name			Cate	egory		Transaction ID : 11117995 Amount of Each Disbursement this Period					
	Taylor, Van, , Rep.,				ype	,,						
	Office Sought: 🗶 House Disburse	ment For:	2022				1500.00					
	Senate ×		General				,	,				
	State: TX District: 03	Other (spe	cify)				Memo Item					
	Full Name (Last, First, Middle Initial)						Date of Disbursement					
0.	Chris Pappas For Congress								V	Y Y Y		
	Mailing Address PO Box 313							01		2021		
	City	State	Zip Code				FEC Identificati	on Numl	ber			
	Manchester Purpose of Disbursement	NH	03105					_		-		
	Tupose of Disbursement			0)11		C C00660		_			
	Candidate Name		-		Transaction ID : 11117996 Amount of Each Disbursement this Period							
	Pappas, Chris, , Rep.,		egory ype	y/	Amount of Lac	i Disbui	Seme					
		ement For: 2	2022		-					1500.00		
	Senate 🗶	Senate Primary Genera										
	State: NUL District: of					Memo Item						
_	State: NH District: 01											
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	NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican	Association	of Or	thopa	aedic SurgeonsPAC of AAOS				
Α.	Full Name (Last, First, Middle Initial) Victoria Spartz For Congress					Date of Disbursement				
	Mailing Address PO Box 505	<u></u>		10 11 2021						
	City Noblesville Purpose of Disbursement	State IN	Zip Code 46061			FEC Identification Number				
	Candidate Name			011 Catego	orv/	C C00737767 Transaction ID : 11122404 Amount of Each Disbursement this Period				
	Spartz, Victoria, Kulheyko, Rep., Office Sought: X House Disbursel Senate X	ment For: 2 Primary	2022	Туре		3500.00				
	State: IN District: 05	Other (spec	cify) ▼			Memo Item				
в.	Full Name (Last, First, Middle Initial) Case For Congress Mailing Address PO Box 2941		Date of Disbursement							
	City Honolulu		FEC Identification Number							
	Purpose of Disbursement Candidate Name	011 Catego		C C00680918 Transaction ID : 11122858 Amount of Each Disbursement this Period						
	Senate X	Primary	2022 General	Туре		1000.00				
	State: HI District: 01	Other (spec	cify)			Memo Item				
C.	Full Name (Last, First, Middle Initial) Cindy Axne For Congress					Date of Disbursement				
	Mailing Address PO Box 65551					10 11 2021				
	City West Des Moines Purpose of Disbursement	State IA	Zip Code 50265			FEC Identification Number				
	Candidate Name Axne, Cindy, , Rep.,	ory/	C C00646844 Transaction ID : 11122859 Amount of Each Disbursement this Period							
	Office Sought: Senate President State: IA District: 03	ment For: 2 Primary Other (spec	General			2500.00 Memo Item				
s	UBTOTAL of Disbursements This Page (optional)					7000.00				
⊢	OTAL This Period (last page this line number only)									

S	CHEDULE B (FEC Form 3X)		FC	DR L	INE N	NUMBER: PAGE 517 OF 551						
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(cł		only o 21b	y one)					27
			Summary Page			21D 28a	22 	× 23		26		30b
	y information copied from such Reports and State for commercial purposes, other than using the na				any j	persor	for the	purpos	e o	f soliciti		ontributions
\setminus	NAME OF COMMITTEE (In Full)											
\square	Political Action Committee of the A	American	Association	of C	Drth	iopa	edic S	urge	or	nsPA	١C	of AAOS
Α.	Full Name (Last, First, Middle Initial) • Vern Buchanan For Congress							Date of Disbursement				
	Mailing Address P. O. Box 48928							/ [11			021
	City	State	Zip Code				FEC Ide	entifica	tion	Numbe	er	
	Sarasota	FL	34230				_					-
	Purpose of Disbursement			0	11	11	U U	C0041:	1.			
	Candidate Name					,				ID : 111		0 t this Period
	Buchanan, Vern, , Rep.,				egory /pe	/	Amount			Disbuise	men	t this renou
	Office Sought: X House Disburse	ement For: 2 Primary	2022 X General				L	-		-		1000.00
	State: FL District: 16	Other (spe					Mer	mo Iter	n			
_	Full Name (Last, First, Middle Initial)											
Β.	Emmer For Congress						Date of	Disbu		_	× • •	YYY
	Mailing Address PO Box 998		10		1			021				
	City	State MN	Zip Code 55303				FEC Ide	entifica	tion	Numbe	r	
	Anoka Purpose of Disbursement		С	C0054	574	9						
	Candidate Name				11		Transaction ID : 11122862 Amount of Each Disbursement this Perio					
	Emmer, Tom, Earl, Rep., Jr.				egory /pe	/	Amount	of Ea	ch I	Disburse	emen	t this Period
		ment For:	2022		/pc	_						1000.00
	Senate x	Primary	General					-9-				40
	State: MN District: 06	Other (spec	cify)				Mer	mo Iter	n			
С.	Full Name (Last, First, Middle Initial) Friends Of Bill Posey						Date of	Disbu	rsei	ment		
							MM	/ [)	D /	Y Y	Y Y
	Mailing Address P. O. Box 411486						10	I L	11		2	021
	City Melbourne	State FL	Zip Code 32941				FEC Ide	entifica	tion	Numbe	r	
	Purpose of Disbursement		32341	_	_	-	С	C0044	496	8		-
	Candidate Name		Tra	nsacti	on	ID : 111						
	Posey, Bill, , , Category/							or Ea	JU	Dispurse	men	t this Period
		ment For: 2	2022									1000.00
	Senate x	Primary	General									
	State: FL District: 04	Other (spe	cify) 🔻				Mer	mo Iter	n			
	orato. FL District. 04							_				
s	UBTOTAL of Disbursements This Page (optional).									7		3000.00
т	OTAL This Period (last page this line number only	/)						,		,		

SCHEDULE B (FEC Form 3X)			FOR LI	NE NUMBER: PAGE 518 OF 551				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check	only one) 1b 22 🗶 23 26 27				
	Detailed	Summary 1 age	2	8a 28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full)								
Political Action Committee of the A	merican	Association	of Orth	opaedic SurgeonsPAC of AAOS				
Full Name (Last, First, Middle Initial)								
A. Scalise For Congress				Date of Disbursement				
Mailing Address PO Box 23219				10 11 2021				
,	State	Zip Code		FEC Identification Number				
Jefferson	LA	70183						
Purpose of Disbursement			011	С С00394957				
Candidate Name				Transaction ID : 11122864				
Scalise, Steve, , Rep.,			Category/	Amount of Each Disbursement this Period				
	ment For: 2	0022	Туре	1000.00				
Senate	Primary	General						
President	Other (spec							
State: LA District: 01		<i>, , ,</i>		Memo Item				
Full Name (Last, First, Middle Initial)								
B. Jimmy Gomez For Congress				Date of Disbursement				
				M M / D D / Y Y Y Y				
Mailing Address 777 S Figueroa St Suite 4050								
City	State	Zip Code		FEC Identification Number				
Los Angeles								
Purpose of Disbursement				C C00629659				
Candidate Name			011	Transaction ID : 11122865				
_			Category/	Amount of Each Disbursement this Period				
Gomez, Jimmy, , Rep., Office Sought:	ment For: 2	0000	Туре	1000.00				
	Primary	General						
President	Other (spec			-				
State: CA District: 34		5		Memo Item				
Full Name (Last, First, Middle Initial)								
C. Dr. Raul Ruiz For Congress				Date of Disbursement				
				M M / D D / Y Y Y Y				
Mailing Address PO Box 3433				10 11 2021				
City	State	Zip Code						
Palm Desert	CA	92261		FEC Identification Number				
Purpose of Disbursement				C C00502575				
				Transaction ID : 11122866				
Candidate Name			Category/ Type	Amount of Each Disbursement this Period				
	iiz, Raul, , Rep., MD e Sought: x House Disbursement For: 2022			2500.00				
				2500.00				
President	Primary Other (spec	General						
State: CA District: 36	Other (spec	siry) 🔻		Memo Item				
SUBTOTAL of Disbursements This Page (optional)				4500.00				
TOTAL This Period (last page this line number only	·)							

SC	CHEDULE B (FEC Form 3X)					JF I	NUMBER: PAGE 519 OF 551								
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			heck (only	y one)								
			Summary Page			1b Ba		22 28b	×	23 28c	+	2	L		27 30b
	y information copied from such Reports and State for commercial purposes, other than using the na				any p	ersc	n fo	r the		oose		solic	iting (cont	ributions
	NAME OF COMMITTEE (In Full)														
	Political Action Committee of the A	American	Association	n of C	Orth	opa	aed	lic S	Sur	geo	n	sF	PAC	of	AAOS
Α.	Full Name (Last, First, Middle Initial) Judy Chu For Congress							Date of Disbursement							
	Mailing Address 16633 Ventura Blvd # 1008						Ľ	10	/	D	11			202	1
	City	State	Zip Code				FE	EC Id	entif	icatio	on	Num	ber		
	Encino Purpose of Disbursement	CA	91436				C	`	000	4504			-	-	
				0	11	Н	C	-)4581		1	4000	07	
	Candidate Name			Cate	egory/		Ar						1 228 seme		his Period
	Chu, Judy, , Rep.,				/pe		17								
	Senate 🗶		General				5			7			<u></u>	25	00.00
	State: CA District: 27	Other (spe	city) 🔻					Me	emo	Item					
_	Full Name (Last, First, Middle Initial)														
Β.	Ann Wagner For Congress					Da	ate o	f Dis	sburs	en	nent				
	Mailing Address PO Box 50								/	D	11			y 202	21
	City Ballwin	State MO	Zip Code 63022				FE	EC Id	entif	icatio	on	Num	ber		
	Purpose of Disbursement	0		C C00495846 Transaction ID : 11122868											
	Candidate Name			Cate	egory/		Ar								his Period
	Wagner, Ann, , Rep.,			Ту	/pe					-			-		
		ment For:								,				10	00.00
	President	Primary Other (spe	cify) General												
	State: MO District: 02							Me	emo	Item					
C.	Full Name (Last, First, Middle Initial) Fitzpatrick for Congress						Da	ate o	f Dis	sburs	en	nent			
						_	ľ	и м 10	/	D	20	/		y 202	Y Y
	Mailing Address PO Box 185	-						10			-0	_	<u> </u>	202	
	City Langhorne	State PA	Zip Code 19047				FE	EC Id	entif	icatio	on	Num	ber		
	Purpose of Disbursement			-			C)	C00	04042	236	6			
	Void - Fitzpatrick for Congress			0	11			Tra					1399		_
	Candidate Name Fitzpatrick, Michael, , ,						Ar	noun	t of	Each	۱C	isbu	seme	nt t	his Period
	Office Occurbation D' I			(1	/pe	_								- 5	00.00
	Senate	Primary	🗙 General							7	V	oid -	Fitzpa	atric	k for Congre
	President	Other (spe	cify) 🔻					Me	emo	Item					
_	State: PA District: 08						-								
s	UBTOTAL of Disbursements This Page (optional).)					,			,	30	000.00
Т	OTAL This Period (last page this line number only	/))					,			,		

