Image# 15970702089 PAGE 1 / 111

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

		horized Committe			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	ng, type	12FE4M5	
American Society of Ar	esthesiologists Poli	tical Action Com	mittee		
ADDRESS (number and street)	1061 American Lane				
Check if different					
than previously reported. (ACC)	Schaumburg				60173
2. FEC IDENTIFICATION NU	MBER ▼ CI	ГУ▲		STATE 🛦	ZIP CODE ▲
C C00255752			N) OR	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	Report Due On:		May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		` '	Jun 20 (M6) Jul 20 (M7)		20 (M9) Dec 20 (M12) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q	1)	25 (M4)	741 20 (1417)		
July 15 Quarterly Report (Q2	PRE-Election	Primary (12F	_	General	
October 15 Quarterly Report (Q3	Report for the:	Convention (12C)	Special (128)
January 31 Year-End Report (YE	E) Election	on on	D D /	Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (300	à)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Election	on on	D D /	Y = Y = Y = Y	in the State of
5. Covering Period 04	01 2015	through	M M 04	30	2015
I certify that I have examined this	s Report and to the best of	f my knowledge and l	pelief it is tru	ue, correct and	d complete.
Type or Print Name of Treasurer	•				·
Signature of Treasurer Mr. Tr	nomas Conway	[Electronically	Filed]	Date 05	/ D D / Y Y Y Y Y Y 18 Y 18 2015
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the pers	son signing th	nis Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003)	Page 2
Write or Type Committee Name	
American Society of Anesthesiologists Political Action Committee	

2015 04 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 590980.74 January 1, 2015 (b) Cash on Hand at 580594.04 Beginning of Reporting Period..... 352639.73 80250.43 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 660844.47 943620.47 6(a) and 6(c) for Column B)..... 63591.38 346367.38 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 597253.09 597253.09 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Society of Anesthesiologists Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	55881.17	227484.48
(i) Itemized (use Schedule A)		7 / 7
(ii) Unitemized	24369.26	125155.25
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	80250.43	352639.73
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	80250.43	352639.73
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
. All Loans Received	0.00	0.00
	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made	7 7	7 7
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	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
(o) Total Transiere (add Te(a) and Te(b))	7	0.00
. Total Receipts (add Lines 11(d),	90250 42	352639.73
12, 13, 14, 15, 16, 17, and 18(c))▶	80250.43	332039.73
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	80250.43	352639.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: Allocated Federal (Non Federal)	Total Tills Teriod	Calendar Tear-10-Date
(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	0440.74	0547.00
Expenditures	2449.71	9517.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	2449.71	9517.36
2. Transfers to Affiliated/Other Party	2410.71	3017.00
Committees	0.00	0.00
3. Contributions to Federal Candidates/Committees		
and Other Political Committees	61000.00	336500.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
5. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
S. Lean Dangumente Made	0.00	0.00
S. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
3. Refunds of Contributions To:	7	
(a) Individuals/Persons Other Than Political Committees	141.67	183.34
<u> </u>		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Tatal Cantribution Defined		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	141.67	183.34
(add Lines 20(a), (b), and (c))		
9. Other Disbursements	0.00	166.68
	7	
D. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) III aviall Chara	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	7	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	7	
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))	63591.38	346367.38
_		
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	62504.20	346367.38
from Line 31)	63591.38	340307.38

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	80250.43	352639.73
4. Total Contribution Refunds (from Line 28(d))	141.67	183.34
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80108.76	352456.39
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2449.71	9517.36
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2449.71	9517.36

FOR LINE NUMBER: **PAGE** 6 Use separate schedule(s) (check only one) X 11a 11b 11c

OF

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) John P. Abenstein M.S.E.E., Date of Receipt Mailing Address 10978 Eleventh Ave N.W. 04 05 2015 City Zip Code State Transaction ID: C2979029 MN Oronoco 55960-2110 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Mayo Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Amr E. Abouleish M.D., M.B. Date of Receipt Mailing Address 4303 Evergreen Elm Ct 04 01 2015 City State Zip Code Transaction ID: C2970702 TX Houston 77059-3120 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Texas Medical Branch Professor Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Mohammad Al-Nouri M.D. Date of Receipt Mailing Address 3653 Thatcher Ct 04 24 2015 City Zip Code State Transaction ID: C2994061 MI Rochester Hills 48309-4532 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Port Huron Hospital Med. Staff Office/ Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE N	NUMBER:	PAGI	E 7	OF
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	2
,	13	14	15	16	з Г

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	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Society of Anesthe	esiologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Eric J. Albrecht M.D. Mailing Address 938 Hanover Ave City Norfolk FEC ID number of contributing federal political committee. Name of Employer Atlantic Anesthesia, Inc. Receipt For: Primary General Other (specify)	State Zip Code VA 23508 C Occupation anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 14 2015 Transaction ID : C2983644 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Shane C. Angus A.AC, M. Mailing Address 820 1st N.E. LL-150, Mail 25 City Washington FEC ID number of contributing federal political committee. Name of Employer Case Western Reserve University Receipt For: Primary General Other (specify)	State Zip Code DC 20002 C Occupation Assistant Program Director Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 30 2015 Transaction ID: C2993683 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Brett L. Arron M.D. Mailing Address 52 Lake St City Wakefield FEC ID number of contributing federal political committee. Name of Employer Providence Anesthesiologists, Inc. Receipt For: Primary General Other (specify)	State Zip Code RI 02879 C Occupation Physician Aggregate Year-to-Date ▼ 593.36	Date of Receipt 04 19 2015 Transaction ID : C2987448 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)	250.02
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Lee E. Arthur M.D. Date of Receipt Mailing Address 504 Medical Center Blvd 04 2015 City Zip Code State Transaction ID: C2983450 TX Conroe 77304-2808 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation North Houston Anesthesiologists Medical Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sana Ata M.D. Date of Receipt Mailing Address 41 Mall Rd 04 12 2015 City State Zip Code Transaction ID: C2983367 MA Burlington 01805-0001 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Lahey Hospital and Medical Center Medical Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 666.72 Other (specify) Full Name (Last, First, Middle Initial) c. Sana Ata M.D. Date of Receipt Mailing Address 41 Mall Rd 04 13 2015 City Zip Code State Transaction ID: C2983469 MA Burlington 01805-0001 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Lahey Hospital and Medical Center Medical Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 666.72 Other (specify) 191.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER:					PAGE	9	OF	111	
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16	,	17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
/ American Society of Anesthesi	iologists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Robert J. Atwater M.D.		Date of Receipt
Mailing Address 988 Rosebay Ct		04 18 _ 2015 _
City	State Zip Code	Transaction ID : C2987420
Tallahassee	FL 32312-1224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Sheridan Healthcare	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.02	
Full Name (Last, First, Middle Initial) 3. Jennifer P. Aunspaugh M.D.		Date of Receipt
Mailing Address 1 CHILDRENS WAY		04 04 2015
City	State Zip Code	Transaction ID : C2979001
LITTLE ROCK	AR 72202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Arkansas Childrens Hospital	Occupation Assistant Professor Pediatric Anes an	
Receipt For:		1
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. R Scott Ballard M.D.		Date of Receipt
Mailing Address 415 Verdi Ln		Date of Receipt 04 28 2015
City	State Zip Code	04 28 2015 Transaction ID : C2992710
Atlanta	GA 30350	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Northside Anesthesiology Consultants	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (antique)	1	433.34
SUBTOTAL of Receipts This Page (optional)	>	, , , , , ,
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 10 OF 111 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Shawn E. Banks M.D. Date of Receipt Mailing Address 601 NE 36th St Apt 3407 04 2015 29 City State Zip Code Transaction ID: C2992719 FL Miami 33137-3976 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Miami School of Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Anthony C. Beall. M.D. Date of Receipt Mailing Address 921 Pine Hollow Rd 04 05 2015 City State Zip Code Transaction ID: C2979056 SC Mt Pleasant 29464-3108 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Trident Anesthesia Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendy B. Binstock M.D. Date of Receipt Mailing Address 1122 W Montana St 05 2015 04 City State Zip Code Transaction ID: C2979031 IL Chicago 60614-2221 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation University of Chicago Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.72 Other (specify) 666.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Wendy B. Binstock M.D. Date of Receipt Mailing Address 1122 W Montana St 04 2015 City State Zip Code Transaction ID: C2983337 Chicago IL 60614-2221 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Chicago Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.72 Other (specify) Full Name (Last, First, Middle Initial) B. Jason A. Boehm D.O. Date of Receipt Mailing Address 4131 E White Oak Drive 04 21 2015 City State Zip Code Transaction ID: C2989294 MO Springfield 65809-2348 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Mercy Clinic Anesthesiology Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Steven D. Boggs M.D. Date of Receipt Mailing Address 1133 Midland Avenue 80 04 2015 3G City Zip Code State Transaction ID: C2981420 NY Bronxville 10708-6472 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation James J. Peters VA Medical Center Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Peter M. Bozeman M.D. Date of Receipt Mailing Address 7209 Quackenbush 04 2015 City Zip Code State Transaction ID: C2987200 Dexter MI 48130 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Ann Arbor Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Josue Brainin-Mattos M.D. Date of Receipt Mailing Address 7891 Mount Ranier Dr 04 02 2015 City State Zip Code Transaction ID: C2973159 FL Jacksonville 32256-2999 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Florida Anesthesia Associates anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Melinda K. Brown M.D. Date of Receipt Mailing Address 5209 W 124th Ter 30 04 2015 City Zip Code State Transaction ID: C2994128 KS Leawood 66209-3197 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1333.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Ronald S. Brown Jr., M.D. Date of Receipt Mailing Address 1 Mobile Infirmary Cir., 2nd Fl. 04 30 2015 City Zip Code State Transaction ID: C2993671 Mobile AL 36607-3522 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Services Mobile Alabama anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Kurt T. Budenbender D.O. Date of Receipt Mailing Address 1850 N. Central Ave Ste 1600 04 2015 11 City State Zip Code Transaction ID: C2983318 ΑZ Phoenix 85004 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Valley Anes. Consultants, LTD Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. James R. Burch M.D. Date of Receipt Mailing Address 1755 Kirby Pky., Suite #330 04 13 2015 City Zip Code State Transaction ID: C2983453 TN Memphis 38120-4398 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Medical Anesthesia Group anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

SCHEDOLL A (LECTOHII 3A	lle lle	e separate schedule(s)	FOR LINE NUMBER: PAGE 14 OF 111
ITEMIZED RECEIPTS	for De	each category of the tailed Summary Page	(check only one) X 11a
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthe	siologists Politic	cal Action Committ	ee
Full Name (Last, First, Middle Initial) A. Rebecca C. Burfeind M.D.			Date of Receipt
Mailing Address 8338 Fontana St	04-4-	r. O. d.	04 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Prairie Village		lip Code 66207	Transaction ID : C2983584 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer	Occupation		
Anesthesia Associates of Kansas City	Anesthesiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) B. Frederick W. Burgess M.D., Ph.D. Mailing Address 569 Fruit Hill Ave			Date of Receipt 04 04 04 02015
City North Providence		lip Code 12911	Transaction ID : C2979002 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.34
Name of Employer Providence VAMC	Occupation anesthesiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	333.36	
Full Name (Last, First, Middle Initial) C. Mark E Cannella M.D.			Date of Receipt
Mailing Address 165 Rosehill Dr W			04 14 2015
City		Cip Code	Transaction ID : C2983775
Tallahassee	FL 3	32312-9010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer	Occupation		
Anesthesiology Assoc of Tallahassee	Anesthesiologist		

