

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		27796.50
(b) Cash on Hand at Beginning of Reporting Period.....	28558.50	
(c) Total Receipts (from Line 19)	575.00	15018.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29133.50	42814.50
7. Total Disbursements (from Line 31).....	14033.00	27714.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	15100.50	15100.50
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. 06/2004)

Write or Type Committee Name

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Report Covering the Period: From: / / To: / /

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).....	575.00	15018.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	575.00	15018.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	575.00	15018.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	575.00	15018.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	575.00	15018.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	22500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5175.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5175.00
29. Other Disbursements	33.00	39.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14033.00	27714.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14033.00	27714.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	575.00	15018.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5175.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	575.00	9843.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

A. Edgar S. Carell
Full Name (Last, First, Middle Initial)

Mailing Address 340 Ridge Avenue

City Clarendon Hills State IL Zip Code 60514

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

Name of Employer Illinois Heart and Vascular Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.5669

Amount of Each Receipt this Period
75.00

Individual contribution to CAA from member physician

B. PAUL A FREIER MD
Full Name (Last, First, Middle Initial)

Mailing Address 6108 WOODCREEK CT

City BURR RIDGE State IL Zip Code 60521

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

Name of Employer ILLINOIS HEART AND VASCULAR Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.5664

Amount of Each Receipt this Period
75.00

Individual contribution by a CAA member physician

C. Cindy J Johnstone
Full Name (Last, First, Middle Initial)

Mailing Address 78 W. Concord St., Apt. 3

City Boston State MA Zip Code 02118

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

Name of Employer Illinois Heart and Vascular Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **37.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.5665

Amount of Each Receipt this Period
37.50

Individual Contribution from CAA member physician

SUBTOTAL of Receipts This Page (optional).....	187.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

A. Selvakumar Kunchithapatham MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1046 SEAN CIRCLE
 City DARIEN State IL Zip Code 60561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ILLINOIS HEART VASCULAR Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 08 / 06 / 2012
Transaction ID : SA11AI.5671
 Amount of Each Receipt this Period 100.00
 Individual contribution to CAA from Member physician

B. David M. Leder
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 W. Concord St., Apt. 3
 City Boston State MA Zip Code 02118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Illinois Heart and Vascular Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37.50

Date of Receipt 08 / 06 / 2012
Transaction ID : SA11AI.5667
 Amount of Each Receipt this Period 37.50
 Individual contribution to CAA from member Physician

C. GREGORY LEWIS MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 237 E. HICKORY
 City HINSDALE State IL Zip Code 60521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ILLINOIS HEART AND VASCULAR Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 37.50

Date of Receipt 08 / 06 / 2012
Transaction ID : SA11AI.5673
 Amount of Each Receipt this Period 37.50
 Individual contribution to CAA from member physician

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

A. NANCY L MUELLER MD
Full Name (Last, First, Middle Initial)

Mailing Address 904 COLONADE ROAD

City SHOREWOOD State IL Zip Code 60404

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

Name of Employer CARDIOVASCULAR ASSOCIATES Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.5676

Amount of Each Receipt this Period
 75.00

Individual contribution

B. RAYMOND RAPACZ MD
Full Name (Last, First, Middle Initial)

Mailing Address ONE HIDDEN LAKE DRIVE

City BURR RIDGE State IL Zip Code 60527

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

Name of Employer ILLINOIS HEART AND VASCULAR Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.5672

Amount of Each Receipt this Period
 100.00

Individual contribution to CAA from member physician

c. Mary E. Streck
Full Name (Last, First, Middle Initial)

Mailing Address 237 East Hickory Street

City Hinsdale State IL Zip Code 60521

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

Name of Employer Illinois Heart and Vascular Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 37.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2012

Transaction ID : SA11AI.5674

Amount of Each Receipt this Period
 37.50

Individual contribution to CAA from member physician

SUBTOTAL of Receipts This Page (optional).....	212.50
TOTAL This Period (last page this line number only).....	575.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Full Name (Last, First, Middle Initial)

A. BERKLEY FOR SENATE

Mailing Address 7437 S EASTERN AVE SUITE 427

City LAS VEGAS State NV Zip Code 89123

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2012

Transaction ID : SB23.5659

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CATHY MCMORRIS RODGERS FOR CONGRESS

Mailing Address BOX 137

City SPOKANE State WA Zip Code 99210

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

CATHY MCMORRIS RODGERS FOR CONGRESS

Office Sought: House
 Senate
 President
State: WA District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2012

Transaction ID : SB23.5631

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DIANE BLACK FOR CONGRESS

Mailing Address PO BOX 1437

City GALLATIN State TN Zip Code 37066

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2012

Transaction ID : SB23.5653

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Full Name (Last, First, Middle Initial)

A. EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2012

Mailing Address 25 E MAIN STREET
SUITE 200

Transaction ID : SB23.5639

City RICHMOND State VA Zip Code 23219

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to a federal PAC

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOE PITTS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2012

Mailing Address PO BOX 775

Transaction ID : SB23.5636

City Unionville State PA Zip Code 19375

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to federal Candidate

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 16

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN BARRASSO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2012

Mailing Address PO BOX 52008

Transaction ID : SB23.5643

City CASPER State WY Zip Code 82605

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to federal candidate

Category/ Type

Candidate Name

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN BARROW

Mailing Address PO BOX 8166

City SAVANNAH State GA Zip Code 31412

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

Office Sought: House
 Senate
 President
State: GA District: 12

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	2

Transaction ID : SB23.5657

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. GENE GREEN CONGRESSIONAL CAMPAIGN

Mailing Address PO BOX 16128

City HOUSTON State TX Zip Code 77222

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	2

Transaction ID : SB23.5644

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. LARSON FOR CONGRESS

Mailing Address PO BOX 479

City GLASTONBURY State CT Zip Code 06033

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	2

Transaction ID : SB23.5655

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Full Name (Last, First, Middle Initial)

A. LEE TERRY FOR CONGRESS

Mailing Address PO BOX 540098

City OMAHA State NE Zip Code 68154

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	2

Transaction ID : SB23.5641

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. MARTIN HEINRICH FOR SENATE

Mailing Address P.O. BOX 25763

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
Contribution to federal candidate

Candidate Name

MARTIN HEINRICH FOR SENATE

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	2

Transaction ID : SB23.5628

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. PASCHELL FOR CONGRESS

Mailing Address P.O. BOX 640

City TOTOWA State NJ Zip Code 07511

Purpose of Disbursement
Contribution to the federal candidate

Candidate Name

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	2

Transaction ID : SB23.5633

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDIOLOGY ADVOCACY ALLIANCE INC POLITICAL ACTION COMMITTEE (CAAPAC)

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR ENTERPRISE TRADE AND ECONOMIC GROWTH (PETE PAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2012

Mailing Address 7804 EVENING LANE

Transaction ID : SB23.5648

City ALEXANDRIA State VA Zip Code 22306

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to a federal PAC

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. THE CONGRESSMAN JOE BARTON COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2012

Mailing Address P.O. BOX 1444

Transaction ID : SB23.5649

City ENNIS State TX Zip Code 75120

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution to federal candidate

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 06

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

2000.00

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

14000.00