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 520 OF 551				
_	EMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na								
	NAME OF COMMITTEE (In Full)								
	Political Action Committee of the A	Americar	Association	of Orthop	aedic SurgeonsPAC of AAOS				
Α.	Full Name (Last, First, Middle Initial) Fitzpatrick for Congress				Date of Disbursement				
	Mailing Address PO Box 185	10 20 2021							
	City Langhorne	State PA	Zip Code 19047		FEC Identification Number				
	Purpose of Disbursement Void - Fitzpatrick for Congress		10041	011	C C00404236				
	Candidate Name			Category/	Transaction ID : 11139966 Amount of Each Disbursement this Period				
	Fitzpatrick, Michael, , ,			Туре					
	Senate X	-	General		– 2000.00 Void - Fitzpatrick for Congress				
	State: PA District: 08	Other (spe	cify) 🔻		Memo Item				
	Full Name (Last, First, Middle Initial)								
В.	Delbene For Congress				Date of Disbursement				
	Mailing Address PO Box 477		10 / D D / Y Y Y Y 22 / 2021						
	City Kirkland	State WA	Zip Code 98083		FEC Identification Number				
	Purpose of Disbursement	011	С С00459099						
	Candidate Name	Category/	Transaction ID : 11141680 Amount of Each Disbursement this Period						
	DelBene, Suzan, , Rep.,			Туре					
	Office Sought: X House Disburse Senate X	ement For: Primary	2022 General		4000.00				
	State: WA District: 01	Other (spe			Memo Item				
с.	Full Name (Last, First, Middle Initial) Delbene For Congress				Date of Disbursement				
	Mailing Address PO Box 477				10 / Y Y Y Y 22 2021				
	City	State	Zip Code		FEC Identification Number				
	Kirkland Purpose of Disbursement	WA	98083		C C00459099				
	Candidate Name			011 Category/	Transaction ID : 11141682 Amount of Each Disbursement this Period				
	DelBene, Suzan, , Rep., Office Sought: x House Disburse	Туре	1000.00						
	Senate President		Memo Item						
_	State: WA District: 01	-							
s	UBTOTAL of Disbursements This Page (optional).			····· ►	3000.00				
т	OTAL This Period (last page this line number only	/)		••••••					

S	CHEDULE B (FEC Form 3X)		F	OR L	INE N	IE NUMBER: PAGE 521						
IT	ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			only 21b	one) 22 🗶 23	26 27				
			Summary Page			210 28a	22 X 23 28b 28c	26 27 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na											
\setminus	NAME OF COMMITTEE (In Full)											
	Political Action Committee of the A	American	Association	n of (Orth	hopa	aedic Surgeo	nsPAC of AAOS				
Α.	Full Name (Last, First, Middle Initial) Blumenauer For Congress							ement				
	Mailing Address 901 Se Oak Street						10 / D D / Y Y Y Y 2021					
	City Portland	State OR	Zip Code 97214				FEC Identification	n Number				
	Purpose of Disbursement			0)11	٦	C C003073					
	Candidate Name			Cate	egory	y/		ID : 11141683 Disbursement this Period				
	Blumenauer, Earl, , Rep.,			Ty	ype		· · · · · ·	1000.00				
	Senate x	-	General									
	State: OR District: 03	Other (spe					Memo Item					
R	Full Name (Last, First, Middle Initial) Healthcare Freedom Fund						Date of Disburse	ement				
υ.	Realificate Fleedoni Fund											
	Mailing Address PO Box 2485			2021								
	City	State VA	Zip Code 22152				FEC Identification	n Number				
	Springfield Purpose of Disbursement	-	-	_	C C005284	14						
	Roe LPAC Candidate Name	ame						ID : 11141684				
	Candidate Name				egory ype	y/	Amount of Each	Disbursement this Period				
	Office Sought: House Disburse	ement For:		• •	, , , , , , , , , , , , , , , , , , , ,	_		5000.00				
	Senate	Primary	General					Roe LPAC				
	State: District:	Other (spee	city)				Memo Item					
_	Full Name (Last, First, Middle Initial)											
C.	Terri Sewell For Congress						Date of Disburse					
	Mailing Address PO Box 1964						10 / D	^D / Y Y Y Y 2 2021				
	City	State	Zip Code				FEC Identification	n Number				
	Birmingham Purpose of Disbursement	AL	35201	_		_	C C004589	76				
				0	011							
	Candidate Name						Transaction ID : 11141685 Amount of Each Disbursement this Period					
	Sewell, Terri, A., Rep., Office Sought: x House Disburse	ement For: 2	2022	Т	уре			2500.00				
	Senate	Primary	General									
	President	Other (spe	cify) 🔻				Memo Item					
	State: AL District: 07											
s	UBTOTAL of Disbursements This Page (optional).							8500.00				
т	OTAL This Period (last page this line number only	/)										

	CHEDULE B (FEC Form 3X)			FOR LINE			
	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b		
	y information copied from such Reports and State for commercial purposes, other than using the na						
\square	NAME OF COMMITTEE (In Full)						
	Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS		
A.	Full Name (Last, First, Middle Initial) Friends Of Todd Young, Inc.	Date of Disbursement					
	Mailing Address PO Box 3743						
	City	State IN	Zip Code		FEC Identification Number		
	Carmel Purpose of Disbursement		46082		C C00450255		
				011	C C00459255		
	Candidate Name			Category/	Transaction ID : 11141686 Amount of Each Disbursement this Period		
	Young, Todd, Christopher, Sen.,			Туре			
	Senate x	Primary	General		1500.00		
	State: IN District: 01	Other (spe	city) 🔻		Memo Item		
_	Full Name (Last, First, Middle Initial)						
В.	Larson For Congress				Date of Disbursement		
	Mailing Address PO Box 261172		10 / D D / Y Y Y Y 22 / 2021				
	City	State CT	Zip Code 06126		FEC Identification Number		
	Hartford Purpose of Disbursement		C C00330142				
		011	Transaction ID : 11141687				
	Candidate Name			Category/	Amount of Each Disbursement this Period		
	Larson, John, B., Rep.,	. –		Туре	2500.00		
		ment For:	2022 General		2500.00		
	President	Other (spe					
	State: CT District: 01		- ,,		Memo Item		
<u> </u>	Full Name (Last, First, Middle Initial)				Date of Disbursement		
0.	Curtis For Congress						
	Mailing Address 370 East South Temple, Suite 580)			10 22 2021		
		State	Zip Code		FEC Identification Number		
	Salt Lake City Purpose of Disbursement	UT	84111		C C00647339		
				011	Transaction ID : 11141688		
	Candidate Name	Category/	Amount of Each Disbursement this Period				
	Curtis, John, , Rep.,	Туре	2702.02				
	Conoto	ement For: 2			2500.00		
	President	Primary Other (spe	General cifv) ▼		D		
	State: UT District: 03		- ,, ,		Memo Item		
s	UBTOTAL of Disbursements This Page (optional).			····· ►	6500.00		
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S	CHEDULE B (FEC Form 3X)			FC	DR L	NE N	UMBER:		PA	GE 523 OF 551	
IT	EMIZED DISBURSEMENTS	Use sepa for each		neck	only	one)					
			Summary Page			21b		(23	26	27	
<u> </u>						28a	28b	28c	29	30b	
	ny information copied from such Reports and State for commercial purposes, other than using the na										
$\left \right\rangle$	NAME OF COMMITTEE (In Full)										
	Political Action Committee of the A	American	Association	of C	Orth	opa	aedic Su	rgeo	nsPA	C of AAOS	
Α.	Full Name (Last, First, Middle Initial) Lisa Murkowski For Us Senate		Date of Disbursement								
							M M	/ D	D / Y	YYYY	
	Mailing Address PO Box 100847						10	2	2	2021	
	City	State	Zip Code				FEC Ider	tificatio	n Numbe	r	
	Anchorage	AK	99510								
	Purpose of Disbursement			0,	11	11	Сc	003845	29		
	Candidate Name					41			ID : 1114		
	Murkowski, Lisa, , Sen.,			Cate Tv	egory. /pe	/	Amount o	of Each	Disburse	ment this Period	
		ment For: 2	2022	.,	po					2000.00	
	× Senate ×	Primary	General					-y-			
	State: AK District:	Other (spe	cify) 🔻				Mem	o Item			
_	Full Name (Last, First, Middle Initial)										
В.	Lisa Murkowski For Us Senate		Date of [
	Mailing Address PO Box 100847		10	2	2	2021					
	City	State AK	Zip Code 99510				FEC Ider	tificatio	n Numbe	r	
	Anchorage Purpose of Disbursement										
	Tupose of Disbursement	11	11	C C00384529							
	Candidate Name			Category/ Type			Transaction ID : 11141690 Amount of Each Disbursement this Period				
	Murkowski, Lisa, , Sen.,						Amount		Disbuise	ment uns Penou	
		ment For:	2022		-		1			500.00	
	× Senate	Primary	🗶 General								
	State: AK District:	Other (spec	cify)				Mem	o Item			
-	Full Name (Last, First, Middle Initial)										
C.	Cole For Congress						Date of I	Disburse	ement		
	Mailing Address P.O. Box 722256						м м 10	/ D 2		2021	
	City	State	Zip Code			-+	FEC Ider	tificatio	n Number		
	Norman	OK	73070								
	Purpose of Disbursement	η Е.	C c	003797	35						
	Candidate Name								ID : 1114		
	Candidate Name Cole, Thomas, , Rep., Category/ Type						Amount o	of Each	Disburse	ment this Period	
	ce Sought: X House Disbursement For: 2022				he		1000.00				
	Senate	Primary	General					-			
	President	Other (spe	cify) 🔻				Mem	o Item			
	State: OK District: 04	-									
s	UBTOTAL of Disbursements This Page (optional).									3500.00	
\vdash						-		1			
т	OTAL This Period (last page this line number only	/)					L	,			

S	CHEDULE B (FEC Form 3X)			FOR L	INE NUMBER: PAGE 524 OF 55	
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check	a only one)	
			Summary Page		21b 22 X 23 26 27 28a 28b 28c 29 30b	
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may r me and addr	not be sold or use ress of any politica	d by any j al committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full)					
		merican	Association	of Orth	nopaedic SurgeonsPAC of AAOS	
Α.	Full Name (Last, First, Middle Initial) Jimmy Panetta For Congress	Date of Disbursement				
	Mailing Address PO Box 103				11 09 2021	
	City Carmel Valley	State CA	Zip Code 93924		FEC Identification Number	
	Purpose of Disbursement			014	C C00592154	
	Candidate Name			011 Category	Transaction ID : 11151956	
	Panetta, Jimmy, Varni, Rep.,			Type		
	Senate x	ment For: 2 Primary	General		1000.00	
	State: CA District: 20	Other (spec	city) 🔻		Memo Item	
R	Full Name (Last, First, Middle Initial) Nevadans For Steven Horsford				Date of Disbursement	
υ.						
