Image# 201509189002702095 PAGE 1 / 340

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTAL OX	or Other Than An Aut	norized Committee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	, type 12FE4M5	
National Emergency M	edicine Political Action	on Committee		
ADDRESS (number and street)	1125 Executive Circle			
Check if different				
than previously reported. (ACC)	Irving		TX	75038
2. FEC IDENTIFICATION NU	MBER ▼ CIT	Y ▲	STATE ▲	ZIP CODE ▲
C C00140061		S THIS NE	\	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:			20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:				(Non-Election Year Only)
April 15		20 (M4) Ju	Oct :	20 (M10) Jan 31 (YE)
Quarterly Report (Q: July 15	(C) 12-Day	Primary (12P)	General	(12G) Runoff (12R)
Quarterly Report (Q2 October 15	Report for the:	Convention (12	PC) Special (12S)
Quarterly Report (Q:				in the
Year-End Report (YE July 31 Mid-Year		on on		State of
Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (3	OR) Special (30S)
Termination Report (TER)	Election	on on	D D / Y Y Y Y	in the State of
5. Covering Period 01	01 / 2015	through	M M / D D /	2015
I certify that I have examined this	s Report and to the best of	my knowledge and be	lief it is true, correct and	i complete.
Type or Print Name of Treasurer	Mr. Sam Cheng			
Signature of Treasurer Mr. Sc.	um Cheng	[Electronically I	Filed] Date 09	/ 18 / Y Y Y Y Y Y 2015
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the perso	n signing this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use				FEC FORM 3X Rev. 12/2004
Only		I I		

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Emergency Medicine Political Action Committee

Report Covering the Period: From: 01 01 2015 To: 06 30 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		317624.84
	(b) Cash on Hand at Beginning of Reporting Period	317624.84	
	(c) Total Receipts (from Line 19)	511427.64	511427.64
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	829052.48	829052.48
7.	Total Disbursements (from Line 31)	529158.70	529158.70
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	299893.78	299893.78
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Emergency Medicine Political Action Committee

ributions (other than loans) From: ndividuals/Persons Other Than Political Committees		
Than Political Committees		
	243144.60	243144.60
(i) Itemized (use Schedule A)	2-10-1-1-1-00	2 10 1100
ii) Unitemized	268280.85	268280.85
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	511425.45	511425.45
Political Party Committees	0.00	0.00
		7 7
	0.00	0.00
	511425.45	511425.45
Committees	0.00	0.00
pans Received	0.00	0.00
Repayments Received	0.00	0.00
	7	7
inds, Rebates, etc.)		
y Totals to Line 37, page 5)	0.00	0.00
nds of Contributions Made		
deral Candidates and Other		
cal Committees	0.00	0.00
r Federal Receipts		
. ,	2.19	2.19
	,	,
from Schedule H3)	0.00	0.00
evin Funds (from Schedule H5)	0.00	0.00
SVIII I dilas (ilem senedale 116)		
otal Transfers (add 18(a) and 18(b))	0.00	0.00
	Lines 11(a)(i) and (ii)	iii) TOTAL (add Lines 11(a)(i) and (ii)

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: (a) Allocated Federal/Non-Federal 		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		7
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0450.70	0450.70
Expenditures(c) Total Operating Expenditures	3158.70	3158.70
(add 21(a)(i), (a)(ii), and (b))▶	3158.70	3158.70
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	526000.00	526000.00
4. Independent Expenditures		, , , , , ,
(use Schedule E)	0.00	0.00
5. Coordinated Parfy Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made8. Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
man Folitical Committees	0.00	5.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
9. Other Disbursements	0.00	0.00
0. 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) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	529158.70	529158.70
2. Total Fadaval Diahuwa		
 Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 		
from Line 31)	529158.70	529158.70

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
33. Total Contributions (other than loans) (from Line 11(d), page 3)	511425.45	511425.45
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	511425.45	511425.45
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	3158.70	3158.70
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	3158.70	3158.70