2083.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

1000.00

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify) ▼

General

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) James D. Cantoni M.D. Date of Receipt Mailing Address 58 Great Oak Dr 04 2015 02 City Zip Code State Transaction ID: C2973160 OH Hudson 44236-2296 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Hudson Physicians Associates, Inc. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Carney M.D. Date of Receipt Mailing Address 534 Ridgeview Drive 04 04 2015 City State Zip Code Transaction ID: C2978995 PA Erie 16505 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation North American Partners in Anesthesia **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Debra L. Caroli M.D. Date of Receipt Mailing Address 4548 Burke St 2015 04 01 City State Zip Code Transaction ID: C2970908 FL Orlando 32814 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **LCAA** anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Shushovan Chakrabortty M.B.,B.S. Date of Receipt Mailing Address 3381 Chickering Lane 04 2015 24 City Zip Code State Transaction ID: C2994066 Bloomfield Hills MI 48302 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Lapeer Regional Medical Center Dept. o Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joshua C. Chance M.D. Date of Receipt Mailing Address 9 Ecurie Ct 04 13 2015 City State Zip Code Transaction ID: C2983484 AR Little Rock 72223-8917 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation univeristy of arkansas for medical sci physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Jiravud Chanvitayapongs M.D. Date of Receipt Mailing Address 7737 E Purple Desert Pass 04 16 2015 City Zip Code State Transaction ID: C2985131 ΑZ Tucson 85715-3656 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Old Pueblo Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Samuel A. Cherry III, M.D. Date of Receipt Mailing Address 149 Lucerne Blvd 04 2015 City Zip Code State Transaction ID: C2987427 Birmingham AL 35209-6657 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Birmingham VA Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey K. Clark M.D. Date of Receipt Mailing Address 1835 Lakeview Ct 04 24 2015 City State Zip Code Transaction ID: C2994057 Bloomfield Hills MI 48304-2440 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Detroit Medical Center ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Craig M. Combs M.D. Date of Receipt Mailing Address 1924 Alcoa Hwy # U109 2015 04 26 City Zip Code State Transaction ID: C2991155 TN Knoxville 37920-1511 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Univ of TN Medical Center Anesm Dept Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1333.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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18 OF 111 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Lebron Cooper M.D. Date of Receipt Mailing Address 444 W. Willis St #514 04 30 2015 City Zip Code State Transaction ID: C2993682 Detroit MI 48201 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Henry Ford Hospital Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. W. Eric Cox M.D. Date of Receipt Mailing Address 1924 Alcoa Highway UT Medical Center, Dept. of Anesth 04 13 2015 City Zip Code State Transaction ID: C2983464 TN Knoxville 37920 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Robert M. Craft M.D. Date of Receipt Mailing Address 1924 Alcoa Hwy # U109 2015 04 23 Dept. of Anesthesiology City Zip Code State Transaction ID: C2990374 TN Knoxville 37920 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation University Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) 208.35 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Robert M. Craft M.D. Date of Receipt Mailing Address 1924 Alcoa Hwy # U109 Dept. of Anesthesiology 04 2015 City Zip Code State Transaction ID: C2990454 TN Knoxville 37920 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation University Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) Full Name (Last, First, Middle Initial) B. David K. Crumley M.D. Date of Receipt Mailing Address 1550 Boyson Rd 04 02 2015 City State Zip Code Transaction ID: C2983559 IΑ Hiawatha 52233-2362 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Linn County Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Katherine T. Cundiff M.D. Date of Receipt Mailing Address 9733 Overbrook Rd 2015 04 22 City State Zip Code Transaction ID: C2990177 KS Leawood 66206-2309 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

791.67

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	nd Statements may not be sold or used by any pers g the name and address of any political committee t			
NAME OF COMMITTEE (In Full) American Society of Anesthe	esiologists Political Action Committee	e		
Full Name (Last, First, Middle Initial) Jay D. Cunningham D.O. Mailing Address 18808 Saddle River Dr		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y		
City Edmond	State Zip Code OK 73012-4104			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00		
Name of Employer Affiliated Anesthesiologist Inc Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Michael Danic M.D. Mailing Address 14726 Fox	·	Date of Receipt		
City Redford FEC ID number of contributing federal political committee.	State Zip Code MI 48239-3163	04 18 2015 Transaction ID : C2987423 Amount of Each Receipt this Period 83.34		
Name of Employer American Anesthesiology Receipt For: Primary General Other (specify) ▼	Occupation Physician Anesthesiologist Aggregate Year-to-Date ▼ 333.36			
Full Name (Last, First, Middle Initial) Victor Davila M.D. Mailing Address 4400 Kipling Rd City	State Zip Code	Date of Receipt 04 01 2015 Transaction ID: C2970896		
Columbus FEC ID number of contributing federal political committee.	OH 43220	Amount of Each Receipt this Period 83.34		
Name of Employer Ohio State University Receipt For: Primary General Other (specify) ▼	Occupation Assistant Professor Aggregate Year-to-Date ▼ 333.36			
SUBTOTAL of Receipts This Page (optional	I)	1166.68		
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) Kjersti K. Deckert M.D.		Date of Receipt
Mailing Address 2155 S 116th Cir		04 26 2015
City Walton	State Zip Code NE 68461-2026	Transaction ID : C2991129 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer Associated Anesthesiologists, PC Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiologists Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) Allen Dennis M.D. Mailing Address 44057 Hellet and Dr.		Date of Receipt
Mailing Address 14857 Holly Leaf Dr Suite 201 City	04 09 2015 Transaction ID : C2982306	
Frisco	TX 75035-7451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Advanced pain care	Occupation Pain physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	
Full Name (Last, First, Middle Initial) C. Allen Dennis M.D.		Date of Receipt
Mailing Address 14857 Holly Leaf Dr Suite 201		04 24 2015
City Frisco	State Zip Code TX 75035-7451	Transaction ID : C2990688 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Advanced pain care Receipt For:	Pain physician	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	
SUBTOTAL of Receipts This Page (optional).		250.02
TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Laura I. Dew M.D. Date of Receipt Mailing Address 3721 Robinhood Street 04 04 2015 City State Zip Code Transaction ID: C2979012 TX Houston 77005 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Greater Houston Anesthesiology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. John F. Di Capua M.D. Date of Receipt Mailing Address 74 Byram Ridge Road 04 20 2015 City State Zip Code Transaction ID: C2987480 NY Armonk 10504-1210 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation North Shore University Hospital Anesth Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Christian Diez M.D. Date of Receipt Mailing Address 7915 SW 55 Avenue 04 12 2015 City State Zip Code Transaction ID: C2983370 FL Miami 33143 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation University of Miami Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 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 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Gary J. DILisio M.D. Date of Receipt Mailing Address 324 Gannett Dr Ste 200 04 02 2015 City Zip Code State Transaction ID: C2973158 ME South Portland 04106-3266 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Spectrum Medical Management Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Deanna M. Dorantes M.D. Date of Receipt Mailing Address 47559 Aberdeen Dr. 47559 Aberdeen Dr. 04 24 2015 City State Zip Code Transaction ID: C2994053 MI Novi 48374 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Detroit Medical Center ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Donald D. Downs M.D. Date of Receipt Mailing Address 7351 Oliver Woods Dr SE 04 28 2015 City Zip Code State Transaction ID: C2991793 MI **Grand Rapids** 49546-9707 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Physician Anesthesiologist Anesthesia Practice Consultants Receipt For: Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) 375.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	;
Full Name (Last, First, Middle Initial) Nichole M. Doyle M.D. Mailing Address 5820 Darnell St City Shawnee FEC ID number of contributing federal political committee. Name of Employer Anesthesiology Associates of Kansas Ci Receipt For: Primary General Other (specify)	State Zip Code KS 66216-4501 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / 28 2015 Transaction ID : C2992711 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Gregory Dwight D.O. Mailing Address 37103 Weymouth Dr City Livonia FEC ID number of contributing federal political committee. Name of Employer Anesthesia Associates of Ann Arbor Receipt For: Primary General Other (specify)	State Zip Code MI 48152 C Occupation physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z
Full Name (Last, First, Middle Initial) Jonathan A. Eash M.D. Mailing Address 3101 Robinhood Ln City South Bend FEC ID number of contributing federal political committee. Name of Employer Michiana Anesthesia Care Receipt For: Primary General Other (specify)	State Zip Code IN 46614-2113 C Occupation Physician Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 25 2015 Transaction ID : C2991099 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)	<u> </u>	833.34
TOTAL This Period (last page this line number	only)	7

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NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Matthew C. Edwards M.D. Mailing Address 14601 Fairway St		Date of Receipt
Mailing Address 14001 Fallway St		04 12 2015
City	State Zip Code	Transaction ID : C2983395
Overland Park	KS 66224-4614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	_
Anesthesia Associates of Kansas City	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Kenneth Elmassian D.O.		Date of Receipt
Mailing Address 2399 Pine Hollow Dr.	7:0.1	04 01 2015
City East Langing	State Zip Code MI 48823	Transaction ID : C2970704
East Lansing	10023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Capital Area Anesthesia, P.C.	Physician Anesthesiologist	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) C. Lawrence Epstein M.D.		Date of Receipt
Mailing Address 1 Gustave L Levy Pl Anes. Department of Anesthesiology		04 03 2015
City Department of Ariestnesion	State Zip Code	Transaction ID : C2978323
New York	NY 10029-6504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Mount Sinai School of Medicine	Physician Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	333.36	
SUBTOTAL of Receipts This Page (optional).		1166.68
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NAME OF COMMITTEE (In Full) American Society of Anesthe	esiologists Political Action Committee	е
Full Name (Last, First, Middle Initial) Gregory L. Erb M.D. Mailing Address 14905 W 60th St City Shawnee FEC ID number of contributing federal political committee. Name of Employer Midwest Anesthesia Associates Receipt For: Primary General Other (specify)	State Zip Code KS 66216 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt 04 30 2015 Transaction ID: C2993827 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Luis Esparza M.D. Mailing Address 2810 N Swan Rd Ste 100 City Tucson FEC ID number of contributing federal political committee. Name of Employer OLD PUEBLO ANESTH Receipt For: Primary General Other (specify)	State Zip Code AZ 85712-6300 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 340.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Monique Espinosa M.D. Mailing Address PO Box 16370 Anes. Dept. City Miami FEC ID number of contributing federal political committee. Name of Employer University of Miami Receipt For: Primary Other (specify) General Other (specify)	State Zip Code FL 33101 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 28 2015 Transaction ID : C2991775 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional	I) >	668.34
TOTAL This Period (last page this line num	iber only)	

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for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) James Evans M.D. Date of Receipt Mailing Address 2302 Kingsmill Cir 04 2015 02 City State Zip Code Transaction ID: C2971491 TX Tyler 75703-5819 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Trinity Clinic Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Evans M.D. Date of Receipt Mailing Address 2302 Kingsmill Cir 04 02 2015 City State Zip Code Transaction ID: C2973156 TX Tyler 75703-5819 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Trinity Clinic Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. William Feaster M.D. Date of Receipt Mailing Address 507 Ocean Avenue 04 27 2015 City State Zip Code Transaction ID: C2991181 CA Seal Beah 90740 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Childrens Hospital Orange County anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 183.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Richard M. Flowerdew M.D. Mailing Address 38 Hedgerow Dr City Falmouth FEC ID number of contributing federal political committee. Name of Employer Spectrum Medical Group Receipt For: Primary General Other (specify)	State Zip Code ME 04105-1407 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt O4 11 2015 Transaction ID: C2983332 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Michael R. Flynn M.D. Mailing Address 6808 Stone Mill Dr City Knoxville FEC ID number of contributing federal political committee. Name of Employer University Anesthesiologists Receipt For: Primary General Other (specify)	State Zip Code TN 37919-7496 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 416.70	Date of Receipt 04 12 2015 Transaction ID : C2983387 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) C. Charles J. Fox M.D. Mailing Address 1501 King Hwy LSU Health City shreveport FEC ID number of contributing federal political committee. Name of Employer Louisiana State University Health Scie Receipt For: Primary General Other (specify)	State Zip Code LA 71130 C Occupation Professor and Chair Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 24 2015 Transaction ID : C2990686 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)		250.02
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for each category of the 12 Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Samir F. Fuleihan M.D. Date of Receipt Mailing Address Harper Hosp., Anes. Dept. 3990 John R 04 2015 24 City Zip Code State Transaction ID: C2994049 Detroit MI 48201 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation AAKC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeff L. Fuqua M.D. Date of Receipt Mailing Address 12419 Mallard Bay Dr. 04 02 2015 City State Zip Code Transaction ID: C2973157 TN Knoxville 37922 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation American Anesthesiology of Tennessee Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeff L. Fugua M.D. Date of Receipt Mailing Address 12419 Mallard Bay Dr. 04 28 2015 City State Zip Code Transaction ID: C2991789 TN Knoxville 37922 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation American Anesthesiology of Tennessee Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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 person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Wisam M. George D.O. Mailing Address 4775 Driftwood Dr		Date of Receipt
		04 24 2015
City	State Zip Code	Transaction ID : C2994071
Commerce Township	MI 48382-1327	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Patrick Giam M.D.		Date of Receipt
Mailing Address 2411 Fountain View, Suite 200		M = M / D = D / Y = Y = Y = Y
2411 Fountain View, Suite 200 City	04 10 2015 Transaction ID : C2982639	
Houston	State Zip Code TX 77057-4817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
US Anesthesia Partners	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) Bonny Gillis M.D.		Date of Receipt
Mailing Address 7703 Floyd Curl Dr Dept of Anes	Charles Tim Contin	04 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City San Antonio	State Zip Code TX 78229-3901	Transaction ID : C2978303
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Univ of Texas Health Sciences Center	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)	>	583.34
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 32 OF (check only one) X 11a 11b 12 11c