	Mailing Address PO Box 336664	11 09 2021				
	City North Las Vegas	State NV	Zip Code 89033		FEC Identification Number	
	Purpose of Disbursement	C C00668228				
	Candidate Name			011 Category	Transaction ID : 11151957 // Amount of Each Disbursement this Period	
	Horsford, Steven, Alexander, Rep.			Туре		
	· · ·	ment For: 2 Primary	2022 General		1000.00	
	State: NV District: 04	Other (spec	cify)		Memo Item	
<u> </u>	Full Name (Last, First, Middle Initial)				Date of Disbursement	
0.	Kurt Schrader For Congress					
	Mailing Address PO Box 3314				11 09 2021	
	City Oregon City	State OR	Zip Code 97045		FEC Identification Number	
	Purpose of Disbursement				C C00446906	
	Candidate Name Schrader, Kurt, , Rep.,	Transaction ID : 11151958//Amount of Each Disbursement this Period				
		ment For: 2	2022	Туре	2000.00	
	State: OD District: 05	Primary Other (spec	General (Cify) ▼		Memo Item	
	State: OR District: 05					
s	UBTOTAL of Disbursements This Page (optional).				• 4000.00	
т	OTAL This Period (last page this line number only)			Image: A state of the state	

SCHEDULE B (FEC Form 3X)	11	FC	R LIN	IE NUMBER:	PAGE 525 OF 551		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(ch	neck o	nly one) b 22 🗶 23	26 27	
	Detailed	Summary Page		28			
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may i me and addr	not be sold or use ress of any politica	ed by a al com	any pe mittee	erson for the purpose to solicit contributio	e of soliciting contributions ns from such committee.	
NAME OF COMMITTEE (In Full)					_		
Political Action Committee of the A	American	Association	of C	Drtho	paedic Surge	onsPAC of AAOS	
Full Name (Last, First, Middle Initial) A. Perlmutter For Congress							
Mailing Address 3440 Youngfield Street #264					11 D	09 / Y Y Y Y 2021	
City Wheat Ridge	State CO	Zip Code 80033			FEC Identificat	ion Number	
Purpose of Disbursement			_	-	C C00410	0639	
Candidate Name			<u></u>	11		on ID : 11151959	
Perlmutter, Edwin, , Rep.,				gory/ pe	Amount of Eac	h Disbursement this Period	
	ement For: 2 Primary	2022 General	,	I		2000.00	
President State: CO District: 07	Other (spec				Memo Iten	n	
Full Name (Last, First, Middle Initial)							
B. Friends Of Neal Dunn					Date of Disbur	sement	
Mailing Address PO Box 16088	11 D	09 / Y Y Y Y 2021					
City	State FL	Zip Code 32406			FEC Identificat	ion Number	
Panama City Purpose of Disbursement	C C00582	204					
			0	11		on ID : 11151960	
Candidate Name				gory/		h Disbursement this Period	
Dunn, Neal, , Rep., MD Office Sought: x House Disburse	ement For:	2022	Ty	pe		2500.00	
Senate x	1	General					
State: FL District: 02	Other (spec	cify)			Memo Iten	n	
Full Name (Last, First, Middle Initial) C. Warnock For Georgia					Date of Disbur	sement	
					M M / D	D / Y Y Y Y	
Mailing Address PO Box 991					11	09 2021	
City Decatur	State GA	Zip Code 30031			FEC Identificat	ion Number	
Purpose of Disbursement	0,1		_	_	C C00736	6876	
Candidate Name							
	Warnock, Raphael, Gamaliel, Sen., Category Office Sought: House						
x Senate	Primary	2022 General				2500.00	
State: GA District:	Other (spec				Memo Iten	ı	
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SUBTOTAL of Disbursements This Page (optional).				•••• •	-	7000.00	
TOTAL This Period (last page this line number only	/)			🕨		,	

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 526 OF 551	
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one)	
			Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b	
	ny information copied from such Reports and State for commercial purposes, other than using the nai			d by any perso	on for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full)				control contributions from such committee.	
	Political Action Committee of the A	American	Association	of Orthopa	aedic SurgeonsPAC of AAOS	
Α.	Full Name (Last, First, Middle Initial) Jeffries For Congress	Date of Disbursement				
	Mailing Address 910 17th St Nw Ste 925				11 09 2021	
	City Washington	State DC	Zip Code 20006		FEC Identification Number	
	Purpose of Disbursement	DC	20000		C C00503052	
				011	Transaction ID : 11151968	
	Candidate Name Jeffries, Hakeem, , Rep.,			Category/ Type	Amount of Each Disbursement this Period	
		ment For: 2	2022	туре	1000.00	
	Senate X President	Primary Other (spec	General cify) ▼		Memo Item	
	State: NY District: 08					
B.	Full Name (Last, First, Middle Initial) Johnson For Congress				Date of Disbursement	
	Mailing Address PO Box 906	11 09 2021				
	City Marietta	State OH	Zip Code 45750		FEC Identification Number	
	Purpose of Disbursement		C C00476820			
	Candidate Name	011	Transaction ID : 11151973			
	Johnson, Bill, , Rep.,			Category/	Amount of Each Disbursement this Period	
		nent For: 2022			2500.00	
	Senate x		General			
	State: OH District: 06	Other (spec	cify)		Memo Item	
_	Full Name (Last, First, Middle Initial)					
C.	Kevin McCarthy For Congress				Date of Disbursement	
	Mailing Address PO Box 12667				11 09 2021	
	-	State	Zip Code		FEC Identification Number	
	Bakersfield Purpose of Disbursement	CA	93389		C C00420935	
				011	Transaction ID : 11151974	
	Candidate Name McCarthy, Kevin, , Rep.,	Category/ Type	Amount of Each Disbursement this Period			
		ment For: 2	2022	1900	2500.00	
	Senate x	Primary	General			
	State: CA District: 23	Other (spec	JIIY) ▼		Memo Item	
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S	UBTOTAL of Disbursements This Page (optional).			•••••	6000.00	
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SCHEDU	LE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 527 OF 551	
ITEMIZED	DISBURSEMENTS		arate schedule(s) category of the	(check only	one)	
			Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b	
				ed by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF	COMMITTEE (In Full)					
/		Americar	n Association	of Orthop	aedic SurgeonsPAC of AAOS	
	(Last, First, Middle Initial) y Committee PACMC PA	Date of Disbursement				
Mailing Ad	dress PO Box 10134				11 09 2021	
City		State	Zip Code		FEC Identification Number	
	f Disbursement	CA	93389		C C00428052	
McCarthy				011	Transaction ID : 11151975	
Candidate	Name			Category/ Type	Amount of Each Disbursement this Period	
Office Sou	ght: House Disburs	sement For:			2500.00	
	President	Primary Other (spe	General ecify) ▼		McCarthy LPAC	
State:	District:					
	(Last, First, Middle Initial) For Congress				Date of Disbursement	
Mailing Ad	dress PO Box 9639	11 / D D / Y Y Y Y 2021				
City		State KY	Zip Code 42102		FEC Identification Number	
Bowling G Purpose of	f Disbursement	011	C C00445023			
Candidate	Name				Transaction ID : 11151976	
Guthrie	e, Brett, , Rep.,			Category/ Type	Amount of Each Disbursement this Period	
Office Sou		ement For:			1500.00	
	Senate y President	Primary Other (spe	General			
State: k	(Y District: 02		(Ciry)		Memo Item	
-	(Last, First, Middle Initial)				Date of Disbursement	
	esadimer for congress				M M / D D / Y Y Y Y	
Mailing Ad	dress 910 17th Street, Nw Suite 925				11 09 2021	
City Washingto	n	State DC	Zip Code 20006		FEC Identification Number	
	f Disbursement				C C00554709	
Candidate		011 Category/	Transaction ID : 11151977 Amount of Each Disbursement this Period			
	I lnier, Mark, , Rep., ^{ght:} x House Disburs	sement For:	2022	Туре	1000.00	
	Senate President	Drimory	General			
State: C	CA District: 11		- 'J) V		Memo Item	
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A	information conied from such Departs and Otats	monto movi r	ant ha acid ar						
or fo	information copied from such Reports and State or commercial purposes, other than using the na								