	FOR LINE	NUMBER:	: PAG	iE 6	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	aГ

340

	d Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Emergency Medicine	•	
Full Name (Last, First, Middle Initial) Fred Abbuhl		Date of Receipt
Mailing Address 173 Clipp Rd		06 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Delmar	State Zip Code NY 12054-5303	Transaction ID : 20150619175314-5 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Physician Receipt For:	Occupation Emergency Physician Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Miguel A Acevedo Segui		Date of Receipt
Mailing Address 2326 Longmoore Ct	7: 0 :	06 01 2015
City Orlando	State Zip Code FL 32835-5962	Transaction ID: 1BBF7D27D947452DBB03 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer Florida Emergency Physicians Kang & As	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 17 McDermott Pl		06 10 2015
City Brigantine	State Zip Code NJ 08203-2934	Transaction ID : 222AA008AD931C6423E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	-
Physician Receipt For:	Emergency Physician Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional))	1600.00
TOTAL This Period (last page this line number	per only)	

FOR LINE NUMBER: **PAGE** 7 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ademola Adewale Date of Receipt Mailing Address 2514 Butler Bay Dr N 2015 City State Zip Code Transaction ID: 7197E2EB4DF343378C4D FL Windermere 34786-6110 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. David J Adinaro Date of Receipt Mailing Address 22 E Madison Ave 05 12 2015 City State Zip Code Transaction ID: 4722BB171E60896884E5 Florham Park NJ 07932-2634 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Celia M Aguilar Date of Receipt Mailing Address 105 Rose Owens Dr 18 2015 City State Zip Code Transaction ID: 20150619175314-89 NC Harbinger 27941-9787 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Team Health **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1425.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 8 OF 340 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) James B Aiken Mailing Address 81 Yosemite Dr City New Orleans FEC ID number of contributing federal political committee. Name of Employer Van Meter & Associates Receipt For: Primary General Other (specify)	State Zip Code LA 70131-8661 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt 03 12 2015 Transaction ID: 4C39AE258561608957A6 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) James B Aiken Mailing Address 81 Yosemite Dr City New Orleans FEC ID number of contributing federal political committee. Name of Employer Van Meter & Associates Receipt For: Primary General Other (specify)	State Zip Code LA 70131-8661 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) James B Aiken Mailing Address 81 Yosemite Dr City New Orleans FEC ID number of contributing federal political committee. Name of Employer Van Meter & Associates Receipt For: Primary General Other (specify)	State Zip Code LA 70131-8661 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt 05
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		250.02

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Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 11b	11c	12	
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) James B Aiken Mailing Address 81 Yosemite Dr City New Orleans	State Zip Code LA 70131-8661	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer Van Meter & Associates Receipt For: Primary General Other (specify)	Occupation Emergency Physician Aggregate Year-to-Date ▼	83.34
Full Name (Last, First, Middle Initial) Todd L Allen Mailing Address 2852 E Kennedy Dr City Salt Lake Cty	State Zip Code UT 84108-2119	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Utah Emergency Physicians Receipt For: Primary General Other (specify)	Occupation Emergency Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Marilyn Frances Althoff Mailing Address 55 Talmage Rd City Mendham FEC ID number of contributing federal political committee. Name of Employer Emergency Medical Associates New Jerse Receipt For: Primary General Other (specify)	State Zip Code NJ 07945-1531 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 05 27 2015 Transaction ID: 8C6B37D35EE8B92D9F7 Amount of Each Receipt this Period 400.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	733.34
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	Statements may not be sold or used by any perse 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) National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) Stephen H Anderson Mailing Address 34926 SE Brinkley St City	State Zip Code	Date of Receipt M
Snoqualmie FEC ID number of contributing federal political committee. Name of Employer Cascade Emergency Physicians Incorpora Receipt For: □ Primary □ General □ Other (specify) ▼	WA 98065-5059 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Jim V Antinori Mailing Address 3060 Oak Rim Ln City Park City FEC ID number of contributing federal political committee. Name of Employer	State Zip Code UT 84060-6803 C Occupation	Date of Receipt 04 03 2015 Transaction ID: 5073E22AF0774E2CBEA2 Amount of Each Receipt this Period
EPIC, LLC Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) Amit D Arwindekar Mailing Address 2043 W McLean Ave City Chicago FEC ID number of contributing federal political committee. Name of Employer Emergency Medical Physicians, PC Receipt For: Primary General Other (specify)	State Zip Code IL 60647-4532 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	Date of Receipt M M M / 2015 Transaction ID: 20150317A_1 Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	>	2483.33
TOTAL This Period (last page this line number	only)	