111 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) James Glenski M.D. Date of Receipt Mailing Address 8717 West 110th Street, Suite 600 04 2015 29 City Zip Code State Transaction ID: C2992754 KS Overland Park 66210-2144 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation President and CEO Anesthesia Assoc. of Kansas City, P.C. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Marilyn J. Goldstein M.D. Date of Receipt Mailing Address 412 Ridgepoint Court 04 28 2015 City State Zip Code Transaction ID: C3002130 TN Piney Flats 37686 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Bristol Anesthesia Services** Physician- Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Michael C. Gosney M.D. Date of Receipt Mailing Address 108 Chase Dr 2015 04 07 City State Zip Code Transaction ID: C2980852 AL Muscle Shoals 35661 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Anesthesia Medical Consultants, LLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 1166.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 33 OF 111 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Jeffrey S. Graham M.D. Mailing Address 6320 Lake Vista Dr City Tuscaloosa FEC ID number of contributing federal political committee. Name of Employer Anesthesia and Pain Mgnt Consult of T Receipt For: Primary General Other (specify)	State Zip Code AL 35406-2971 C Occupation Anesthesiologist Aggregate Year-to-Date ▼	Date of Receipt O4 30 2015 Transaction ID: C2993839 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Ryan J. Grindstaff M.D., Ph.D Mailing Address 3300 W 129th St City Leawood FEC ID number of contributing federal political committee. Name of Employer Anestheisa Associates of Kansas City Receipt For: Primary General Other (specify)	State Zip Code KS 66209-1771 C Occupation Anesthesiologist Aggregate Year-to-Date ▼	Date of Receipt 04 30 2015 Transaction ID : C2993823 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Halim D. Haber M.D. Mailing Address 19 Nantucket Dr City Bloomfield Hills FEC ID number of contributing federal political committee. Name of Employer Anesthesia Services PC Receipt For: Primary General Other (specify)	State Zip Code MI 48304-3342 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt 04 24 2015 Transaction ID: C2994076 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	•	1750.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 34 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Douglas W. Hagen M.D. Date of Receipt Mailing Address 9027 W 114th St 04 01 2015 City Zip Code State Transaction ID: C2970900 KS Overland Park 66210-1764 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) B. Douglas W. Hagen M.D. Date of Receipt Mailing Address 9027 W 114th St 04 29 2015 City State Zip Code Transaction ID: C2993126 KS Overland Park 66210-1764 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) Full Name (Last, First, Middle Initial) c. Aaron Hammond D.O. Date of Receipt Mailing Address 3390 N. Campbell Ave., Ste. 110 04 05 2015 City State Zip Code Transaction ID: C2979041 ΑZ Tucson 85719 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Southern Arizona Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Ron L. Harter M.D.		Date of Receipt
Mailing Address 7825 Holiston Ct		04 06 2015
City	State Zip Code	Transaction ID : C2979070
Dublin	OH 43016-8659	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Ohio State University Medical Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. 1991-09ato Tour to Date ▼	
Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) Kaley B Harvey A.AC		Date of Receipt
Mailing Address 650 Poinsettia Rd		04 16 2015
City	State Zip Code	Transaction ID : C2985136
Belleair	FL 33756-1525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Kaley Harvey	Anesthesiologist Assistant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) Steven Hattamer M.D.	•	Date of Receipt
Mailing Address 8 Prospect St		04 01 2015
City	State Zip Code	Transaction ID : C2970711
Nashua	NH 03060-3925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Nashua Anesthesia Partners	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggregate rear-to-Date ▼	
Other (specify) ▼	333.36	
SUBTOTAL of Receipts This Page (optional)		250.02
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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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) David L. Hepner M.D. Date of Receipt Mailing Address 75 Francis St # L1 **Department of Anesthesiology** 04 2015 City Zip Code State Transaction ID: C2990380 **Boston** MA 02115 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Brigham and Womens Hosp - Harvard Med Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew Herlich M.D. Date of Receipt Mailing Address 116 Haverford Cir 04 10 2015 City State Zip Code Transaction ID: C2982644 Pittsburgh PA 15228-2380 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **UPMC Mercy** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) c. Linda B. Hertzberg M.D. Date of Receipt Mailing Address 6622 N. Forkner Ave. 2015 04 11 Zip Code City State Transaction ID: C2983328 CA Fresno 93711 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Linda B Hertzberg MD Inc. anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify)

250.02

SUBTOTAL of Receipts This Page (optional).....

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

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for each category of the 12 Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) A Blake Blake Hillenbrand D.O. Date of Receipt Mailing Address 651 Maxwell Ave 04 2015 25 City Zip Code State Transaction ID: C2991097 CO Boulder 80304-3940 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Boulder Valley Anesthesiology** anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Douglas A. Hof M.D. Date of Receipt Mailing Address 1755 Kirby Pkwy Ste 330 04 13 2015 City State Zip Code Transaction ID: C2983461 TN Memphis 38120-4398 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Medical anesthesia group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy W. Houseman M.D. Date of Receipt Mailing Address PO Box 1025 04 03 2015 Eastern Shore Anesthesia City Zip Code State Transaction ID: C2977441 ΑL Fairhope 36533-1025 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Eastern Shore Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 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 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Jonathan R. Hughes M.D. Date of Receipt Mailing Address 350 Blountville Hwy Ste 207 04 2015 City Zip Code State Transaction ID: C2982579 TN Bristol 37620-1671 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Bristol Anesthesia Services** Anesthesiologist-Cardiothoracic Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Barbara J. Hurlbert M.D. Date of Receipt Mailing Address 9223 Davenport St. 04 06 2015 City State Zip Code Transaction ID: C2980035 NE Omaha 68114 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of Nebraska Medical Center anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Impastato M.D. Date of Receipt Mailing Address 19 Barrett Hill Rd. 04 29 2015 Zip Code State Transaction ID: C2992722 NY Hopewell Junction 12533 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Vassar Brothers Hospital Anes. Dept. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

		PAGE	39 OF	111
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Detailed Summary Page	X 11a 11b	11c	12	_
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	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) Jeffrey S. Jacobs M.D. Mailing Address 11041 Pine Lodge Trl		Date of Receipt
City Davie	State Zip Code FL 33328-7317	04 11 2015 Transaction ID : C2983334 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Cleveland Clinic Florida Receipt For: Primary General Other (specify) ▼	Occupation Physician Anesthesiologist Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) Aliraza G. Jaffer M.D. Mailing Address 5070 Brookdale Road		Date of Receipt M M M / D D D / Y D Y D Y D Y D Y D Y D Y D Y
City Bloomfield Hills	State Zip Code MI 48304	Transaction ID : C2983336 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer American Anesthesiology of Michigan	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) C. Cynthia L. Jenson M.D.		Date of Receipt
Mailing Address 434 Main St City	State Zip Code	04 23 2015
Waterville	ME 04901	Transaction ID : C2990379 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer	Occupation	
Anesthesia Associates of Lewiston Receipt For: □ Primary □ General Other (specify) ▼	Anesthesiologist Aggregate Year-to-Date ▼ 417.02	
SUBTOTAL of Receipts This Page (optional)	>	250.02
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)													

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	<u> </u>	ogists Political Action Committee							
١.	Full Name (Last, First, Middle Initial) Quinn L. Johnson M.D. Mailing Address 5000 Innsbruck Way		Date of Receipt						
	City Columbia	State Zip Code MO 65201-5276	Transaction ID : C2994480 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	1000.00						
	Name of Employer University of Missiouri	Occupation Anesthesiologist							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00							
3.	Full Name (Last, First, Middle Initial) Zachary S. Jones M.D. Mailing Address 6314 Eden Valley Dr		Date of Receipt						
	City Frisco	State Zip Code TX 75034-1129	04 02 2015 Transaction ID : C2973164 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	83.34						
	Name of Employer Metropolitan Aensthesia Receipt For:	Occupation Anesthesiologist							
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36							
).	Full Name (Last, First, Middle Initial) Jeffrey T. Joyce M.D.		Date of Receipt						
	Mailing Address 4940 W 132nd Ter	Chata To Carlo	04 30 2015						
	City Leawood	State Zip Code KS 66209-3460	Transaction ID : C2994124 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C	1000.00						
	Name of Employer Associated Anesthesiologists of Kansas	Occupation Anesthesiologist							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00							
s	UBTOTAL of Receipts This Page (optional)	>	2083.34						
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for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Nabil M. Kadi M.D. Date of Receipt Mailing Address 49982 Ash Ct 04 2015 24 City Zip Code State Transaction ID: C2994062 Plymouth MI 48170-6380 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation AAKC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca E. Kadish M.D. Date of Receipt Mailing Address 8 Hillside Dr. 04 07 2015 City State Zip Code Transaction ID: C2981403 NH Hollis 03049 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Dartmouth-Hitchcock Clinic Manchester Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jessica Kenaston M.D. Date of Receipt Mailing Address 6 Alden Rd 04 18 2015 City Zip Code State Transaction ID: C2987422 NY Poughkeepsie 12603-4002 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation North American Partners in Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 583.34 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 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Scott Kercheville M.D. Date of Receipt Mailing Address 14 Eton Green Circle 04 2015 City State Zip Code Transaction ID: C2983330 TX 78257 San Antonio Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **UTHSCSA** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. James Kerr III, M.D. Date of Receipt Mailing Address 2165 Herschel St 04 15 2015 City State Zip Code Transaction ID: C2984061 FL Jacksonville 32204 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation North Florida Anesthesia Consultants P Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Georgina O. Kesterson M.D. Date of Receipt Mailing Address 5169 Rowen Oak Rd. 04 13 2015 Zip Code City State Transaction ID: C2983478 TN Collierville 38017 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Medical anesthesia group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 208.35 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page	X 1	1a	11b		11c	12		
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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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Georgina O. Kesterson M.D. Date of Receipt Mailing Address 5169 Rowen Oak Rd. 04 2015 29 City Zip Code State Transaction ID: C2992717 TN Collierville 38017 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Medical anesthesia group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) **B.** Matthew Kidwell M.D. Date of Receipt Mailing Address 707 Ground Plum Circle 04 30 2015 City State Zip Code Transaction ID: C2993664 IΑ Solon 52333 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Linn County Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Edward N. Kim M.D. Date of Receipt Mailing Address 2967 Warner Dr. 2015 04 24 City Zip Code State Transaction ID: C2994064 MI West Bloomfield 48324-2450 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** ANESTHESIA SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 375.01 SUBTOTAL of Receipts This Page (optional).....

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or for commercial purposes, other the	han using the name and a	address of any political committee	e to solicit co	ntributions fro	om suc	h committe	ee.	
NAME OF COMMITTEE (In Full)								
American Society of A	nesthesiologists P	olitical Action Committ	ee					
Full Name (Last, First, Middle Ini	itial)							
Mark D. Kline M.D.			Date o	f Receipt				
Mailing Address 345 Woodland D)r., S.E.		04	14	/ Y	2015	Y	
City	State	Zip Code		saction ID : 0	29903			
Cedar Rapids	IA	52403	Amoun	t of Each Re	ceipt th	nis Period		
FEC ID number of contributing	С					1000.	.00	
federal political committee.	U			7	- 1			
Name of Employer	Occupation	1						
Linn County Anesthesiologists	anesthesio	logist						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		1000.00	1					
Curior (openity)			4					
Full Name (Last, First, Middle Ini								
B. Stephania G. Knight M.D.			Date o	f Receipt				
Mailing Address 4016 W 90th St			M = M		/ Y	2045	Υ	
City	State	Zip Code	U O4	27 saction ID : C	200111	2015	_	
Sioux Falls	SD	57108-6207		t of Each Re				
FEC ID number of contributing federal political committee.	С			7		41.	67	
Name of Employer Anestesia Physicians, LTD	Occupation Physician	ו						
Receipt For:		Year-to-Date ▼						
Primary General	Aggregate	Total to Date V	1					
Other (specify) ▼		208.35	Ш					
Full Name (Last, First, Middle Ini	itial)		Date o	f Receipt				
Mailing Address 541 E Erie St Ur	nit 404		M = M	/ D D	/ Y	Y . Y .	Y	
City	State	Zip Code	U4 Trans	11 saction ID : 0	20833	2015	_	
Milwaukee	WI	53202-6237		it of Each Re				
FEC ID number of contributing								
federal political committee.	C					83.	.34	
Name of Employer	Occupation	1						
Aurora Medical Group	Anesthesio	ologist						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General	00.0	000.00	1					
Other (specify) ▼		333.36	1					
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesi	iologists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Joseph Koveleskie M.D.		Date of Receipt
Mailing Address 5500 Prytania St #435		04 04 2015
City	State Zip Code LA 70115-4237	Transaction ID : C2979003
New Orleans FEC ID number of contributing federal political committee.	C 70115-4237	Amount of Each Receipt this Period 83.34
Name of Employer Ochsner Medical Center Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Anesthesiologist Aggregate Year-to-Date ▼ 666.72	-
Full Name (Last, First, Middle Initial) Joseph Koveleskie M.D. Mailing Address 5500 Prytania St #435		Date of Receipt
City	State Zip Code	04 05 2015 Transaction ID : C2979032
New Orleans	LA 70115-4237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Ochsner Medical Center	Occupation Physician Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.72	
Full Name (Last, First, Middle Initial) C. Tom Krejcie M.D.		Date of Receipt
Mailing Address Tarry Bldg. 4-727 300 East Superior Street		04 06 2015
City CHICAGO	State Zip Code IL 60611-3010	Transaction ID : C2980049 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Northwestern University	Anesthesiologist and Professor	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	416.68
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 46 OF (check only one) X 11a 11b 11c 12