	NAME OF COMMITTEE (In Full)		• · ·						
/	Political Action Committee of the A	American	Association	of Orthop	baedic SurgeonsPAC of AAOS				
	ull Name (Last, First, Middle Initial)	Date of Disbursement							
А.	Dr. Brian Babin For Congress								
N	Aailing Address PO Box 159				11 09 2021				
	Dity	State Zip Code			FEC Identification Number				
	Voodville	ТХ	75979						
F	Purpose of Disbursement			011	C C00553859				
7	Candidate Name				Transaction ID : 11151978				
	Babin, Brian, , Rep.,			Category/ Type	Amount of Each Disbursement this Period				
		ment For: 2	2022		1000.00				
	Senate X	Primary	General						
c	President State: TX District: 36	Other (spec	cify) 🔻		Memo Item				
	Full Name (Last, First, Middle Initial)								
_	Pete Aguilar For Congress				Date of Disbursement				
-	i die riguna i di Odrigiess								
N	Aailing Address PO Box 10954	<u>11</u> <u>09</u> <u>2021</u>							
	City	State	Zip Code		FEC Identification Number				
	San Bernardino Purpose of Disbursement	CA	92423						
Г			011	C C00510461					
τ	Candidate Name			Category/	Transaction ID : 11151979 Amount of Each Disbursement this Period				
	Aguilar, Pete, , Rep.,			Type					
	Dffice Sought: 🗶 House Disburse	ment For: 2	2022		1000.00				
		Primary	General						
c	State: CA District: 31	Other (spec	city)		Memo Item				
	State: CA District: 31								
	Suozzi For Congress				Date of Disbursement				
					M M / D D / Y Y Y Y				
N	Aailing Address PO Box 669				11 09 2021				
C	Dity	State	Zip Code		FEC Identification Number				
	Glen Cove	NY	11542						
F	Purpose of Disbursement			011	C C00607200				
ō	Candidate Name		Transaction ID : 11151980						
	Suozzi, Thomas, R., Rep.,			Category/ Type	Amount of Each Disbursement this Period				
_	•	ment For: 2	2022		1000.00				
	Senate	Primary	🗶 General						
~	President	Other (spec	cify) 🔻		Memo Item				
<u> </u>	State: NY District: 03								
511	BTOTAL of Disbursements This Page (optional).				3000.00				
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\setminus	NAME OF COMMITTEE (In Full)									
	Political Action Committee of the A	merican	Association	of Orthop	paedic SurgeonsPAC of AAOS					
A.	Full Name (Last, First, Middle Initial) Drew Ferguson For Congress Inc.				Date of Disbursement					
	Mailing Address PO Box 71067		11 / D D / Y Y Y Y 2021							
	5	State	Zip Code		FEC Identification Number					
	Newnan	GA	30271							
	Purpose of Disbursement			011	C C00607838 Transaction ID : 11151981					
	Candidate Name			Category/	Amount of Each Disbursement this Period					
	Ferguson, A. Drew, , Rep.,			Туре	1000.00					
	Senate	ment For: 2 Primary	X General							
	State: GA District: 03	Other (spec	city) 🔻		Memo Item					
	Full Name (Last, First, Middle Initial)									
в.	Hudson For Congress				Date of Disbursement					
	Mailing Address PO Box 5053		11 / D D / Y Y Y Y 2021							
	City	State	Zip Code		FEC Identification Number					
	Concord	NC 28027								
	Purpose of Disbursement		011	C C00504522						
	Candidate Name			011	Transaction ID : 11151984					
	Hudson, Richard, L., Rep., Jr.			Category/ Type	Amount of Each Disbursement this Per					
		ment For: 2	2022	VI: -	1000.00					
	Senate x	Primary	General							
_	State: NC District: 08	Other (spec	cify)		Memo Item					
~	Full Name (Last, First, Middle Initial)									
U.	Friends Of Don Beyer				Date of Disbursement					
	Mailing Address 1751 Potomac Greens Drive				12 01 2021					
	City	State	Zip Code		FEC Identification Number					
	Alexandria	VA	22314							
	Purpose of Disbursement			011	C C00555888					
	Candidate Name				Transaction ID : 11159052					
	Beyer, Don, S., Rep., Jr.			Category/ Type	Amount of Each Disbursement this Period					
	• • • • • • • • • • • • • • • • • • • •	ment For: 2	2022		1000.00					
	Senate x	Primary	General							
	President	Other (spec	cify) 🔻		Memo Item					
_	State: VA District: 08									
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S	CHEDULE B (FEC Form 3X)			F			JUMBER:	PAGE 530 OF 551					
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		heck	only	one)						
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Δr	ny information copied from such Reports and State	ments may r	not be sold or use										
	for commercial purposes, other than using the nat												
\backslash	NAME OF COMMITTEE (In Full)												
\square	Political Action Committee of the A	American	Association	of (Orth	nopa	aedic Surgeon	sPAC of AAOS					
Δ	Full Name (Last, First, Middle Initial)						Date of Disbursen	nent					
л.	Friends Of Raja For Congress												
	Mailing Address PO Box 681202						12 01	2021					
	City	State Zip o					FEC Identification	Number					
	Schaumburg Purpose of Disbursement	IL	60168										
				0	011		C C00575092	A CONTRACTOR OF					
	Candidate Name			la de		//	Transaction I Amount of Each D	D: 11159053 Disbursement this Period					
	Krishnamoorthi, Raja, , Rep.,	Sought: X House Disbursement For: 2022				"							
								2500.00					
	Senate x President	Primary Other (spec	General				-						
	State: IL District: 08	Other (spec	uny) ▼				Memo Item						
	Full Name (Last, First, Middle Initial)												
В.	Friends Of Raja For Congress						Date of Disbursen	nent					
	Mailing Address PO Box 681202	_					12 01 2021						
	City Schaumburg	State IL	Zip Code 60168				FEC Identification	Number					
	Purpose of Disbursement			_	_		C C00575092						
				C	011		Transaction ID : 11159054						
	Candidate Name			Category/			Amount of Each Disbursement this Period						
	Krishnamoorthi, Raja, , Rep., Office Sought: x House Disburse	ment For: 2	2022	Ţ	ype		1000.00						
	Senate Disburse	Primary	General										
	President	Other (spec					Memo Item						
_	State: IL District: 08												
c	Full Name (Last, First, Middle Initial)						Data of Dishurses	aant					
U.	Castor For Congress						Date of Disbursen						
	Mailing Address 301 W Platt Street, #385						12 01	2021					
	City	State	Zip Code			+	FEC Identification	Number					
	Tampa	FL	33606										
	Purpose of Disbursement			0)11		C C0041076	1					
	Candidate Name				-		Transaction I						
	Castor, Kathy, , Rep.,				egory ype	"	Amount of Each Disbursement this Period						
		ment For: 2						1000.00					
	Senate x	Primary	General										
	State: FL District: 14	Other (spec	uny) ▼				Memo Item						
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s	SUBTOTAL of Disbursements This Page (optional).							4500.00					
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T	OTAL This Period (last page this line number only	r)					L ,						

S	CHEDULE B (FEC Form 3X)		FOR		NUMBER: PAGE 531 OF 5	551					
IT	EMIZED DISBURSEMENTS	for each	Use separate schedule(s) for each category of the Detailed Summary Page		k only 21b 28a	/ one) 22					
	y information copied from such Reports and State for commercial purposes, other than using the nar				perso	on for the purpose of soliciting contributions					
\backslash	NAME OF COMMITTEE (In Full)										
	Political Action Committee of the A	merican	Association	of Ort	hopa	aedic SurgeonsPAC of AAOS	3				
A.	Full Name (Last, First, Middle Initial) Maloney For Congress					Date of Disbursement					
	Mailing Address 49 E. 92nd St, 1					12 01 Y Y Y Y Y 12 01 2021					
	City	State	Zip Code			FEC Identification Number	-				
	New York	NY	10128								
	Purpose of Disbursement			011		C C00273169 Transaction ID : 11159056					
	Candidate Name			Categor	v/	Amount of Each Disbursement this Period	d				
	Maloney, Carolyn, B., Rep.,			Туре	<u></u>		Π.				