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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) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Amit D Arwindekar Mailing Address 2043 W McLean Ave City Chicago FEC ID number of contributing federal political committee. Name of Employer	State Zip Code IL 60647-4532 C Occupation	Date of Receipt 04 20 2015 Transaction ID: 42E22872EE304D2C8B76 Amount of Each Receipt this Period 100.00
Emergency Medical Physicians, PC Receipt For: Primary General Other (specify)	Emergency Physician Aggregate Year-to-Date ▼ 549.99	
Full Name (Last, First, Middle Initial) Amit D Arwindekar Mailing Address 2043 W McLean Ave City	State Zip Code	Date of Receipt 05 19 2015
City Chicago FEC ID number of contributing federal political committee.	State 2ip Code IL 60647-4532	Transaction ID: 20150518183743-1 Amount of Each Receipt this Period 100.00
Name of Employer Emergency Medical Physicians, PC Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	
Full Name (Last, First, Middle Initial) Amit D Arwindekar Mailing Address 2043 W McLean Ave	1	Date of Receipt 06 18 2015
City Chicago FEC ID number of contributing federal political committee. Name of Employer Emergency Medical Physicians, PC Receipt For: Primary General Other (specify) ▼	State Zip Code IL 60647-4532 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	Transaction ID : 20150619175314-91 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line numbe	r only)	

	FOR LINE	NUMBER:	: PAGE	E 12 OF	340
Use separate schedule(s)	(check only	/ one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
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	Statements may not be sold or used by any personal name and address of any political committee to	
NAME OF COMMITTEE (In Full)	The state of the s	
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial)		
Michael Oliver Ashwood		Date of Receipt
Mailing Address 26 Hamilton Ct		M = M / D = D / Y = Y = Y
City	State Zip Code	06 15 2015
Fairfield	CT 06824-7831	Transaction ID : EA0741D373A099C2DA6 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	
Franklin Medical Group	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)	•	Data of Daggint
Andrew Luke Aswegan Mailing Address 217 Dove Ln		Date of Receipt
aming / loaneess 21/ Dove Ln		04 08 _2015 _
City	State Zip Code	Transaction ID : 10541F0236A35F37077
Elkton	MD 21921-7643	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	
MEP Health LLC	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial)	1	
Bruce S Auerbach		Date of Receipt
Mailing Address 211 Park St		03 17 2015
City	State Zip Code	Transaction ID: 4E36AD7B627DD49EF124
Attleboro	MA 02703-3143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Sturdy Memorial Emergency Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
	7	
SUBTOTAL of Receipts This Page (optional)		1800.00
CODITION OF THE COPING THIS FAGE (OPHOHAI)		
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 13 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Bruce S Auerbach Date of Receipt Mailing Address 211 Park St 2015 City Zip Code State Transaction ID: 4DC08E14B7E68A141A3E Attleboro MA 02703-3143 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Sturdy Memorial Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bruce S Auerbach Date of Receipt Mailing Address 211 Park St 17 05 2015 City State Zip Code Transaction ID: 45648541831AC3E3B121 MA Attleboro 02703-3143 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Sturdy Memorial Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bruce S Auerbach Date of Receipt Mailing Address 211 Park St 17 2015 City Zip Code State Transaction ID: 4388B7327E71B6752DDE MA Attleboro 02703-3143 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Sturdy Memorial Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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