111 Use separate schedule(s) for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) David M. Krhovsky M.D. Date of Receipt Mailing Address 2248 Shawnee Dr SE 04 06 2015 City Zip Code State Transaction ID: C2979072 **Grand Rapids** MI 49506-5335 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Practice Consultants, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Catherine M. Kuhn M.D. Date of Receipt Mailing Address 14 Kendall Drive 04 2015 11 City State Zip Code Transaction ID: C2983322 Chapel Hill NC 27517-5644 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Duke University Department of Anesthes** Associate Professor of Anesthsiology R Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. John E. La Gorio M.D. Date of Receipt Mailing Address 1543 Forest Park Rd 04 01 2015 City Zip Code State Transaction ID: C2970898 MI Norton Shores 49441-4642 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Lakeshore Anesthesia Services physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 47 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Timothy R. Lair M.D. Date of Receipt Mailing Address 3604 W 153rd St 04 2015 City State Zip Code Transaction ID: C2982630 KS Leawood 66224 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation MWA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Steven N. Landau M.D. Date of Receipt Mailing Address 2443 Dundee Dr 04 30 2015 City State Zip Code Transaction ID: C2993668 MI Ann Arbor 48103-6022 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Associates of Ann Arbor, PC Physican Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Patrick Lau M.D. Date of Receipt Mailing Address 4345 W Bryn Mawr Ave 2015 04 01 City State Zip Code Transaction ID: C2970697 IL Chicago 60646-5993 Amount of Each Receipt this Period FEC ID number of contributing 220.00 С federal political committee. Name of Employer Occupation SELF EMPLOYED **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 1303.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) 17

FOR LINE NUMBER: PAGE 48 OF 111

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check onl	y one)	11c	12	17					
Any information copied from such Reports a or for commercial purposes, other than using			erson for the	purpose of s		g contribu						
NAME OF COMMITTEE (In Full) American Society of Anesthe	esiologists P	olitical Action Committe	ee									
Full Name (Last, First, Middle Initial) Hector O. Laurel M.D. Mailing Address 2317 Woodcliff Rd SE				f Receipt		V	· ·					
City	State	Zip Code	04 Trans	01	297088	2015 83						
Huntsville	AL	35801-1471	Amoun	t of Each Re	ceipt th	nis Perior	d					
FEC ID number of contributing federal political committee.	C				-	-	0.00					
Name of Employer	Occupation	1										
Comprehensive Anesthesia Services	Anesthesio	logist										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00										
Full Name (Last, First, Middle Initial) B. Laura H. Leduc M.D.	<u> </u>		Date o	f Receipt								
Mailing Address 58 North St	04 13 2015											
City						Transaction ID : C2983448						
Delmar	NY	12054-1018	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C				- 7	83	3.34					
Name of Employer Albany Medical Center Anesthesia	Occupation Medical Do											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36										
Full Name (Last, First, Middle Initial) C. Maxine M. Lee M.D.			Date o	f Receipt								
Mailing Address 5432 Woodchuck Ln.			04		/ Y	2015	- Y					
City Roanoke	State VA	Zip Code 24018		saction ID : 0 t of Each Re			d					
FEC ID number of contributing federal political committee.	C					8	3.34					
Name of Employer	Occupation	1										
Anesthesiology Consultants of Virginia	Anesthesio	logist										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36										
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	,				7	666	6.68					

FOR LINE NUMBER: PAGE 49 OF (check only one) X 11a 11b 12 11c

111 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Marc L. Leib M.D. Date of Receipt Mailing Address PO Box 44527 04 01 2015 City Zip Code State Transaction ID: C2970703 Phoenix ΑZ 85064-4527 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation self-employed Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Michael C. Lewis M.D. Date of Receipt Mailing Address 655 W 8th St Professor Chair Anesthesiology 04 01 2015 City State Zip Code Transaction ID: C2970903 FL Jacksonville 32209-6511 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Florida Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Kristen L. Lienhart M.D. Date of Receipt Mailing Address 4301 W Markham St Lot 515 04 12 2015 City State Zip Code Transaction ID: C2983371 AR Little Rock 72205-7101 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation University of Arkansas for Medical Sci Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER:					PAGE		50	OF	111	
	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
angle American Society of Anesthesi	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Joe Z. Liu M.D.		Date of Receipt
Mailing Address 3456 Balfour Dr		04 24 2015
City	State Zip Code	Transaction ID : C2994063
Troy	MI 48084-1400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Anesthesia Service, PC	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Asa C. Lockhart M.D.		Date of Receipt
Mailing Address 2106 Kennebunk Ln.		04 10 2015
City	State Zip Code	Transaction ID : C2982643
Tyler	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer	Occupation	
East Texas Anesthesiology Assc	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	
Full Name (Last, First, Middle Initial) C. Nancy L. Loeffler M.D.		Date of Receipt
Mailing Address 3726 Lakeview Dr.		04 19 _ 2015 _
City	State Zip Code	Transaction ID : C2987439
Tallahassee	FL 32310-6348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Anesthesiology Assoc. of Tallahassee	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)	>	1333.34
TOTAL This Period (last page this line number	r only)	

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for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Michael A. Long M.D. Date of Receipt Mailing Address 3941 Foxfire Ln 04 30 2015 City Zip Code State Transaction ID: C2993662 TN Kingsport 37664-4409 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Bristol Anesthesia Services** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Mandabach M.D. Date of Receipt Mailing Address Dept of Anesthesiology 619 S. 19th St., JT845 04 01 2015 City State Zip Code Transaction ID: C2970906 ΑL Birmingham 35249-0001 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **UAB Department of Anesthesiolog** physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Kurt W. Markgraf M.D. Date of Receipt Mailing Address 3663 McKinley Ave 80 04 2015 Zip Code City State Transaction ID: C2981413 FL Fort Myers 33901 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Medical Anesthesia and Pain Management Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 52 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Wayne K. Marshall M.D. Date of Receipt Mailing Address 691 Olde Ventura Farm Rd 04 2015 City Zip Code State Transaction ID: C2987463 PΑ 17036-8501 Hummelstown Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Riverside Anesthesia Associates, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Timothy Martin M.D. Date of Receipt Mailing Address Arkansas Childrens Hospital #1 Childrens Way, S-203 04 04 2015 City State Zip Code Transaction ID: C2979013 AR Little Rock 72202-3591 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Arkansas for Medical Sci physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) c. Donald M. Mathews M.D. Date of Receipt Mailing Address 40 College St., #501 04 25 2015 City Zip Code State Transaction ID: C2991109 Burlington VT 05401 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation University of Vermont Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) 666.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

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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 t			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists P	olitical Action Committ	ee
Full Name (Last, First, Middle Initial) Fredric J. Matlin M.D. Mailing Address 23 Lodge Ln City Miller Place FEC ID number of contributing federal political committee. Name of Employer Long Island Anesthesia Physicians, LLP Receipt For: Primary General	State NY C Occupation ANESTHES Aggregate		Date of Receipt 04 12 2015 Transaction ID : C2983380 Amount of Each Receipt this Period 83.34
Other (specify) Full Name (Last, First, Middle Initial)		333.36	
B. Eric M. May M.D. Mailing Address 20810 W 81st Pl	Chaha	7:a Orde	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lenexa	State KS	Zip Code 66220-8227	Transaction ID : C2991108 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.34
Name of Employer Saint Lukes Hospital of Kansas City	Occupation anesthesiological		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) Philip J. McArdle M.B.,B.Ch.			Date of Receipt
Mailing Address 3746 Dunbarton Dr			04 22 _ 2015 _
City Mountain Brook	State AL	Zip Code 35223-2706	Transaction ID : C2989767 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.34
Name of Employer	Occupation		
UAB Anesthesiology	Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.36	
SUBTOTAL of Receipts This Page (optional)	,		250.02
TOTAL This Period (last page this line number			

FOR LINE NUMBER: PAGE 54 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Brian A. McConnell M.D. Date of Receipt Mailing Address 3300 Gallows Rd. **Department of Anesthesiology** 04 2015 City Zip Code State Transaction ID: C2983396 Falls Church VA 22042 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Mednax Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew M. McCord M.D. Date of Receipt Mailing Address 5400 Timber Bend Dr. 04 24 2015 City State Zip Code Transaction ID: C2990692 MI **Brighton** 48116 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation St. Joseph Mercy Health System Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Joel E. McCreary D.O. Date of Receipt Mailing Address 4595 E Calle Redonda 04 13 2015 City Zip Code State Transaction ID: C2983468 ΑZ Phoenix 85018-3817 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Valley Anesthesiology Consultants Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 483.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: P	AGE 55 OF 111
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11	12
	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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Richard R. McNeer M.D. Date of Receipt Mailing Address 18340 SW 122 St. 04 2015 City State Zip Code Transaction ID: C2990368 FL Miami 33196 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Miami Dept of Anesthesio Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. James R. Mesrobian M.D. Date of Receipt Mailing Address 827 E Birch Ave 04 04 2015 City State Zip Code Transaction ID: C2978996 Whitefish Bay WI 53217-5360 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Aurora Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Brigitte M. Messenger M.D. Date of Receipt Mailing Address 1924 Alcoa Hwy # U109 2015 04 11 City Zip Code State Transaction ID: C2983323 TN Knoxville 37920-1511 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation University Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify)

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

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for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Michael D. Miller M.D. Date of Receipt Mailing Address 15936 Oak Park Ct 04 2015 26 City Zip Code State Transaction ID: C2991140 Westfield IN 46074-9140 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation anesthesia consultants of indianapolis anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) B. Sharon D. Minott M.D. Date of Receipt Mailing Address 2300 Haggerty Rd Ste 2100 04 24 2015 City State Zip Code Transaction ID: C2994055 West Bloomfield MI 48323-2191 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **AAKC ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian Mitchell M.D. Date of Receipt Mailing Address 3710 SW US Veterans Hospital Rd 04 11 2015 City Zip Code State Transaction ID: C2983331 OR Portland 97239-2964 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Portland VA Medical Center P3- ANES Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 666.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13		14		15		16		17

	I Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	€
Full Name (Last, First, Middle Initial) A. Richard C. Month M.D.		Date of Receipt
Mailing Address 2001 Hamilton St Apt 2307		04 10 2015
City Philadelphia	State Zip Code PA 19130	Transaction ID : C2982641 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer University of Pennsylvania Dept. of An Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 333.36	_
Full Name (Last, First, Middle Initial) Barry Moody M.D. Mailing Address 216 Marengo St.,		Date of Receipt
Suite F City Florence	State Zip Code AL 35630	Transaction ID : C2983391 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer Barry J. Moody,DMD,MD,PC	Occupation physician	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) 2. John D. Moore M.D.		Date of Receipt
Mailing Address 3200 Deutsch Crest Dr		04 29 2015
City Washington	State Zip Code MO 63090-6717	Transaction ID : C2994478 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	-
St John's Mercy Hospital Receipt For: Primary General Other (specify) ▼	ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 500.00	-
SUBTOTAL of Receipts This Page (optional).	>	666.68
TOTAL This Period (last page this line number	er only)	

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

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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 personal part of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	!
Full Name (Last, First, Middle Initial) Caroline Morris M.D. Mailing Address, 2707 Few Creek Pr		Date of Receipt
Mailing Address 2797 Fox Creek Dr.		04 11 2015
City	State Zip Code	Transaction ID : C2983345
Germantown	TN 38138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Medical Anesthesia Group	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Jason E. Morris M.D.		Date of Receipt
Mailing Address 2797 Fox Creek Dr.		04 11 2015
City	State Zip Code	Transaction ID: C2983346
Germantown	TN 38138-5723	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Medical Anesthesia Group	Occupation anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) C. Robin M. Morris-Besancon M.D.		Date of Receipt
Mailing Address 11905 Timber Creek Rd		04 02 2015
City North Little Rock	State Zip Code AR 72118-1774	Transaction ID : C2971484 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Arkansas Childrens Hospital	Pediatric anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line number	only)	

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59 OF 111 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) John P. Mrachek M.D. Date of Receipt Mailing Address 4520 W. Woodlland Rd. 04 2015 25 City Zip Code State Transaction ID: C2991103 MN Edina 55424 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Northwest Anesthesia, PA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Joel H. Mumford M.D. Date of Receipt Mailing Address 221 Elm Hill St 04 2015 11 City State Zip Code Transaction ID: C2983338 VT Springfield 05156-2424 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation V A Medical Center anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Meghan Murphy D.O. Date of Receipt Mailing Address 17065 S 71 Highway 2015 04 14 City Zip Code State Transaction ID: C2983766 MO Belton 64012 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1166.68

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) A. Robert F. Murray III, M.D. Mailing Address 19 Elm Park Blvd.		Date of Receipt
City Pleasant Ridge FEC ID number of contributing federal political committee. Name of Employer William Beaumont Hospital Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 48069-1106 C Occupation Physcican Aggregate Year-to-Date ▼ 333.36	Transaction ID : C2983481 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Michael S. Nichols A.AC Mailing Address 2580 Hillandale Cir City Cumming FEC ID number of contributing federal political committee. Name of Employer Physician Specialists in Anesthesia Receipt For: Primary General Other (specify)	State Zip Code GA 30041 C Occupation Anesthesiologist Assistant Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 05 2015 Transaction ID: C2979030 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Melissa O Nikolaidis M.D. Mailing Address 2230 McClendon St City Houston FEC ID number of contributing federal political committee. Name of Employer Baylor College of Medicine Receipt For: Primary General Other (specify)	State Zip Code TX 77030-2020 C Occupation physician Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 09 2015 Transaction ID: C2982373 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)	>	250.02
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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Society of Anesthesia	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) LEA. Norman M.D.		Date of Receipt
Mailing Address 1040 Skye Ln		04 13 2015
City	State Zip Code	Transaction ID : C2983564
Palm Harbor	FL 34683-1455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
North Pinellas Anesthesia	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) 3. Joseph M. Nounou M.D.		Date of Receipt
Mailing Address 668 Lakeside Dock Dr		04 11 2015
City	State Zip Code	Transaction ID : C2983364
Kingsport	TN 37663-4109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Bristol Anesthesia Services	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	583.38	
Full Name (Last, First, Middle Initial) Blessing B. Nwosu M.B.,B.S.		Date of Receipt
Mailing Address 188 Santure St.		04 24 2015
City	State Zip Code	Transaction ID : C2994051
Monroe	MI 48162-4128	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
HARPER UNIVERSITY HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. 1991 Ogalo Tour to Date ¥	
Other (specify) ▼	250.00	
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NAME OF COMMITTEE (In Full)								

NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	
Full Name (Last, First, Middle Initial) James F. O'Neill M.D.		Date of Receipt
Mailing Address 1060 Live Oak Plantation Ro	d.	04 04 2015
City Tallahassee	State Zip Code FL 32312	Transaction ID : C2978990 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Anesthesiology Assoc. of Tallahassee Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Douglas A. Olin M.D. Mailing Address 5270 Vista Club Run		Date of Receipt
City Sanford	State Zip Code FL 32771-7153	04 03 2015 Transaction ID : C2978322 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer USAP-JLR Division	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) John J. Olson M.D.		Date of Receipt
Mailing Address 1808 Yahara Pl		04 21 2015
City Madison	State Zip Code WI 53704-5557	Transaction ID : C2989645 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Madison Anesthesiology Consultants	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		833.34
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for each category of the 12 Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Walid A. Osta M.D. Date of Receipt Mailing Address 27222 Timber Trl 04 2015 24 City Zip Code State Transaction ID: C2994060 Dearborn Hts MI 48127-3386 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth E. Oswalt M.D. Date of Receipt Mailing Address 2500 N State St 04 80 2015 City State Zip Code Transaction ID: C2981411 MS Jackson 39216 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Univ. Anesthesia Services, PLLC anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Sam L. Page M.D. Date of Receipt Mailing Address 17 Windsor Terrace Ln 04 10 2015 City Zip Code State Transaction ID: C2982640 MO Creve Coeur 63141-9000 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Western anesthesiology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) American Society of Anesthesio	logists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Juhan Paiste M.D. Mailing Address JT 845 619 19th St S City Birmingham FEC ID number of contributing federal political committee. Name of Employer UAB, Department of Anesthesiology Receipt For: Primary General Other (specify)	State Zip Code AL 35249-6810 C Occupation Medical Doctor Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 01 2015 Transaction ID: C2970706 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Parag Pandya M.D. Mailing Address 210 Royal Vw City Pittsford FEC ID number of contributing federal political committee. Name of Employer Geneva General Hospital Anesthesiology Receipt For: Primary Other (specify) Other (specify)	State Zip Code NY 14534-9633 C Occupation Anesthesiologist Aggregate Year-to-Date ▼	Date of Receipt M M / 04 2015 Transaction ID : C2979015 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Parag Pandya M.D. Mailing Address 210 Royal Vw City Pittsford FEC ID number of contributing federal political committee. Name of Employer Geneva General Hospital Anesthesiology Receipt For: Primary General Other (specify)	State Zip Code NY 14534-9633 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 666.72	Date of Receipt M M M / 22 2015 Transaction ID : C2989762 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)		250.02
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Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold or used by any pe name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesio	logists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Huiling Pang M.D., Ph.D Mailing Address 16225 Burt St. City Omaha FEC ID number of contributing federal political committee. Name of Employer Univ. of Nebraska Medical Center Dept Receipt For: Primary General Other (specify)	State Zip Code NE 68118 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 600.00	Date of Receipt 04 06 2015 Transaction ID : C2980840 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Huiling Pang M.D., Ph.D Mailing Address 16225 Burt St. City Omaha FEC ID number of contributing federal political committee. Name of Employer Univ. of Nebraska Medical Center Dept Receipt For: Primary General Other (specify)	State Zip Code NE 68118 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 600.00	Date of Receipt 04 09 2015 Transaction ID: C2982308 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) John L. Pappas M.D. Mailing Address 294 Barden Rd City Bloomfield Hills FEC ID number of contributing federal political committee. Name of Employer William Beaumont Hospital Troy Receipt For: Primary General Other (specify)	State Zip Code MI 48304-2711 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt M M / 16 2015 Transaction ID: C2985133 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)		608.34
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	9
Full Name (Last, First, Middle Initial) A. Rafael P. Pascual M.D.		Date of Receipt
Mailing Address 1488 Jesse Jewell Pky SE		04 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Gainesville	State Zip Code GA 30501-3852	Transaction ID : C2985693 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Anesthesia Assoc. of Gainesville Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Haresh D. Patel M.D. Mailing Address 1120 Enclave Rd	1	Date of Receipt
City Chattanooga	State Zip Code TN 37415-5650	7 Transaction ID : C2993657 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Anesthesiology Consultants Exchange	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) 2. Padmavathi Patel M.D.		Date of Receipt
Mailing Address 3990 John R St		04 24 2015
City Detroit	State Zip Code MI 48201-2018	Transaction ID : C2994070 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Harper Univ. Hospital	Occupation ANESTHESIOLOGIST	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)		r person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kenneth Y. Pauker M.D. Mailing Address 18 Sierra Vista City Laguna Niguel FEC ID number of contributing federal political committee. Name of Employer caamg, inc. Receipt For: Primary Other (specify)	State Zip Code CA 92677-7952 C Occupation anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 13 2015 Transaction ID : C2983483 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Feyce M. Peralta M.D. Mailing Address 251 E Huron St # F5-704 City Chicago FEC ID number of contributing federal political committee. Name of Employer Northwestern University Receipt For: Primary General Other (specify)	State Zip Code IL 60611-2908 C Occupation Physician Aggregate Year-to-Date ▼ 333.36	Date of Receipt O4 13 2015 Transaction ID : C2983485 Amount of Each Receipt this Period 83.34

Northwestern University Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) C. Jeremie J. Perry M.D. Mailing Address 2410 Whispering Oaks Ct.		Date of Receipt 04 16 2015
City Abilene	State Zip Code TX 79606-4366	Transaction ID : C2985129 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer	Occupation	
Hendrick Anesthesia Network	Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

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NAME OF COMMITTEE (In Full) American Society of Anesthe	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Kathy M. Perryman M.D. Mailing Address 11412 Canterbury Cir. City Shawnee Mission FEC ID number of contributing federal political committee. Name of Employer Anesthesia Associates of KC Receipt For: Primary General Other (specify)	State Zip Code KS 66211-2935 C Occupation pediatric anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 11 2015 Transaction ID: C2983327 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Raymond M. Pesso M.D. Mailing Address 278 Round Swamp Rd City Melville FEC ID number of contributing federal political committee. Name of Employer NORTH AMERICAN PARTNERS ANESTHESIA Receipt For: Primary Other (specify) General	State Zip Code NY 11747-1903 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 14 2015 Transaction ID: C2983632 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Larry D. Peterson M.D. Mailing Address 1000 E Primrose St Ste 52 City Springfield FEC ID number of contributing federal political committee. Name of Employer Ozark Anes. Assoc. Receipt For: Primary General Other (specify)	State Zip Code MO 65807-5180 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date 1000.00	Date of Receipt M M M / 29 2015 Transaction ID: C2994479 Amount of Each Receipt this Period
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Any 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Mark C. Phillips M.D. Date of Receipt Mailing Address 619 19th St S University of Alabama- Birmingham 04 2015 City Zip Code Transaction ID: C2983463 ΑL Birmingham 35249 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesiologist University of Alabama- Birmingham Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) **B.** Margaret A. Pitts M.D. Date of Receipt Mailing Address 1 Pillsbury St Ste 202 Suite 202 04 2015 05 City State Zip Code Transaction ID: C2979046 NH 03301-3556 Concord Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Associates PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Dean Polce D.O. Date of Receipt Mailing Address 3092 Red Arrow Dr 2015 04 26 City State Zip Code Transaction ID: C2991132 NV Las Vegas 89135 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Physician self Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	iologists P	olitical Action Committe	ee
Full Name (Last, First, Middle Initial) Roma C. Polce M.D. Mailing Address 3092 Red Arrow Dr. City	State	Zip Code	Date of Receipt 04 15 2015 Transaction ID : C2984060
Las Vegas FEC ID number of contributing federal political committee. Name of Employer VAMC Southern Nevada Receipt For:	Occupation Anesthesio Aggregate		Amount of Each Receipt this Period 83.34
Primary General Other (specify) ▼		333.36	
Full Name (Last, First, Middle Initial) Karl A. Poterack M.D. Mailing Address 5777 E Mayo Blvd			Date of Receipt 04 30 2015
City Phoenix FEC ID number of contributing	State AZ	Zip Code 85054-4502	Transaction ID : C2993679 Amount of Each Receipt this Period
federal political committee. Name of Employer Mayo Foundation Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiol Aggregate		83.34
Full Name (Last, First, Middle Initial) C. George M. Powell M.D. Mailing Address PO Box 189		, , , , , , , , , , , , , , , , , , , ,	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Saint Charles	State IL	Zip Code 60174-0189	Transaction ID : C2983643 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.34
Name of Employer Kane Anethesia Associates, SC Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate	Year-to-Date ▼ 333.36	
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Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Carolyn R Powers M.D. Date of Receipt Mailing Address 4240 W 127th Ter 04 30 2015 City State Zip Code Transaction ID: C2993824 KS Leawood 66209-3339 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Johnathan L. Pregler M.D. Date of Receipt Mailing Address 10556 Dunleer Dr 04 04 2015 City State Zip Code Transaction ID: C2978999 CA Los Angeles 90064-4318 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation UCLA Department of Anesthesiology and Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Lloyd E. Rader M.D. Date of Receipt Mailing Address 4225 Stirrup Ln 04 25 2015 City Zip Code State Transaction ID: C2991116 OK Edmond 73034-1532 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Affiliated Anesthesiologists, Inc. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1083.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Thomas F. Rahlfs M.D. Date of Receipt Mailing Address 11406 Chartreuse Ct 04 2015 City State Zip Code Transaction ID: C2983350 TX Houston 77082 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician Anesthesiologist U.T. M.J. Anderson Cancer Center Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) **B.** Navdip S. Rangi M.D. Date of Receipt Mailing Address 10191 W. Shrewsbury Run 04 05 2015 City State Zip Code Transaction ID: C2979035 Collierville TN 38017 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Medical Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) c. Robert M. Raw M.D. Date of Receipt Mailing Address 2177 Port Talbot Pl. 2015 04 13 City State Zip Code Transaction ID: C2983445 IA Coralville 52241 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Professor of Anesthesia University of Iowa Anesthesia Dept. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1166.68 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 73 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) DeElla A. Ray M.D. Date of Receipt Mailing Address 14212 Cedar Circle 04 2015 City Zip Code State Transaction ID: C2983915 ΝE Omaha 68144 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesiologist Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey S. Richards M.D. Date of Receipt Mailing Address 301 University Blvd. Department of Anesthesiology 04 15 2015 City State Zip Code Transaction ID: C2985108 TX Galveston 77555-0591 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of Texas Medical Branch Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Joseph M. Rifici A.A.-C Date of Receipt Mailing Address Lakeside ANES 2532 LKS5007 04 11 2015 11100 Euclid Ave. City State Zip Code Transaction ID: C2983333 OH Cleveland 44106-1716 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Univ Hosp of Cleveland Case Med Ctr Anesthesiologist Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 833.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 OF 111 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Society of Anesthe Full Name (Last, First, Middle Initial)	the name and a	ddress of any political committee	
A. James Rinando M.D. Mailing Address 3502 Yupon St. City	State	Zip Code	Date of Receipt 04 22 2015
Houston FEC ID number of contributing federal political committee.	TX C	77006	Transaction ID : C2989749 Amount of Each Receipt this Period 250.00
Name of Employer Gulf Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiol Aggregate		
Full Name (Last, First, Middle Initial) John C. Rivard M.D. Mailing Address 2104 Copley Ave. City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer ANES ASSOC ANN ARBOR Receipt For: Primary General Other (specify) Other (specify)	State MI C Occupation Anesthesiol Aggregate		Date of Receipt 04 24 2015 Transaction ID : C2994077 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) C. Ellen K. Roberts M.D.	<u>'</u>		Date of Receipt

Mailing Address 17302 Yucca Circle 21 2015 04 City State Zip Code Transaction ID: C2989654 ΝE Bellevue 68123 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Anesthesiologist University of NE Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General

500.00

800.00

Other (specify)

SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 75 OF 111

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	11a 13	one) 11b 14	11c	12 16	17
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Ar NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee

//			
Α.	Full Name (Last, First, Middle Initial) Jeremy M. Roberts D.O.		Date of Receipt
	Mailing Address 1238 Braeburn Dr	04 24 2015	
	City	State Zip Code	Transaction ID : C2994073
	Saint Clair	MI 48079-5704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	ABC	ANESTHESIOLOGIST	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	250.00	
В.	Full Name (Last, First, Middle Initial) Kevin W. Roberts M.D.		Date of Receipt
	Mailing Address 240 Walnut Ln.		04 18 2015
	City	State Zip Code	Transaction ID : C2987431
	Slingerlands	NY 12159	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.34
	Name of Employer	Occupation	
	Albany Medical Center Hospital	Anesthesiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real-to-Date •	
	Other (specify) ▼	333.36	
<u>с.</u>	Full Name (Last, First, Middle Initial) Michael W. Roberts II, M.D.		Date of Receipt
	Mailing Address 430 W Symmes St		04 17 2015
	City	State Zip Code	Transaction ID : C2986109
	Norman	OK 73069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.34
	Name of Employer	Occupation	
	Northwest Anesthesia	Anesthesiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	333.36	
s	SUBTOTAL of Receipts This Page (optional)	>	416.68
H		r only)	