	Senate x	ment For: 2 Primary	General			2500.00					
	State: NY District: 12	Other (spec	city) 🔻			Memo Item					
	Full Name (Last, First, Middle Initial)										
В.	Carol For Congress					Date of Disbursement					
	Mailing Address 228 S. Washington Street Suite 115				12 01 2021						
	City Alexandria	State VA	Zip Code 22314			FEC Identification Number					
	Purpose of Disbursement			011		C C00653220					
	Candidate Name				21/	Transaction ID : 11159058 Amount of Each Disbursement this Period	Ч				
	Miller, Carol, Devine, Rep.,			Categor Type	y/	Anount of Each Dispursement this Fenot					
	Office Sought: 🗶 House Disburse	ment For: 2	2022			1000.00					
	Senate x		General								
	State: WV District: 03	Other (spec	cify)			Memo Item					
с.	Full Name (Last, First, Middle Initial) Boozman For Arkansas					Date of Disbursement					
0.	DUUZITIATI FUI AIKANSAS										
	Mailing Address PO Box 671					12 01 2021					
	City	State	Zip Code			FEC Identification Number					
	Rogers	AR	72757								
	Purpose of Disbursement			011		C C00476317					
	Candidate Name			011 Categor	w/	Transaction ID : 11159059 Amount of Each Disbursement this Period	d				
	Boozman, John, , Sen.,			Type	y/		_				
		ment For: 2	2022			1000.00					
	× Senate	Primary	x General				_				
	State: AR District:	Other (spec	city) 🔻			Memo Item					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 532 OF 551							
ITEMIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check onl 21b 28a	y one) 22 🗶 23 26 27							
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			d by any pers	son for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican	Association	of Orthop	paedic SurgeonsPAC of AAOS							
Full Name (Last, First, Middle Initial) A. Texans For Ronny Jackson Mailing Address PO Box 53058				Date of Disbursement							
5	State TX	Zip Code 79159		FEC Identification Number							
Purpose of Disbursement			011	C C00730531 Transaction ID : 11159060							
Jackson, Ronny, Lynn, Rep.,	nent For: 2	022	Category/ Type	Amount of Each Disbursement this Period 3500.00							
Senate X	Primary Other (spec	General		Memo Item							
Full Name (Last, First, Middle Initial) B. Joe Neguse For Congress				Date of Disbursement							
Mailing Address PO Box 7142											
City S Boulder Purpose of Disbursement	011	FEC Identification Number									
Candidate Name Neguse, Joseph, , Rep., Office Sought: x House Disburserr	nent For: 2	022	Category/ Type	Transaction ID : 11159061 Amount of Each Disbursement this Period 1000.00							
Senate X	Primary Other (spec	General ify)		Memo Item							
Full Name (Last, First, Middle Initial) C. Greg Pence For Congress				Date of Disbursement							
Mailing Address PO Box 275				12 01 2021							
Taylorsville	State IN	Zip Code 47280		FEC Identification Number							
Purpose of Disbursement Candidate Name Pence, Gregory, J., Rep.,			011 Category/ Type	C C00658401 Transaction ID : 11159062 Amount of Each Disbursement this Period							
Senate X President	nent For: 2 Primary Other (spec	General		1000.00 Memo Item							
State: IN District: 06 SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				5500.00							

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IT	EMIZED DISBURSEMENTS	Use sepa for each	(cł		only 21b	one)	23 [26	26 27				
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\backslash	NAME OF COMMITTEE (In Full)												
	Political Action Committee of the A	American	Association	of C	Drth	nopa	aedic Sur	geon	sPA	.C (of AAOS		
Α.	Full Name (Last, First, Middle Initial) Josh Harder For Congress						Date of Dis	bursen	nent				
	Mailing Address PO Box 4426						12 ^{//}	01			021		
	City Modesto	State CA	Zip Code 95352				FEC Identification N		Number	•			
	Purpose of Disbursement			0	11	٦	C COO	6 D : 1115	one	2			
	Candidate Name			Cate	egory	/	Amount of I						
	Harder, Josh, , Rep.,			Ту	ype			_			2500.00		
	Office Sought:	ment For: 2 Primary Other (spec	General								2300.00		
	State: CA District: 10		······································				Memo	Item					
в.	Full Name (Last, First, Middle Initial) Jacobs For Congress						Date of Dis	bursen	nent				
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	Mailing Address PO Box 387		1				12	01		2	021		
	City Clarence	State NY	Zip Code 14031				FEC Identifi	ication	Number	r			
	Purpose of Disbursement		14031	_	-		C C00	706788	3		_		
				0)11			ction I	D : 1115	9064			
	Candidate Name				gory	/	Amount of I	this Period					
	Jacobs, Christopher, , , Office Sought: x House Disburse	ment For: 2	0000	Ty	/pe			1000.00					
	Senate	1	General					-		-			
	President	Other (spec	cify)				Memo	ltom					
	State: NY District: 27						Mento	item					
C.	Full Name (Last, First, Middle Initial) Sasse PAC						Date of Dis	bursen	nent				
	Mailing Address 499 S Capitol St, SW Suite 420						12 ^M	01			021		
	City	State	Zip Code			\uparrow	FEC Identifi	ication	Number	r			
	Washington Purpose of Disbursement Sasse LPAC	DC	20003		11		C C00	571802	2				
	Candidate Name			Cate	egory.	/	Transaction ID : 11159065 Amount of Each Disbursement this Period 1500.00						
	Office Sought: House Disburse	ment For:		. ,		-							
	Senate	Primary	General					S	Sasse LF	PAC			
	President	Other (spec	cify) 🔻				Memo	Item					
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S	CHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER: PAGE 534 OF 55							
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	y information copied from such Reports and State for commercial purposes, other than using the nar												
\setminus	NAME OF COMMITTEE (In Full)												
	Political Action Committee of the A	merican	Association	of Or	thopa	aedic SurgeonsPAC of AAOS							
Α.	Full Name (Last, First, Middle Initial) Dan Crenshaw For Congress					Date of Disbursement							
	Mailing Address PO Box 430965					12 / D D / Y Y Y Y 12 01 2021							
	City Houston	State TX	Zip Code 77243			FEC Identification Number							
	Purpose of Disbursement			011		C C00660795							
	Candidate Name			Catego		Amount of Each Disbursement this Period							
		ment For: 2		Туре	•	1000.00							
	Senate X President	Primary Other (spec	General cify) ▼			Memo Item							
	State: TX District: 02 Full Name (Last, First, Middle Initial)												
В.	Curtis For Congress					Date of Disbursement							
	Mailing Address 370 East South Temple, Suite 586		12 01 Y Y Y Y Y 2021										
	City Salt Lake City	State UT	Zip Code 84111			FEC Identification Number							
	Purpose of Disbursement		011		C C00647339 Transaction ID : 11159067								
	Candidate Name			Catego		Amount of Each Disbursement this Period							
	Curtis, John, , Rep., Office Sought: x House Disburse	ment For: 2	2022	Туре)	1000.00							
		Primary	General										
	State: UT District: 03	Other (spec	cify)			Memo Item							
с.	Full Name (Last, First, Middle Initial)					Date of Disbursement							
	Mailing Address PO Box 261172					M M / D D / Y Y Y Y 12 01 2021							
	-	State	Zip Code			FEC Identification Number							
	Hartford Purpose of Disbursement	СТ	06126			C C00330142							
	Candidate Name			011 Catego		Transaction ID : 11159068 Amount of Each Disbursement this Period							
		ment For: 2		Туре	•	2500.00							
	State: CT District: 04	Primary Other (spec	General cify) ▼			Memo Item							
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	y information copied from such Reports and State for commercial purposes, other than using the na												
$ \rangle$	NAME OF COMMITTEE (In Full)		A		~ .,								
	Political Action Committee of the A	American	Association	n of (Orth	nopa	aedic Surgeons	sPAC of AAOS					
Α.	Full Name (Last, First, Middle Initial) French Hill For Arkansas						Date of Disbursem	ent					
	Trench fill for Arkansas						M M / D D						
	Mailing Address PO Box 7841						12 01	2021					
	City	State Zip Code					FEC Identification I	Number					
	Little Rock Purpose of Disbursement	AR	72217				0 000554075						
				0)11	11	C C00551275						
	Candidate Name			Cate	egory	/	Transaction ID Amount of Each Di): 11159070 isbursement this Period					
	Hill, French, , Rep.,				ype								
		ement For:						1000.00					
	Senate x President	Primary Other (spe	General Gify) ▼										
	State: AR District: 02		5,, ▼				Memo Item						
_	Full Name (Last, First, Middle Initial)												
В.	Guthrie For Congress						Date of Disbursem	ent					
	Mailing Addross DO Dev 2000						12 01	/ Y Y Y Y Y 2021					
	Mailing Address PO Box 9639												
	City Bowling Green	State KY	Zip Code 42102			FEC Identification I	Number						
	Purpose of Disbursement		102	_	_		C C00445023						
		011 Category/					Transaction ID : 11159071						
	Candidate Name							isbursement this Period					
	Guthrie, Brett, , Rep., Office Sought:	ement For: 2022			уре	/pe	1000.00						
	Office Sought: X House Disburse	Primary											
	President	Other (spe											
	State: KY District: 02	1					Memo Item						
~	Full Name (Last, First, Middle Initial)						Data of Distance						
U.	Lahood For Congress						Date of Disbursem						
	Mailing Address P.O. Box 10735						12 / D D D	/ Y Y Y Y Y 2021					
	City	State	Zip Code			\rightarrow	FEC Identification I	Number					
	Peoria	IL	61612										
	Purpose of Disbursement)11	ן ך	C C00575050						
	Candidate Name			less.	-	,	Transaction ID						
	LaHood, Darin, , Rep.,				egory ype	"	Amount of Each Disbursement this Period						
	Office Sought: 🗶 House Disburse	ement For:						2500.00					
	Senate x	Primary Other (one	General										
	State: IL District: 18	Other (spe	Giiy) ▼				Memo Item						
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SCHEDULE B (FEC Form 3X))		FOR LINE	NUMBER PAGE 536 OF 551
ITEMIZED DISBURSEMENTS	Use sep	arate schedule(s) category of the	(check only	/ one)
		Summary Page	21b	22 X 23 26 27 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)	ha Amarican		of Orthop	aedic SurgeonsPAC of AAOS
	ne Americai	I ASSOCIATION		aedic SurgeonsFAC of AAOS
Full Name (Last, First, Middle Initial)				Date of Disbursement
A. Walorski For Congress Inc				
Mailing Address PO Box 954				12 01 2021
City	State	Zip Code		FEC Identification Number
Mishawaka Purpose of Disbursement	IN	46546		0 000400570
			011	C C00468579
Candidate Name			Category/	Transaction ID : 11159075 Amount of Each Disbursement this Period
Walorski, Jackie, Swihart, Rep			Туре	1000.00
Office Sought: X House Dis	sbursement For:	2022 General		1000.00
President	Other (spe			Memo Item
State: IN District: 02				
Full Name (Last, First, Middle Initial)				Data of Diskurgement
B. Andy Harris For Congress				Date of Disbursement
Mailing Address PO Box 426				12 01 Y Y Y Y 2021
City	State	Zip Code		FEC Identification Number
Stevensville Purpose of Disbursement	MD	21666		C C00435974
			011	C C00435974 Transaction ID : 11159076
Candidate Name			Category/	Amount of Each Disbursement this Period
Harris, Andy, , Rep., Office Sought:	sbursement For:	2022	Туре	1000.00
Office Sought: X House Dis	Primary	General		
President	Other (spe	ecify)		Memo Item
State: MD District: 01				
Full Name (Last, First, Middle Initial)				Date of Disbursement
				M M / D D / Y Y Y Y
Mailing Address 611 Pennsylvania Avenue, 8 #143	SE			12 01 2021
City	State	Zip Code		FEC Identification Number
Washington Purpose of Disbursement	DC	20003		C C00517235
Lujan LPAC			011	Transaction ID : 11159078
Candidate Name			Category/	Amount of Each Disbursement this Period
Office Sought: House Dis	sbursement For:		Туре	1000.00
Senate	Primary	General		Lujan LPAC
President	Other (spe	ecify) 🔻		Memo Item
State: District:				
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SCHEDULE B (FEC Form 3X)		voto ochedule (-)	FOR LINE	NUMBER: PAGE 537 OF 551					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b					
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NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican	Association	of Orthopa	aedic SurgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial) A. Jake Auchincloss For Congress				Date of Disbursement					
Mailing Address P.O. Box 600698		1		12 01 2021					
City Newtonville Purpose of Disbursement	State MA	Zip Code 02460		FEC Identification Number					
Candidate Name			011	C C00721449 Transaction ID : 11159079 Amount of Each Disbursement this Period					
Auchincloss, Jacob, Daniel, Rep., Office Sought:	ment For: 2 Primary	2022	Category/ Type	1500.00					
State: MA District: 04	Other (spec	cify) ▼		Memo Item					
Full Name (Last, First, Middle Initial) B. Crawford For Congress Mailing Address PO Box 16956				Date of Disbursement					
City Jonesboro Purpose of Disbursement	State AR	Zip Code 72403	011	FEC Identification Number					
Candidate Name Crawford, Rick, A., Rep., Office Sought:	ment For: 2 Primary	2022	Category/ Type	Transaction ID : 11159080 Amount of Each Disbursement this Period 1000.00					
State: AR District: 01	Other (spec	cify)		Memo Item					
Full Name (Last, First, Middle Initial) C. LEGPAC				Date of Disbursement					
Mailing Address 38 Ivy Street, SE				12 01 2021					
City Washington Purpose of Disbursement Cardin LPAC Candidate Name	State DC	Zip Code 20003	011 Category/ Type	FEC Identification Number C C00385534 Transaction ID : 11159081 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼	Туре	2500.00 Cardin LPAC Memo Item					
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only				5000.00					

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\setminus	NAME OF COMMITTEE (In Full)					_					
	Political Action Committee of the A	American	Associatior	n of O	rthop	aedic Surgeons-	-PAC of AAOS				
Α.	Full Name (Last, First, Middle Initial) Kathy Manning For Congress					Date of Disbursemer					
	Mailing Address PO Box 41197					12 / D D	2021				
	City	State	Zip Code			FEC Identification Nu	umber				
	Greensboro Purpose of Disbursement	NC	27404			0					
	Fulpose of Disbursement			01	1	C C00662577	44450000				
	Candidate Name			Categ	iorv/	Transaction ID : Amount of Each Disl	11159082 oursement this Period				
	Manning, Kathy, Ellen, Rep.,			Тур							
		ement For: 2					1000.00				
	State: NC District: 06	Primary Other (spec	General cify) ▼			Memo Item					
	Full Name (Last, First, Middle Initial)										
В.	Barragan For Congress					Date of Disbursemen	nt				
	Mailing Address 1840 South Gaffey Street #421					12 / D D 12 01	2021				
	City San Pedro	State CA	Zip Code 90731			FEC Identification Nu	umber				
	Purpose of Disbursement	UA	90731	_	_	C C00577353					
		011			1	Transaction ID : 11159083					
	Candidate Name		Categ		Amount of Each Disbursement this Perio						
	Barragan, Nanette, Diaz, Rep., Office Sought: x House Disburse	ment For:	2022	Тур	e	1000.00					
	Senate X	1	General			4	4. 4.				
	State: CA District: 44	Other (spec	cify)			Memo Item					
C.	Full Name (Last, First, Middle Initial) Mike Crapo For Us Senate					Date of Disbursemer	nt				
						M M / D D	/ Y Y Y Y				
	Mailing Address PO Box 1948	1				12 01	2021				
	City Boise	State ID	Zip Code 83701			FEC Identification Nu	umber				
	Purpose of Disbursement			_	-	C C00330886					
	Condidata Nama			011	1	Transaction ID :	11159084				
	Candidate Name Crapo, Mike, , Sen.,			Categ Typ		Amount of Each Disl	oursement this Period				
		ement For: 2	2022	iyp			2500.00				
	× Senate	Primary	General								
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	y information copied from such Reports and State for commercial purposes, other than using the na														
\setminus	NAME OF COMMITTEE (In Full)														
	Political Action Committee of the A	American	Association	n of (Orth	opa	edic S	Sur	geo	ns-	P/	4C	of AAC	DS	
	Full Name (Last, First, Middle Initial) Doing Right - Results, Action, Unit	ty, Leade	y, Leadership PAC						burse		nt	Y	YYYY		
	Mailing Address PO Box 3433						12		0				2021		
	City Palm Desert	State CA			FEC ld	lentifi	catio	n N	umbe	er					
	Purpose of Disbursement Ruiz LPAC	CA	92261	0	11		С	-	5698	-					
	Candidate Name				egory ype	/			ction Each				it this Per	riod	
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General				<u></u>		<u>- I</u>	Ruiz	z LPA	NC	2500.00		
	State: District:		city) 🔻				Me	emo	ltem						
_	Full Name (Last, First, Middle Initial) Paul Tonko For Congress						Date o		burse	-	nt	Y	Y Y Y	1	
	Mailing Address 911 Central Avenue # 221 City State Zip Code							Í		01			2021		
	City Albany		FEC Id		-	-	umbe	er	_						
	Purpose of Disbursement		011 Category/ Type			C C00450049 Transaction ID : 11159086 Amount of Each Disbursement this Per									
	Tonko, Paul, David, Rep.,										riod				
	Office Sought: 🗶 House Disburse Senate 🗶	ement For: ; Primary	2022 General										1000.00		
	State: NY District: 20	Other (spec					Memo Item								
-	Full Name (Last, First, Middle Initial) Friends To Elect Dr. Greg Murphy	To Cong	gress				Date o	f Dis	burse	emei	nt				
	Mailing Address PO Box 1131						12	/	D 0		1		2021		
	City	State	Zip Code				FEC Id	lentifi	catio	n N	umbe	er			
	Greenville Purpose of Disbursement	NC	27835				C	C00	6076	<u>4</u> 0	-	-			
	Candidate Name Murphy, Gregory, Francis, Rep.,			Cate	911 egory	1	C C00697649 Transaction ID : 11159087 Amount of Each Disbursement this Period						riod		
	Office Sought: 🗶 House Disburse	ement For: 2	2022		•								2000.00		
	State: NC District: 03	Primary Other (spe	x General (cify) ▼				Me	emo	ltem						
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	for commercial purposes, other than using the na											
$ \rangle$	NAME OF COMMITTEE (In Full)				·	- ب م						
/	Political Action Committee of the A	American	Association	1 Of (Jrth	nopa	aedic Surgeons-	-PAC OF AAUS				
<u>د</u>	Full Name (Last, First, Middle Initial)											
Α.	Miller-Meeks For Congress						Date of Disburseme					
	Mailing Address PO Box 33						12 01	2021				
	City Ottumwa	State IA	Zip Code 52501				FEC Identification N	umber				
	Purpose of Disbursement			_	_		C C00558825					
				0)11		Transaction ID :	: 11159099				
	Candidate Name	Pop			egory	y/		bursement this Period				
	Miller-Meeks, Mariannette, Jane, F Office Sought: x House Disburse	ement For: 2	2022	ſ	ype			2500.00				
	Senate X	Primary	General					-75-				
	President	Other (spec	cify) 🔻				Memo Item					
	State: IA District: 02 Full Name (Last, First, Middle Initial)											
В.	Debbie Lesko For Congress						Date of Disbursemer	nt				
							M M / D D	/ Y Y Y Y				
	Mailing Address PO Box 45388						12 01	2021				
	City Phoenix	State AZ	Zip Code 85064				FEC Identification N	umber				
	Purpose of Disbursement		00004	_	_		C C00663914					
		011 Category/					Transaction ID :	: 11159102				
	Candidate Name Lesko, Debbie, , Rep.,						Amount of Each Disbursement this Pe					
	• •	ment For: 2022			Туре	1000.00						
	Senate x											
	State: AZ District: 00	Other (spec	cify)				Memo Item					
	State: AZ District: 08 Full Name (Last, First, Middle Initial)											
C.	Friends Of John Barrasso						Date of Disburseme	nt				
							M M / D D	/ Y Y Y Y				
	Mailing Address PO Box 52008						12 01	2021				
	City	State	Zip Code				FEC Identification N	umber				
	Casper Purpose of Disbursement	WY	82605									
	r apose or Dispursement			0)11		C C00436386	. 11150102				
	Candidate Name			Cate	egory	y/	Transaction ID Amount of Each Dis	: 11159103 bursement this Period				
	Barrasso, John, A., Sen., MD	ment E			ype	-		2500.00				
	Consta	ement For: 2 Primary	2024 General					2500.00				
	President X	Other (spec					Memo Item					
_	State: WY District:	1					Memo Rem					
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S	CHEDULE B (FEC Form 3X)			F	DR I	INE N	IUMBER	:			PAGE	541 OF	551
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_	_			_					
	Political Action Committee of the A	American	Association	of (Jrth	nopa	iedic \$	Sur	geoi	nsF	AC 	of AA	JS
Δ	Full Name (Last, First, Middle Initial)						Date o		shuree	ment			
Π.	People For Derek Kilmer								Duise		V	YYYY	
	Mailing Address PO Box 1381								Q			2021	
	City	State	Zip Code				FEC Identification N			n Num	ber		
	Tacoma Purpose of Disbursement	WA	98402				C	000	E4 404	22	-		
				0	11		С	1)51489		4504		
	Candidate Name			Cate	egory					ID:1' Disbu		04 Int this Pe	riod
	Kilmer, Derek, , Rep.,				ype	<u> </u>							
		ment For: 2							7			1000.00	
	Senate x President	Primary Other (spec	General				-						
	State: WA District: 06												
	Full Name (Last, First, Middle Initial)												
В.	Continuing America's Strength and	d Securit	y				Date of Disbursement						
			-				M N	/	D		Y	YYYY	1
	Mailing Address 1006 Pendleton Street							12 01 2021					
	City Alexandria								FEC Identification Number				
	Purpose of Disbursement	•••							C C00480228				
	Cassidy LPAC			C)11		Transaction ID : 11159105 Amount of Each Disbursement this Period						
	Candidate Name				egory	//						riod	
	Office Sought: House Distance	mont For		Ty	ype		2500.00					<u>г</u>	
	Office Sought: House Disburse Senate	ment For: Primary	General				Cassidy LPAC						
	President	Other (spec											
_	State: District:]	- /				M	emo	Item				
_	Full Name (Last, First, Middle Initial)						_						
C.	Katherine Clark For Congress						Date o	of Dis	sburse	ment			_
	Mailing Address PO Box 159						M N 12	/	D 0			y y y 2021	
	City	State	Zip Code			+	FEC I	dontif	iootio	- NI	hor		
	Belmont	MA	02478				_	Jentili	ication	i ivum	nei	_	
	Purpose of Disbursement						С	C00	54188	88			
	Candidate Name				11					ID : 1			
	Clark, Katherine, M, Rep.,			egory ype	//	Amour	nt of	Each	Disbu	seme	nt this Pe	riod	
		ment For: 2	2022	• ;								1000.00	
	Senate x	Primary	General						7		7	- 46	
	President	Other (spe	cify) 🔻				M	emo	Item				
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			Summary Page			1b 8a	22 28b	× 2	3 8c		26 29		27 30b	
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	Political Action Committee of the A	merican	Association	of C	Drth	opa	edic S	urge	eor	۱S	PAC	c of		DS
Α.	Full Name (Last, First, Middle Initial) Mullin For Congress	Name (Last, First, Middle Initial) Date of Disbursemen												
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	Mailing Address PO Box 3681		1				12		01			202	1	
	City Muskogee	State OK	Zip Code 74402				FEC Ide	entifica	ation	Nur	nber			
	Purpose of Disbursement	ÖN	74402	_	_		С	C0049	9834	5				
				0	11	11					111591	107		
	Candidate Name				egory/		Amount					-	his Pe	riod
	Mullin, Markwayne, , Rep., Office Sought: x House Disbursed	ment For: 2	2022	Ту	/pe						-	10	00.00	
	Senate	Primary	General					-			7		- 10	<u> </u>
	State: OK District: 02	Other (spec	cify) ▼		Memo Item									
	Full Name (Last, First, Middle Initial)													
В.	Friends Of Dan Kildee								ursei	ment				
	Mailing Address P.O. Box 248							/	D 0'		Y	ү 202	ү ү 21	
	City	State	Zip Code											
	Flint	MI	48501				FEC Ide	entifica	ation	Nur	nber	_		
	Purpose of Disbursement		011					С С00499947						
	Candidate Name				1		Transaction ID : 11159108 Amount of Each Disbursement this Period 1000.00					riad		
	Kildee, Dan, , Rep.,				egory/ /pe							nou		
	· · · · · · · · · · · · · · · · · · ·	ment For: 2												
	Senate x President	Primary Other (spec	General											
	State: MI District: 05	Other (spec	siry)				Memo Item							
_	Full Name (Last, First, Middle Initial)						. .							