FOR LINE NUMBER: PAGE 76 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Hess M. Robertson M.D. Date of Receipt Mailing Address 1805 Stagecoach Village Circle 04 01 2015 City Zip Code State Transaction ID: C2970889 AR Little Rock 72210 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of Arkansas for Medical Sci Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Kip Robinson M.D. Date of Receipt Mailing Address 1924 Alcoa Hwy # U109 04 26 2015 City State Zip Code Transaction ID: C2991153 TN Knoxville 37920-1511 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Univ of Tennessee Med Ctr Anes Dept anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Scott T. Roethle M.D. Date of Receipt Mailing Address 5005 W 131 Terr 04 11 2015 City Zip Code State Transaction ID: C2983353 KS Leawood 66209 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **AAKC** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 583.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 77 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Anne T. Rogers M.B., Ch.B. Date of Receipt Mailing Address 6005 River Rd 04 05 2015 City Zip Code State Transaction ID: C2979043 Norfolk VA 23505-4708 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Atlantic Anesthesia Inc Anesthesiologists Receipt For: Aggregate Year-to-Date ▼ Primary General 530.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thea Rosenbaum M.D. Date of Receipt Mailing Address 4301 W. Markham St. #515 04 01 2015 City State Zip Code Transaction ID: C2970893 AR Little Rock 72205 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **UAMS** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. David M. Rosenfeld M.D. Date of Receipt Mailing Address Department of Anesthesiology 04 28 2015 5777 E Mayo Blvd City State Zip Code Transaction ID: C2991801 ΑZ Phoenix 85054-4502 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Mayo Clinic Hospital Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 78 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Jeffrey M. Rusheen M.D. Date of Receipt Mailing Address 6011 N Pointe PI 04 2015 City Zip Code State Transaction ID: C2983470 CA Woodland Hills 91367-5500 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation County of Los Angeles Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 206.68 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mandy M. Sander-Prather M.D. Date of Receipt Mailing Address 8717 W 110th St Ste 600 04 01 2015 City State Zip Code Transaction ID: C2970899 Overland Park KS 66210-2126 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Assoc. of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Gabriel E. Sarah M.D. Date of Receipt Mailing Address 4075 17th St 04 18 2015 City Zip Code State Transaction ID: C2987424 CA San Francisco 94114-1902 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **UCSF** Pediatric Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 208.35 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 79 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Mahesh P. Sardesai M.D. Date of Receipt Mailing Address 1304 Fairstead Lane 04 2015 City Zip Code State Transaction ID: C2983646 PΑ Pittsburgh 15217 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **UPMC Shadyside** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew M. Shankle M.D. Date of Receipt Mailing Address 441 S. Livernois, Suite #190 04 24 2015 City State Zip Code Transaction ID: C2994069 MI Rochester 48307 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Paul W. Sheeran M.D. Date of Receipt Mailing Address 9219 Belinder Rd 04 26 2015 City Zip Code State Transaction ID: C2991152 KS Leawood 66206 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of Kansas City Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 833.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 80 OF Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Karen S. Sibert M.D. Date of Receipt Mailing Address 4146 Sunnyslope Ave. 04 05 2015 City State Zip Code Transaction ID: C2979034 CA Sherman Oaks 91423 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Karen S. Sibert MD Inc. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 750.06 Other (specify) Full Name (Last, First, Middle Initial) B. Karen S. Sibert M.D. Date of Receipt Mailing Address 4146 Sunnyslope Ave. 04 22 2015 City State Zip Code Transaction ID: C2989766 CA Sherman Oaks 91423 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Karen S. Sibert MD Inc. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 750.06 Other (specify) Full Name (Last, First, Middle Initial) c. Michael B. Simon M.D. Date of Receipt Mailing Address 35 Gellatly Dr 09 04 2015 City Zip Code State Transaction ID: C2982309 NY Wappingers Falls 12590 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician Anesthesiologist Sheridan Receipt For: Aggregate Year-to-Date ▼ Primary General 666.72 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 81 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Michael B. Simon M.D. Date of Receipt Mailing Address 35 Gellatly Dr 04 2015 City Zip Code State Transaction ID: C2982642 NY Wappingers Falls 12590 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Sheridan Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.72 Other (specify) Full Name (Last, First, Middle Initial) B. Harpreet Singh M.D. Date of Receipt Mailing Address 4930 Charing Cross Road 04 24 2015 City State Zip Code Transaction ID: C2994074 Bloomfield Hills MI 48304 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **AAKC ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jonathan H. Slonin M.D., M.B. Date of Receipt Mailing Address 134 SE Via Verona 2015 04 04 Zip Code City State Transaction ID: C2978998 FL Port Saint Lucie 34984 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation TeamHealth Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) A. Robert H. Small M.D.		Date of Receipt
Mailing Address 410 W 10th Ave		M = M / D = D / Y = Y = Y
Dept of Anes - N411 Doan City		04 11 2015
Columbus	State Zip Code OH 43210	Transaction ID : C2983321 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	_
The Ohio State University	Professor	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Blair Smith M.D.		Date of Receipt
Mailing Address 1046 Lake Colony Ln		04 01 2015
City	State Zip Code	Transaction ID : C2970707
Vestavia	AL 35242	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer University of Alabama Health Services	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate Teal-to-Date 333.36	
Full Name (Last, First, Middle Initial) C. Kortnee L. Sorbin M.D.		Date of Receipt
Mailing Address 10718 W 163rd Ter		04 29 2015
City	State Zip Code	Transaction ID : C2992730
Overland Park	KS 66062-4580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
AAKC-Menorah Medical Center	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	333.36	
SUBTOTAL of Receipts This Page (optional)		266.68
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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 t			
NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	е		
Full Name (Last, First, Middle Initial) Michael J. Souter M.B.,Ch.B. Mailing Address 325 9th Ave, Box 359724		Date of Receipt		
Box 359724		04 11 2015		
City	State Zip Code	Transaction ID : C2983335		
Seattle	WA 98104-2499	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	83.34		
Name of Employer	Occupation	1		
Harborview Medical Center	Anesthesiologist			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General Other (specify) ▼	333.36			
Full Name (Last, First, Middle Initial) 3. James Stangl M.D.	<u>'</u>	Date of Receipt		
Mailing Address 314 Martin Luther King Jr W		04 11 2015		
City	State Zip Code	Transaction ID : C2983343		
Tacoma	Tacoma WA 98405-4292			
FEC ID number of contributing federal political committee.	C	83.34		
Name of Employer Tacoma Anesthesia Associates, P.S.	Occupation Physician Anesthesiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36			
Full Name (Last, First, Middle Initial) C. Timothy W. Starck M.D.	•	Date of Receipt		
Mailing Address 11583 Prestwick Rd.		04 28 _ 2015 _		
City	State Zip Code	Transaction ID : C2991883		
Belvidere	IL 61008	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	1000.00		
Name of Employer	Occupation	1		
Rockford Anesthesiologists Associated	Physician			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General	Aggregate Teal-to-Date ₹			
Other (specify) ▼	1000.00			
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1166.68		
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	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) David K. Stein M.D. Mailing Address 1550 Boyson Rd City Hiawatha FEC ID number of contributing federal political committee. Name of Employer Linn County Anesthesiologists P.C. Receipt For: Primary General Other (specify)	State Zip Code IA 52233-2362 C Occupation anesthesiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Erica Stein M.D. Mailing Address 410 W 10th Ave., Anes. Dep N411 Doan Hall City Columbus FEC ID number of contributing federal political committee. Name of Employer ohio state university Receipt For: Primary General Other (specify)	t. State Zip Code OH 43210-1240 C Occupation physician Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 13 2015 Transaction ID: C2983487 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) John H. Stephenson M.D. Mailing Address 5671 Peachtree Dunwoody I Suite 610 City Atlanta FEC ID number of contributing federal political committee. Name of Employer Physician Specialists in Anesthesia, P Receipt For: Primary General Other (specify)	State Zip Code GA 30342 C Occupation Physician Anesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt M M O4
SUBTOTAL of Receipts This Page (optional)	<u> </u>	416.68
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 85 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Marjorie Stiegler M.D. Date of Receipt Mailing Address 10817 Round Brook Cir 04 2015 City Zip Code State Transaction ID: C2983451 NC Raleigh 27617-7759 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of NC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth R. Stone M.D. Date of Receipt Mailing Address 317 Laurelwood Rd 04 01 2015 City State Zip Code Transaction ID: C2970710 CT Orange 06477-1654 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Bridgeport Anesthesia Associates** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Michael R. Stone M.D. Date of Receipt Mailing Address 16 Talais Dr. 04 01 2015 City Zip Code State Transaction ID: C2971482 AR Little Rock 72223 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Little Rock Anesthesia Services anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional).....

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

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

FOR LINE	NUMBER	: PAGE	86 OF	111						
(check only one)										
X 11a	11b	11c	12							
13	14	15	16	17						

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	9
Full Name (Last, First, Middle Initial) Erin A Sullivan M.D. Mailing Address Dept of Apps PLIH C-224		Date of Receipt
Mailing Address Dept of Anes PUH C-224 200 Lothrop St.		04 09 2015
City	State Zip Code	Transaction ID : C2982315
Pittsburgh	PA 15213-2536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Univ of Pittsburgh Med Ctr	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial)	333.30	
3. George Sullivan D.O.		Date of Receipt
Mailing Address 2321 Butler Bay Dr. N.		04 04 2015
City	State Zip Code	Transaction ID : C2979014
Windermere	FL 34786-6109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
JLR Anesthesia	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) C. Esther Sung M.D.		Date of Receipt
Mailing Address 3710 SW US Veterans Hos		04 07 2015
City Portland	State Zip Code OR 97239-2964	Transaction ID : C2981275 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
Portland VAMC Operative Care	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify)	333.36	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	250.02
TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 87 OF 111

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any proper name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesi	iologists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Benjamin J. Sutlive M.D. Mailing Address 8 Montevallo Terrace City Birmingham FEC ID number of contributing federal political committee. Name of Employer Anesthesia Resources Management Inc. Receipt For: Primary General Other (specify)	State Zip Code AL 35213 C Occupation Staff Anesthesiologist Aggregate Year-to-Date ▼ 300.00	Date of Receipt 04 28 2015 Transaction ID: C2991795 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Steven L. Sween M.D. Mailing Address 240 Marchand Ct NW City Atlanta FEC ID number of contributing federal political committee. Name of Employer Physician Specialists in Anesthesia PC Receipt For: Primary General Other (specify)	State Zip Code GA 30328-2055 C Occupation Physician Anesthesiologist Aggregate Year-to-Date ▼ 666.72	Date of Receipt M M O1 2015 Transaction ID: C2970904 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Steven L. Sween M.D. Mailing Address 240 Marchand Ct NW City Atlanta FEC ID number of contributing federal political committee. Name of Employer Physician Specialists in Anesthesia PC Receipt For: Primary General Other (specify)	State Zip Code GA 30328-2055 C Occupation Physician Anesthesiologist Aggregate Year-to-Date ▼ 666.72	Date of Receipt O4 26 2015 Transaction ID : C2991137 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)		216.68
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 88 OF 111

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Samuel E. Talsma M.D. Mailing Address 2110 Dorset Rd City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer anesthesia assoc of ann arbor Receipt For: Primary General Other (specify)	State Zip Code MI 48104 C Occupation physician Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 28 2015 Transaction ID : C2991787 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Connie E. Taylor M.D. Mailing Address 9624 Evelyn PI City River Ridge FEC ID number of contributing federal political committee. Name of Employer Oschner Clinic Receipt For: Primary General Other (specify)	State Zip Code LA 70123-2019 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt 04 06 2015 Transaction ID : C2979068 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Travis J. Teetor M.D. Mailing Address 19309 Briggs St City Omaha FEC ID number of contributing federal political committee. Name of Employer Boys Town National Research Hospital Receipt For: Primary General Other (specify)	State Zip Code NE 68130 C Occupation Staff Anesthesiologist Aggregate Year-to-Date ▼ 400.00	Date of Receipt 04 01 2015 Transaction ID: C2970901 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	·····	433.34
TOTAL This Period (last page this line number	only)	

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		13		14		15	16		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) A. Gregory H. Teraikian D.O. Mailing Address 4258 Quaker Hill Dr		Date of Receipt
		04 24 2015
City	State Zip Code	Transaction ID : C2994067
Fort Gratiot	MI 48059-4040	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
AAKC	ANESTHESIOLOGIST	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Sherif H. Tewfik M.D. Mailing Address 7365 NW 107th St		Date of Receipt
		04 14 2015
City	State Zip Code	Transaction ID : C2983642
Grimes	IA 50111-1078	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Associated Anesthesiologists, P.C.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) C. Sydney I. Thomson M.D.		Date of Receipt
Mailing Address 6224 Hidden Meadow Ct		04 11 2015
City	State Zip Code	Transaction ID: C2983354
San Jose	CA 95135-1613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Coast Anesthesia	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
SUBTOTAL of Receipts This Page (optional)		416.68
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X)

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Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) American Society of Anesthesiology	gists Political Action Committe	ee
Name of Employer Midwest Anesthesia Assoc Receipt For: Primary Other (specify) ▼ Continue: State Zip Code KS 66209 C Decupation hysician Aggregate Year-to-Date ▼	Date of Receipt O4 O2 2015 Transaction ID: C2977431 Amount of Each Receipt this Period 250.00	
Name of Employer Allegheny Health Network Receipt For:	State Zip Code PA 15044-6032 C Decupation nesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt M M M O1 2015 Transaction ID: C2970705 Amount of Each Receipt this Period 83.34
Name of Employer Northwest Anesthesia, PA Possint For:	State Zip Code MN 55438-1218 C Decupation Innesthesiologist Aggregate Year-to-Date ▼ 333.36	Date of Receipt 04 03 2015 Transaction ID: C2978317 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)		416.68
TOTAL This Period (last page this line number only	/)	

FOR LINE NUMBER: PAGE 91 OF 111 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Judi A. Turner M.D., Ph.D Date of Receipt Mailing Address 1002 Franklin Street 04 2015 City Zip Code State Transaction ID: C2983382 CA Santa Monica 90403 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **UCLA** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Katja R. Turner M.D. Date of Receipt Mailing Address 410 West 10th Ave 04 13 2015 City State Zip Code Transaction ID: C2983482 OH Columbus 43210 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation The Ohio State University professor Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Gary F. Tzeng M.D. Date of Receipt Mailing Address 582 S Rex Blvd 04 12 2015 City State Zip Code Transaction ID: C2983372 IL **Elmhurst** 60126-4259 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Dept. of Veteran's Affairs physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 92 OF 111 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Paul S. Uppal M.D. Date of Receipt Mailing Address 40 Front St 04 05 2015 City Zip Code State Transaction ID: C2979037 NY Binghamton 13905-4712 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Riverside Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. David A. Van Alstine M.D. Date of Receipt Mailing Address 1410 Goodbar Ave 04 06 2015 City State Zip Code Transaction ID: C2979075 TN Memphis 38104-4879 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Methodist University Hospital - Memphi Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) c. David Varlotta D.O. Date of Receipt Mailing Address 1303 Bayshore Blvd. 02 04 2015 City State Zip Code Transaction ID: C2973162 FL Tampa 33606-2911 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Greater Florida Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 666.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 93 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) J. Michael Vollers M.D. Date of Receipt Mailing Address 1 Childrens Way Slot 203, S-319 04 2015 City Zip Code State Transaction ID: C2982636 AR Little Rock 72202-3510 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Arkansas for Medical Sci Professor of Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Terri W. W M.D. Date of Receipt Mailing Address 4600 Anderson Way 04 16 2015 City State Zip Code Transaction ID: C2985134 WA Bellingham 98226-7938 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Bellingham Anesthesia Associates physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Samuel H. Wald M.D. Date of Receipt Mailing Address 518 Torwood Lane 04 11 2015 City Zip Code State Transaction ID: C2983340 CA Los Altos 94022 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Stanford University Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) 17

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ITEMIZED DECEIDTS	-	Use separate schedule(s)	(check	only	one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12	
Any information copied from such Report	s and Statements ma	ay not be sold or used by any p	erson for t	he pi	14 urpose of	15 soliciting	16 g contribut	17 tions
or for commercial purposes, other than u	sing the name and a	address of any political committee	e to solicit	contr	ributions	from suc	h committ	ee.
NAME OF COMMITTEE (In Full)		190 1 4 0 0 100						
American Society of Anes	thesiologists P	olitical Action Committ	ee					
Full Name (Last, First, Middle Initial) A James J. Walsh M.D.			Date	-4.1	2			
Mailing Address 166 83rd St.					Receipt			
Mailing Address 100 6310 St.				м 4	06		2015	Y
City	State	Zip Code	Tra	ınsa	ction ID :	C29790		
Brooklyn	NY	11209	Amo	unt d	of Each F	Receipt th	his Period	
FEC ID number of contributing federal political committee.	С			_	7		41	.67
Name of Employer	Occupation	l						
NAPA	Medical Do	ctor						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General	11.		1					
Other (specify) ▼		208.35	1					
Full Name (Last, First, Middle Initial)								
B. James J. Walsh M.D.					Receipt			
Mailing Address 166 83rd St.				4	06		2015	Y
City	State	Zip Code			tion ID :			
Brooklyn	NY	11209					his Period	
FEC ID number of contributing federal political committee.	C			_	7		41.	.67
Name of Employer	Occupation	1						
NAPA	Medical Do	ctor						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		, 208.35]					
Full Name (Last, First, Middle Initial) C. Leslie L. Walsh D.O.			Date	of F	Receipt			
Mailing Address 1633 Newcastle Ct				M 4	24		2015	Y
City Rochester Hills	State MI	Zip Code			ction ID :			
	IVII	48306-3679	Amo	unt d	of Each F	łeceipt th	his Period	
FEC ID number of contributing federal political committee.	С			_	7		250	.00
Name of Employer	Occupation	1						
Self	Anesthesio	logist						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		250.00	1					
Other (specify)		200.00	4					
SUBTOTAL of Receipts This Page (opti	onal)						333.	34
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111

for each category of the Detailed Summary Page 13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Hong Wang M.D., Ph.D Date of Receipt Mailing Address 50634 Drakes Bay Dr 04 2015 24 City Zip Code State Transaction ID: C2994075 Novi MI 48374-2548 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Detroit Medical Center Department of A Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert D. Warters M.D. Date of Receipt Mailing Address 109 Bee St. 04 2015 17 City State Zip Code Transaction ID: C2987158 SC Charleston 29401-5799 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Dept. of Veterans Affairs Ralph H. Joh Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joshua D. Weber M.D. Date of Receipt Mailing Address 5203 Pawnee Dr 2015 04 06 City Zip Code State Transaction ID: C2980838 KS Roeland Park 66205-1554 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Midwest Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) **ITEMIZ**

FOR LINE NUMBER: PAGE 96 OF

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nation copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions												

Any infor 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Paul S. Webster M.D. Date of Receipt Mailing Address 825 E Oak St 04 2015 City State Zip Code Transaction ID: C2983374 FL Kissimmee 34744-5838 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Medical Doctor **Doctors Pain Management Associates** Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Ivan Jared Weiner M.D. Date of Receipt Mailing Address 10527 Emerald Chase Dr 30 04 2015 City State Zip Code Transaction ID: C2993656 FL Orlando 32836-5862 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Emily L. Weisberg M.D. Date of Receipt Mailing Address 5708 W 147th PI 2015 04 18 City State Zip Code Transaction ID: C2987437 KS Overland Park 66223-1175 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **AAKC** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 666.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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Any information copied from such Reports and a or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	9
Full Name (Last, First, Middle Initial) A. Alan Weiss M.D.		Date of Receipt
Mailing Address 960 Royal Arms Dr		04 10 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : C2982638
Girard	OH 44420	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
Bel-Park Anes. Assoc. Inc.	physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate rear-to-bate ▼ 333.36	
Full Name (Last, First, Middle Initial) Lynda Torfreda Wells M.D.		Date of Receipt
Mailing Address 4098 Wood Ln		04 12 2015
City	State Zip Code	Transaction ID : C2983390
Keswick	VA 22947-2900	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
University of Virginia	Anesthesiology	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) Ezekiel J. Wetzel M.D.		Date of Receipt
Mailing Address 3315 Deborah Dr Suite 401		04 05 2015
City	State Zip Code	Transaction ID : C2979042
Monroe	LA 71201-2150	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Parish Anesthesia Associates	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		266.68
TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 98 OF 111 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) William Womack M.D., Ph.D Date of Receipt Mailing Address PO Box 1025 04 2015 City Zip Code State Transaction ID: C2985811 Fairhope AL 36533 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Eastern Shore Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jason Workman M.D. Date of Receipt Mailing Address 7575 W Washington Ave Suite 127-374 04 27 2015 City State Zip Code Transaction ID: C2991182 NV Las Vegas 89128-4333 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesiology Consultants, Inc. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. W.Bradley Worthington M.D. Date of Receipt Mailing Address 101 Hillwood Blvd 30 04 2015 City Zip Code State Transaction ID: C2993676 TN Nashville 37205-2811 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Surgery and Recovery Partners Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 666.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 99 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Crystal C. Wright M.D. Date of Receipt Mailing Address 3032 Jarrard St. 04 2015 City Zip Code State Transaction ID: C2983385 Houston TX 77005 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Baylor College of Medicine Dept. of An Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. James K. York M.D. Date of Receipt Mailing Address 129-4 Hidden Creek Circle 04 19 2015 City State Zip Code Transaction ID: C2987459 Dothan AL 36301 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Anesthesia Consultants Med. Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Matthew W. Zeleznik M.D. Date of Receipt Mailing Address 5671 Peachtree Dunwoody Rd Ste 610 04 12 2015 City State Zip Code Transaction ID: C2983379 GΑ Atlanta 30342-5005 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Physician Specialists in Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) 208.35 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 100 OF 111 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Matthew W. Zeleznik M.D. Date of Receipt Mailing Address 5671 Peachtree Dunwoody Rd Ste 610 04 2015 City State Zip Code Transaction ID: C2992731 Atlanta GΑ 30342-5005 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Physician Specialists in Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) **B.** David A. Zvara M.D. Date of Receipt Mailing Address Campus Box 7010 - N2201 UNC Hospit 04 2015 14 City State Zip Code Transaction ID: C2983645 Chapel Hill NC 27599-7010 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of North Carolina School of Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 125.01 SUBTOTAL of Receipts This Page (optional)..... 55881.17 TOTAL This Period (last page this line number only).....