C.	Kansans For Marshall						Date of							
	Mailing Address PO Box 1588						^M 12		01		Y	202	Y Y 1	
	5	State	Zip Code				FEC Ide	entifica	ation	Nur	nber			
	Great Bend Purpose of Disbursement	KS	67530									-		
				0	11	11.		C0057		1.0	14450	142		
	Candidate Name			Cate	gory/		Transaction ID : 11159113 Amount of Each Disbursement this Period					riod		
	Marshall, Roger, , ,											25	00.00	
	Conoto	Primary	2021 General				2500.00					<u>.</u>		
	President	Other (spec					Mor	no Ite	m					
State: KS District:									7111					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 543 OF 551					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	7 one) 22 ★ 23 26 27 28b 28c 29 30b					
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NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican	Association	of Orthop	aedic SurgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial) A. Al For Montana				Date of Disbursement					
Mailing Address PO Box 1596		1		12 01 2021					
Helena	State MT	Zip Code 59624		FEC Identification Number					
Purpose of Disbursement Candidate Name			011 Category/	C C00783381 Transaction ID : 11159120 Amount of Each Disbursement this Period					
	ment For: 2	2022 General	Туре	5000.00					
State: MT District: 00	Primary Other (spec		Memo Item						
Full Name (Last, First, Middle Initial) B. Mark Kelly For Senate				Date of Disbursement					
Mailing Address PO Box 27202	Mailing Address PO Box 27202								
City Tucson Purpose of Disbursement	011	FEC Identification Number							
Candidate Name Kelly, Mark, Edward, Sen.,	Category/ Type			Transaction ID : 11164124 Amount of Each Disbursement this Period					
X Senate Y President	ment For: 2 Primary Other (spec	2022 General cify)		2500.00					
State: AZ District: Full Name (Last, First, Middle Initial) C. Perimeter PAC				Date of Disbursement					
Mailing Address 124 Washington Street Suite 101	Mailing Address 124 Washington Street								
City Foxboro Purpose of Disbursement Duckworth LPAC	State MA	Zip Code 02035	011	FEC Identification Number C C00544254 Transaction ID : 11164133 Amount of Each Disbursement this Period 2500.00 Duckworth LPAC Memo Item					
Candidate Name			Category/ Type						
Office Sought: House Disburse Senate President District:	ment For: Primary Other (spec	General cify) ▼	Туре						
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SC	HEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 544 OF 551					
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	NAME OF COMMITTEE (In Full)		, ,							
	Political Action Committee of the	Americar	n Associatio	n of Orthop	aedic SurgeonsPAC of AAOS					
	Full Name (Last, First, Middle Initial) HeartDoc PAC				Date of Disbursement					
	Mailing Address PO Box 250				12 14 Y Y Y Y Y 12 14 2021					
	City Newburgh	State IN	Zip Code 47629-0250		FEC Identification Number					
	Purpose of Disbursement Buschon LPAC			011	C C00523381					
	Candidate Name			Category/ Type	Transaction ID : 11164134 Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		5000.00 Buschon LPAC					
	State: District:	Other (spe	City) 🔻		Memo Item					
B.	Full Name (Last, First, Middle Initial) LANK PAC Mailing Address PO Box 1639	Date of Disbursement								
	City	State OK	Zip Code 73008		FEC Identification Number					
	Bethany Purpose of Disbursement Lankford LPAC	011	C C00492058							
	Candidate Name			Category/ Type	Transaction ID : 11164136 Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		5000.00 Lankford LPAC					
	State: District:]			Memo Item					
	Full Name (Last, First, Middle Initial) BRETTPAC				Date of Disbursement					
	Mailing Address 504 Derek Ave				12 / 14 / Y Y Y Y 12 14					
	City Elizabethtown Purpose of Disbursement	State KY	Zip Code 42701		FEC Identification Number					
	Guthrie LPAC Candidate Name	011 Category/	C C00483487 Transaction ID : 11164139 Amount of Each Disbursement this Period							
		Туре								
	Office Sought: House Disburse Senate President		Guthrie LPAC							
_	State: District:									
s	UBTOTAL of Disbursements This Page (optional)			····· ►	12500.00					
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	y information copied from such Reports and State for commercial purposes, other than using the nar									
$ \rangle$	NAME OF COMMITTEE (In Full)		.							
	Political Action Committee of the A	merican	Association	of Or	rthopa	aedic SurgeonsPAC of AAOS				
Δ	Full Name (Last, First, Middle Initial)					Date of Disbursement				
Λ.	Schakowsky For Congress									
	Mailing Address P.O. Box 5130					12 14 2021				
		State	Zip Code			FEC Identification Number				
	Evanston	IL	60204							
	Purpose of Disbursement			011		C C00327023				
	Candidate Name				_	Transaction ID : 11164140 Amount of Each Disbursement this Period				
	Schakowsky, Jan, D., Rep.,			Catego Type		Amount of Lacit Disputsement this Period				
		ment For: 2	2022			1000.00				
	Senate x	Primary	General							
	State: IL District: 09	Other (spec		Memo Item						
	Full Name (Last, First, Middle Initial)									
Β.	Jim Banks For Congress, Inc.					Date of Disbursement				
	Mailing Address PO Box 11431		12 14 Y Y Y Y 12 14 2021							
	City	Ctoto	Zin Codo							
	City Fort Wayne	State IN	Zip Code 46858			FEC Identification Number				
	Purpose of Disbursement					C C00577999				
				011	1	Transaction ID : 11164141				
	Candidate Name			Catego		Amount of Each Disbursement this Period				
	Banks, James, , Rep., Office Sought: x House Disburse	ment For: 2		Туре	e	1000.00				
		Primary	General			1000.00				
	President	Other (spec								
	State: IN District: 03					Memo Item				
	Full Name (Last, First, Middle Initial)									
C.	Common Good PAC					Date of Disbursement				
	Mailing Address PO Box 669					12 14 2021				
	Maning Address FO DUX 009									
	City	State	Zip Code			FEC Identification Number				
	Glen Cove	NY	11542							
	Purpose of Disbursement Suozzi LPAC			011		С С00669929				
	Candidate Name				- 1	Transaction ID : 11164142 Amount of Each Disbursement this Period				
		e Sought: House Disbursement For:								
	Senate	Primary	General			Suozzi LPAC				
	State: District:	Other (spec	city) 🔻			Memo Item				
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	ny information copied from such Reports and State for commercial purposes, other than using the national states and the states of the states o				any per	son for the purpose of soliciting contributions					
$\left \right\rangle$	NAME OF COMMITTEE (In Full)										
\mathbb{Z}	Political Action Committee of the A	American	Association	n of C	Drthop	paedic SurgeonsPAC of AAOS					
A.	Full Name (Last, First, Middle Initial) Hoosier PAC					Date of Disbursement					
	Mailing Address PO Box 1126					12 / D D / Y Y Y Y 12 14 2021					
	City Carmel	State IN	Zip Code 46082			FEC Identification Number					
	Purpose of Disbursement Braun LPAC			0,	11	C C00691162					
	Candidate Name				gory/ pe	Transaction ID : 11164143 Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General	.,		1000.00 Braun LPAC					
	State: District:		<i>J</i> / ▼			Memo Item					
в.	Full Name (Last, First, Middle Initial)		Date of Disbursement								
	Mailing Address PO Box 263		12 14 2021								
	City Swarthmore		FEC Identification Number								
	Purpose of Disbursement	0	11	C C00669358 Transaction ID : 11164144							
	Candidate Name				gory/	Amount of Each Disbursement this Period					
		ment For: 2022			Туре	2500.00					
	President	Primary Other (spec	General cify)			Memo Item					
_	State: PA District: 05 Full Name (Last, First, Middle Initial)										
C.	Feenstra For Congress					Date of Disbursement					
	Mailing Address 641 2nd St					12 14 2021					
	City Hull	State IA	Zip Code 51239			FEC Identification Number					
	Purpose of Disbursement			0	11	C C00693663					
	Candidate Name Feenstra, Randall, L., Rep.,				gory/ pe	Transaction ID : 11164145 Amount of Each Disbursement this Period					
		ment For: 2 Primary	2022 General								
	State: IA District: 04	Other (spec	cify) ▼			Memo Item					
s	UBTOTAL of Disbursements This Page (optional).					4500.00					
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			Summary Page			21b 28a	22 X 23 26 27 28b 28c 29 30b				
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	NAME OF COMMITTEE (In Full)										
/	Political Action Committee of the A	American	Associatior	n of (Drth	nopa	aedic SurgeonsPAC of AAOS	1			
-	Full Name (Last, First, Middle Initial) Feenstra For Congress						Date of Disbursement				
-	Mailing Address 641 2nd St						12 / D D / Y Y Y Y 12 14 2021				
	City	State	Zip Code				FEC Identification Number				
	Hull	IA	51239								
	Purpose of Disbursement						С сооб93663				
i	Candidate Name			Cate	egory		Transaction ID : 11164150 Amount of Each Disbursement this Period	i			
	Feenstra, Randall, L., Rep.,				ype	<i></i>		1			
(Office Sought: X House Disburse Senate	ment For: 2					1500.00	J.			