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riisi Dala		Date of Disbursement
		M M / D D / Y Y Y
Mailing Address P.O. Box 6600		04 30 2015
City State Zip Coo	de	Transaction ID : D165905
Hagerstown MD 21741		
Purpose of Disbursement Credit Card Merchant Fees	003	Amount of Each Disbursement this Period
Candidate Name		oan or East Dissursonion this i shou
	Category/ Type	2449.71
Office Sought: House Disbursement For: 2016	715	,
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President		
	ard Merchant	
Full Name (Last, First, Middle Initial)		Date of Dishuranment
		Date of Disbursement
Mailing Address		M = M / D = D / Y = Y = Y
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Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		AMOUNT OF LACIT DISDUISEMENT WINS FERIOD
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Office Sought: House Disbursement For:	.,,,,	
	eneral	
President Other (specify) ▼		
State: District:		
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		Date of Disbursement
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	Mailing Address 6065 Roswell Road #2274				04	21		015	
	BOX 2274	`toto	Zin Codo						
	City S Atlanta	State GA	Zip Code 30328		Trans	saction ID:	D165615		
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	Mailing Address P.O. Box 651374				04	29	20	015	
	City	State	Zip Code						
	Sterling	VA	20165		Trans	saction ID :	D165913		
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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) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) A. DEMOCRATS RESHAPING AMERICA (DREAMPAC) Mailing Address 1212 S. Victory Blvd. City State Zip Code CA 91502 Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: 2015 Full Name (Last, First, Middle Initial) B. M-PAC Mailing Address 607 14th Street N.W. Suite 600 City State Zip Code Disbursement Zito Contribution Candidate Name City State Zip Code Disbursement Zito Contribution Candidate Name Date of Disbursement Date of Disbursement this Period Transaction ID: D165260 Transaction ID: D165263 Transaction ID: D165260 Transaction ID: D165433	ITI	EMIZED DISBURSEMENTS		(check only	y one)	1.06
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Ste 600 City State Zip Code Washington DC 20005 Purpose of Disbursement 2015 Contribution		Mailing Address 700 42th St. No.			1 1 1 1 1 1	
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Senate Disbursement For: 2015 Senate Primary General						
President ✓ Other (specify) ▼						
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SCHEDULE B (FEC Form 3X)		T FOR LINE	NUMBER: PAGE 104 OF 111
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NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	ists Political Action C	Committee	
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Full Name (Last, First, Middle Initial)			
A. ORRINPAC			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 175 S. WEST TEMPLE SUITE 650			04 21 2015
City	state Zip Code		
•	UT 84101		Transaction ID: D165614
Purpose of Disbursement	31101		
2015 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	2500.00
Office Sought: House Disbursen	nent For: 2015		
	Primary General		
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State: District:	2015 Contribution	n	
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B. KINZINGER FOR CONGRESS			Date of Disbursement
Matthew Address Bo Book			M = M / D = D / Y = Y = Y
Mailing Address PO BOX 2365			04 08 2015
City	state Zip Code		
OTTAWA	IL 61350		Transaction ID : D165434
Purpose of Disbursement			
2016 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Adam Kinzinger		Туре	2500.00
	nent For: 2016		
	Primary General		
	Other (specify) ▼		
State: IL District: 16			
Full Name (Last, First, Middle Initial)			Dete of Dieburg
C. ALMA ADAMS FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 20622			04 15 2015
Mailing Address PO BOX 20022			04 10 2010
City	State Zip Code		Townseller ID D405400
GREENSBORO	NC 27420		Transaction ID: D165496
Purpose of Disbursement			
2016 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Alma Adams		Type	2000.00
	nent For: 2016		
	Primary General		
	Other (specify) ▼		
State: NC District: 12			
			7000.00
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or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)		•	
American Society of Anesthesiolog	ists Political Action	Committee	
Full Name (Last, First, Middle Initial)			
A. KUSTER FOR CONGRESS, INC.			Date of Disbursement
Mailing Address P.O. BOX 1498			04 01 2015
City	State Zip Code		Transaction ID : D165259
0000	NH 03302		Transaction ID: D165259
Purpose of Disbursement 2016 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Ann McLane Kuster		Category/	1000.00
•	nent For: 2016	Туре	
	Primary General		
President	Other (specify) ▼		
State: NH District: 02			
Full Name (Last, First, Middle Initial)	2 INO		Data of Diaburaement
B. AUSTIN SCOTT FOR CONGRESS	SINC		Date of Disbursement
Mailing Address PO BOX 2530			04 22 2015
City	State Zip Code		Transaction ID : D165610
	GA 31793		
Purpose of Disbursement 2016 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Austin Scott		Type	1000.00
	nent For: 2016		
	Primary General		
State: GA District: 08	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. BILL FLORES FOR CONGRESS			Date of Disbursement
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Mailing Address PO BOX 6207			04 01 2015
City	State Zip Code		Transaction ID D405004
BRYAN	TX 77805		Transaction ID: D165264
Purpose of Disbursement 2016 Primary Contribution		014	
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Bill Flores		Category/ Type	2500.00
•	nent For: 2016	.,,,,,	
	Primary General		
President	Other (specify) ▼		
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or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
American Society of Anesthesiolog	ists Political Action	Committee		
Full Name (Last, First, Middle Initial)				
A. MCKINLEY FOR CONGRESS			Date of Disbursement	
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Mailing Address 32 20TH STREET			04 15 2015	
City	State Zip Code			
WHEELING	WV 26003		Transaction ID : D165498	
Purpose of Disbursement				
2016 Primary Contribution		011	Amount of Each Disbursement this Period	
Candidate Name Rep. David B. McKinley		Category/	2000.00	
	nent For: 2016	Туре		
	Primary General			
President	Other (specify) ▼			
State: WV District: 01				
Full Name (Last, First, Middle Initial)			Data of Dishuman mant	
B. FRIENDS OF ELIZABETH ESTY			Date of Disbursement	
Mailing Address PO BOX 61			04 21 2015	
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Candidate Name		Category/	0500.00	
Rep. Elizabeth Esty		Type	2500.00	
	nent For: 2016			
Senate President	Primary General Other (specify) ▼			
State: CT District: 05	(
Full Name (Last, First, Middle Initial)				
C. JASON SMITH FOR CONGRESS			Date of Disbursement	
W. W. A.I.I			M M / D D / Y Y Y Y Y	
Mailing Address PO BOX 1324			04 08 2015	
City	State Zip Code		Transaction ID D405405	
CAPE GIRARDEAU	MO 63702		Transaction ID : D165435	
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Candidate Name		011	Amount of Each Disbursement this Period	
Rep. Jason Smith		Category/ Type	2000.00	
•	nent For: 2016	,,,		
Senate	Primary General			
President	Other (specify) ▼			
State: MO District: 08				
SUBTOTAL of Disbursements This Page (optional)			6500.00	
CODITION DISDUISEMENTS THIS Fage (Optional)		·····		
TOTAL This Period (last page this line number only)				

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 107 (
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		04
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	I ments may not be cold or us			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
$ \; angle$ American Society of Anesthesiolo	gists Political Action	Committee		
Full Name (Last, First, Middle Initial)		T		
A. MARK POCAN FOR CONGRESS			Date of Disbursemen	t
	•		M M / D D	/
Mailing Address 309 N BALDWIN ST			04 06	2015
City	State Zip Code			
MADISON	WI 53703		Transaction ID : D1	65432
Purpose of Disbursement				
2016 Primary Contribution Candidate Name		011	Amount of Each Disb	ursement this Period
Rep. Mark Pocan		Category/ Type		2000.00
•	ement For: 2016	туре	7	7
Senate	Primary General			
President	Other (specify) ▼			
State: WI District: 02				
Full Name (Last, First, Middle Initial) B. MARK TAKAI FOR CONGRESS			Date of Disbursemen	t
			M M / D D	/ Y Y Y Y Y
Mailing Address PO BOX 2267			04 15	2015
City	State Zip Code		Transaction ID : D1	65499
PEARL CITY Purpose of Disbursement	HI 96782			
2016 Primary Contribution		011	Amount of Each Disb	ursement this Period
Candidate Name		Category/		
Rep. Mark Takai		Type		1000.00
	ement For: 2016			
Senate President	Primary General Other (specify) ▼			
State: HI District: 01	(opoony) \			
Full Name (Last, First, Middle Initial)				
C. MICHAEL BURGESS FOR CONC	BRESS		Date of Disbursemen	t
Mailing Address PO Box 2334			04 01	2015
Maining Address PO BOX 2334			04 01	2013
City	State Zip Code		Transaction ID : D1	65263
Denton Purpose of Disbursement	TX 76202		Transaction ib . DI	
2016 Primary Contribution		011	Amount of Each Diet	urcoment this Deried
Candidate Name		Category/	Amount of Each Disb	
Rep. Michael C. Burgess		Type		2500.00
	ement For: 2016			
Senate President	Primary General Other (specify)			
State: TX District: 26	Other (specify) ▼			
20				
SUBTOTAL of Disbursements This Page (optional)		·····		5500.00
		<u> </u>		
TOTAL This Period (last page this line number only	/)			

SCHEDULE B (FEC Form		FOR LINE NUMBER: PAGE 108 (
ITEMIZED DISBURSEMENT	S Use separate schedule for each category of the	(check only	y one)	
	Detailed Summary Pag		22 X 23 24 25 28 28 29	
Any information assistd from such December	and Statements may get be seld as			
			on for the purpose of soliciting contributions of solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)	7.			
American Society of Anest	hesiologists Political Actio	on Committee	9	
/				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. LEVIN FOR CONGRESS			M M / D D / Y Y Y	
Mailing Address PO Box 37			04 21 2015	
City	State Zip Code MI 48066		Transaction ID : D165611	
Roseville Purpose of Disbursement	MI 48066			
2016 Primary Contribution		011	Amount of Each Disbursement this Perio	
Candidate Name		Category/		
Rep. Sander M. Levin		Type	1000.00	
Office Sought: House	Disbursement For: 2016			
Senate President	Primary General Other (specify) ▼	al		
State: MI District: 12	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. SCALISE FOR CONGRES	S		Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address PO Box 23219			04 01 2015	
City	State Zip Code		Transaction ID : D165261	
Jefferson Purpose of Disbursement	LA 70183			
2016 Primary Contribution		011	Amount of Each Disbursement this Perio	
Candidate Name		Category/		
Rep. Steve Scalise		Type	2500.00	
Office Sought: House	Disbursement For: 2016			
Senate President	Primary General	al		
State: LA District: 01	Other (specify)			
Full Name (Last, First, Middle Initial)				
C. FRIENDS OF SUSAN BRO	OOKS		Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address 9425 N MERIDIAN ST	REET		04 21 2015	
City	State Zip Code			
INDIANAPOLIS	IN 46260		Transaction ID : D165613	
Purpose of Disbursement				
2016 Primary Contribution		011	Amount of Each Disbursement this Perio	
Candidate Name Rep. Susan W. Brooks		Category/	1000.00	
Office Sought: House	Disbursement For: 2016	Туре		
Senate	Primary General	al		
President	Other (specify) ▼			
State: IN District: 05				
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
SUBTOTAL of Disbursements This Page	(optional)	•••••••••••••••••••••••••••••••••••••••	4500.00	
TOTAL This Desired (leak many this !)	umbar anlı)			
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 109 (
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	21b 27		25 26 29 30b
Any information copied from such Reports and State	ments may not be sold or us			
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
$\Big \Big angle$ American Society of Anesthesiolog	jists Political Action	Committee		
Full Name (Last, First, Middle Initial)				
A. HOOSIERS FOR ROKITA, INC.			Date of Disbursement	
			M M / D D / Y Y	
Mailing Address 314 ARSENAL AVE.			04 01 201	5
City	State Zip Code			
INDIANAPOLIS	IN 46201		Transaction ID : D165265	
Purpose of Disbursement 2016 Primary Contribution		044	Assessment of E. J. D. J.	Lis Borr
Candidate Name		011	Amount of Each Disbursement th	nis Period
Rep. Todd Rokita		Category/ Type	1	1000.00
	ment For: 2016	. , , , ,		
Senate	Primary General			
President	Other (specify) ▼			
State: IN District: 04				
Full Name (Last, First, Middle Initial) B. CLARKE FOR CONGRESS			Date of Disbursement	
GLANNE I ON GONGRESS			M M / D D / Y Y	Y
Mailing Address 111-36 200TH. STREET			04 15 201	
•	State Zip Code		Transaction ID : D165495	
HOLLIS Purpose of Disbursement	NY 11412			
2016 Primary Contribution		011	Amount of Each Disbursement th	his Period
Candidate Name		Category/		1000.00
Rep. Yvette D. Clarke		Туре		1000.00
	ment For: 2016			
Senate President	Primary General Other (specify) ▼			
State: NY District: 09				
Full Name (Last, First, Middle Initial)				
C. CITIZENS FOR COCHRAN			Date of Disbursement	
Mailing Addross, DO DOV 7400			M M / D D / Y Y Y O 201	
Mailing Address PO BOX 7183			04 22 201	J
City	State Zip Code		Transaction ID : D165617	
TUPELO	MS 38802		וומווסמטנוטוו טו וויסססוו/	
Purpose of Disbursement 2014 General Debt Retirement		011	Assessment of E. J. D. J.	Lis Borr
Candidate Name			Amount of Each Disbursement th	nis Period
Sen. Thad Cochran		Category/ Type	5	5000.00
	ment For: 2014		,	
Senate	Primary General			
State: MS District: 00	Other (specify) ▼			
State: MS District: 00				
SUBTOTAL of Disbursements This Page (optional)			7	7000.00
(opnorial).				
TOTAL This Period (last page this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
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NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	ists Political Action	Committee	
Full Name (Last, First, Middle Initial)			
A. TIM SCOTT FOR SENATE			Date of Disbursement
Mailing Address 1405 ASHLEY RIVER ROAD			04 01 2015
City S CHARLESTON	State Zip Code SC 29407		Transaction ID: D165336
Purpose of Disbursement 2016 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Sen. Tim Scott	mont For: 0040	Type	1000.00
	nent For: 2016 Primary General Other (specify)		
State: SC District: 00			
Full Name (Last, First, Middle Initial) 3.			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
President	nent For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
3.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
President	nent For: Primary General Other (specify)	71.	
State: District:			
SUBTOTAL of Disbursements This Page (optional)		········· >	1000.00
TOTAL This Period (last page this line number only)			61000.00

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 111		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	(check only one)	
	Detailed Summary Page	21b	22 23	24 25 26
		27	X 28a 28b	28c 29 30
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	to and address of any point	oar committee to	- Conoit Continuations i	Tom Suom Committee.
American Society of Anesthesiolog	iete Political Δetion	Committee		
American Society of Amestinesiolog	ists i Ulitical Action	Committee	•	
Full Name (Last, First, Middle Initial)				
^{A.} J. Lance Lichtor M.D.			Date of Disbursem	nent
Mailing Address PO Box 4668			04 20	2015
			04 20	2010
	State Zip Code		Transaction ID :	D166052
New York	NY 10163-4668		Transaction is .	D100002
Purpose of Disbursement refund of 4/15 contribution			Amount of Each D	isbursement this Period
Candidate Name		Category/		
		Type		41.67
	nent For: 2016			
	Primary General			
State: President State:	Other (specify) ▼ refund of 4/15 of	ontr		
Full Name (Last, First, Middle Initial)	Totalia of 4/10 c	onti		
B. Jennifer A. Sposito M.D.			Date of Disbursem	nent
Comment At. Opconto Wi.D.			M = M / D = D	/
Mailing Address 126 Cold Spring Rd			04 08	2015
· · ·	State Zip Code		Transaction ID :	D166023
Avon Purpose of Disbursement	CT 06001			
refund of 1/2015			Amount of Each D	isbursement this Period
Candidate Name		Category/		
		Type		100.00
	nent For: 2016			
	Primary General			
President State: District:	Other (specify) ▼ refund of 1/20	115		
Full Name (Last, First, Middle Initial)	Telulia di 1/20	,15		
C.			Date of Disbursem	nent
			M M / D D	/ Y Y Y Y Y
Mailing Address				
City	State Zip Code			
	•			
Purpose of Disbursement				
Candidate Name			Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disbursen	ment For:	Турс		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
				444.07
SUBTOTAL of Disbursements This Page (optional)		·····•		141.67
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TOTAL This Period (last page this line number only)				11121