	State: IA District: 04	Primary Other (spec	x General (cify) ▼				Memo Item				
	Full Name (Last, First, Middle Initial)					-					
	Lone Star PAC						Date of Disbursement				
-	Mailing Address 217 Third St SE		12 / D D / Y Y Y Y 12 14 2021								
	City State Zip Code						FEC Identification Number				
	Washington Purpose of Disbursement										
1	Burgess LPAC				011		C C00415208				
ī	Candidate Name	Category/				1	Transaction ID : 11164152 Amount of Each Disbursement this Period				
ī	Office Sought: House Disburse	Type ment For: Primary General			ype	•	5000.00	1			
	Senate						Burgess LPAC	1			
;	State: District:	Other (spec	cify)				Memo Item				
	Full Name (Last, First, Middle Initial)						Data of Disburgement				
С.	Carey For Congress						Date of Disbursement				
-	Mailing Address PO Box 16032						12 14 2021				
	City	State	Zip Code				FEC Identification Number				
	Columbus Purpose of Disbursement	ОН	43216	_		_	С С00779603				
				0	11	ш	Transaction ID : 11164153				
Ī	Candidate Name Catego					/	Amount of Each Disbursement this Period				
-	Carey For Congress	If ey For Congress Type e Sought: X House Disbursement For: 2021 Senate Primary					2000.00	1			
·											
	President	Other (spec					Memo Item				
	State: OH District: 00		2021 General Deb	ot Re							
รเ	JBTOTAL of Disbursements This Page (optional).						8500.00				
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 548 OF 551					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a						
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full) Political Action Committee of the A	Americar	Associatior	n of Orthop	aedic SurgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial) A. Keystone America PAC				Date of Disbursement					
Mailing Address PO Box 58746	0			12 23 2021					
City Philadelphia	State PA	Zip Code 19102		FEC Identification Number					
Purpose of Disbursement Casey LPAC			011	C C00439992					
Candidate Name			Category/	Transaction ID: 11168120 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General	Туре	2500.00 Casey LPAC					
State: District:	Other (spe	ciiy) ▼		Memo Item					
Full Name (Last, First, Middle Initial) B. AMI PAC	AMI PAC								
Mailing Address PO Box 582496	Mailing Address PO Box 582496								
City Elk Grove Purpose of Disbursement		FEC Identification Number							
Bera LPAC Candidate Name			011 Category/ Type	Transaction ID : 11168122 Amount of Each Disbursement this Period					
Senate President	ement For: Primary Other (spe	General cify)		5000.00 Bera LPAC Memo Item					
State: District: Full Name (Last, First, Middle Initial)									
C. MURPHPAC				Date of Disbursement					
Mailing Address 415 New Jersey Ave SE, Ste 1	Mailing Address 415 New Jersey Ave SE, Ste 1								
City Washington Purpose of Disbursement Void - MURPHPAC	State DC	Zip Code 20003		FEC Identification Number					
Candidate Name			011 Category/	Transaction ID : 11184376 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President District:	ement For: Primary Other (spe	General cify) ▼	Туре	- 2500.00 Void - MURPHPAC Memo Item					
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and address of any politic		on for the purpose of soliciting contributions of solicit contributions from such committee.					
nerican Associatior	of Orthop	aedic SurgeonsPAC of AAOS					
Iuli Name (Last, First, Middle Initial) Himes For Congress Mailing Address 857 Post Road, #312							
ate Zip Code CT 06824		FEC Identification Number					
	011	C C00434191 Transaction ID : 11184377					
	Category/ Type	Amount of Each Disbursement this Period					
ent For: 2022 Primary General Other (specify) ▼		- 2500.00 Void - Himes For Congress Memo Item					
State: CT District: 04 Full Name (Last, First, Middle Initial) Garret Graves For Congress Mailing Address PO Box 64845							
City State Zip Code Baton Rouge LA 70896 Purpose of Disbursement Void - Garret Graves For Congress Image: Candidate Name Candidate Name Graves, Garret, , Rep.,							
ent For: 2022 Primary General Other (specify)		- 1000.00 Void - Garret Graves For Cor Memo Item					
		Date of Disbursement					
Mailing Address PO Box 9639							
ate Zip Code (Y 42102	011	FEC Identification Number C C00445023 Transaction ID : 11184379					
Candidate Name Guthrie, Brett, , Rep., Office Sought: X House Disbursement For: 2022							
Primary General Other (specify) ▼		- 1500.00 Void - Guthrie For Congress Memo Item					
	ate Zip Code CT 06824 ant For: 2022 rimary General ate Zip Code A 70896 ant For: 2022 rimary General ate Zip Code A ate Code All Code	ate Zip Code O11 O11 Category/ Type ent For: 2022 rimary General ther (specify) ▼ ate Zip Code A 70896 O11 Category/ ont For: 2022 rimary General ent For: 2022 rimary General ther (specify) Image: Code A Zip Code A Zip Code A Image: Code					

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 550 OF 551					
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NAME OF COMMITTEE (In Full)	A								
Political Action Committee of the	Americal	n Association	of Orthop	aedic SurgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial) A. Fitzpatrick for Congress				Date of Disbursement					
Mailing Address PO Box 185				09 15 2021					
City Langhorne	State PA	Zip Code 19047		FEC Identification Number					
Purpose of Disbursement		19047		C C00404236					
			011	Transaction ID : 11239319					
Candidate Name			Category/	Amount of Each Disbursement this Period					
Fitzpatrick, Michael, , , Office Sought: x House Disbur	sement For:	2022	Туре	500.00					
Senate	Primary								
State: PA District: 08	Other (spe		Memo Item						
Full Name (Last, First, Middle Initial)									
В.				Date of Disbursement					
Mailing Address	Mailing Address								
City		FEC Identification Number							
Purpose of Disbursement			· · · ·]	С					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
	sement For:		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Senate President	Primary Other (spe	General							
State: District:				Memo Item					
Full Name (Last, First, Middle Initial)				Date of Disbursement					
Mailing Address									
City	State	Zip Code		FEC Identification Number					
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Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
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Senate President	Other (spe	General ecify) ▼							
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SCHEDULE B (FEC Form 3X)		Use separate schedule(s)			IE NUMBER:	P	PAGE 551 OF 551					
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(ch	21		23 26	27					
Any information copied from such Reports and State or for commercial purposes, other than using the na					erson for the purp							
NAME OF COMMITTEE (In Full)												
Political Action Committee of the	Americar	n Associatior	n of C	Ortho	paedic Sur	geonsP/	AC of AAOS					
Full Name (Last, First, Middle Initial) A. Miller, Benjamin, James, , MD,MS	S,FAAO				Date of Dis	bursement	YYYYY					
Mailing Address 62 Sumac Ct					07	09	2021					
City	State IA	Zip Code			FEC Identif	ication Numbe	er					
Iowa City Purpose of Disbursement Refund of Contribution	IA	52246	01	10	C	ction ID : 109						
Candidate Name	e Catego Type						ement this Period					
Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ecify) ▼		•			1000.00 of Contribution					
State: District:		<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Memo	Item						
Full Name (Last, First, Middle Initial) B. Watson, Troy, S, , MD,FAAOS Mailing Address 75 Kittansett Loop	Watson, Troy, S, , MD, FAAOS											
City	City State Zip Code											
Henderson Purpose of Disbursement	NV	89052-6694	0,	10	C	Transaction ID : 11147958						
Candidate Name		Category/ Type				Amount of Each Disbursement this Period						
Office Sought: House Disburse Senate	ement For: Primary	General				p	250.00					
State: District:	Other (spe	ecify)			Memo	Item						
Full Name (Last, First, Middle Initial) C. Lin, Jason, Seitetsu, , MD, FAAO	S				Date of Dis	Date of Disbursement						
Mailing Address 3640 NW Goldfinch Drive					11 /	D D / 01	y y y y 2021					
City Corvallis	State OR	Zip Code 97330-3487			FEC Identif	ication Numbe	er					
Purpose of Disbursement Refund erroneous contribution	Purpose of Disbursement Refund erroneous contribution 010						52957					
Candidate Name	gory/ pe	Amount of	Amount of Each Disbursement this Period									
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ecify) ▼			300.00 Refund erroneous contribut Memo Item							
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