	FOF	R LINE	NU	IMBER	:	PAGE	1	14 OF	;	340
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) James Jerome Augustine Mailing Address 715 Yankee Trace Dr City Dayton FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code OH 45458-3999 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Rashid J Baddoura Mailing Address 120 Heights Rd City Ridgewood FEC ID number of contributing federal political committee. Name of Employer Valley Emergency Room Associates Receipt For: Primary General Other (specify)	State Zip Code NJ 07450-2412 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 04 28 2015 Transaction ID: 1D9489C441D44F4C9B79 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mark E Baier Mailing Address 15047 Berkshire Cir City Truckee FEC ID number of contributing federal political committee. Name of Employer Northern Nevada Emergency Physicians Receipt For: Primary General Other (specify)	State Zip Code CA 96161-1186 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1084.60	Date of Receipt 13 2015 Transaction ID: F68F7B5EF12646F58E41 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	2100.00
TOTAL This Period (last page this line number	only)	

	FO	R LINE	NU	MBER	:	PAGE	1	15 OF	=	34
Use separate schedule(s)	(che	eck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
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			13 14 15 16 17
Any or f	r information copied from such Reports and Stator commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
1	NAME OF COMMITTEE (In Full)		
\	National Emergency Medicine P	olitical Action Committee	
	Full Name (Last, First, Middle Initial) Mark E Baier		Date of Receipt
ľ	Mailing Address 15047 Berkshire Cir		06 24 _ 2015 _
(City	State Zip Code	Transaction ID : 2015062910844-308
_	Truckee	CA 96161-1186	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	84.60
1	Name of Employer	Occupation	
1	Northern Nevada Emergency Physicians	Emergency Physician	
Ē	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	1001.00	
	Other (specify) ▼	1084.60	
	Full Name (Last, First, Middle Initial) Mark Baker		Date of Receipt
	Mailing Address 34 Puukani Pl		M M / D D / Y Y Y Y
	Maining Address 34 Fuukanii Fi		04 30 _2015 _
(City	State Zip Code	Transaction ID : 2015050411131-221
_	Kailua	HI 96734-2928	Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C	100.00
1	Name of Employer	Occupation	
E	Emergency Medicine Physicians	Emergency Physician	
Ē	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	300.00	
	Full Name (Last, First, Middle Initial) Michael Baker		Date of Receipt
ر. ۱	Mailing Address 3680 Creekside Dr		
•	Jood Creekside Di		05 08 _2015 _
(City	State Zip Code	Transaction ID : FF581B75ED7439EA2BE
_	Ann Arbor	MI 48105-9308	Amount of Each Receipt this Period
F	FEC ID number of contributing		1200.00
	rederal political committee.	C	1200.00
1	Name of Employer	Occupation	
	Physician	Emergency Physician	
F	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	1200.00	
	Other (specify) ▼	1200.00	
SI	JBTOTAL of Receipts This Page (optional)		1384.60
TC	OTAL This Period (last page this line number o	nly)	

FOR LINE NUMBER: PAGE 16 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Katrina Barnett Date of Receipt Mailing Address 4182 Manuela Ave 2015 24 City State Zip Code Transaction ID: 2015062910844-263 CA Palo Alto 94306-3702 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation Fremont Emergency Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) B. Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 03 12 2015 City State Zip Code Transaction ID: 43E8A579E06D70720A58 MA **Newton Center** 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Tufts Medical Center EP, LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 04 12 2015 City Zip Code State Transaction ID: 42EF8FFF61797580D89E MA **Newton Center** 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Tufts Medical Center EP, LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 251.28 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 17 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 2015 City Zip Code State Transaction ID: 400684CEC982DCB81B37 **Newton Center** MA 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Tufts Medical Center EP, LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Brien Alfred Barnewolt Date of Receipt Mailing Address 68 Greenlawn Ave 06 12 2015 City State Zip Code Transaction ID: 45F48CE5C03C082801DD MA **Newton Center** 02459-1714 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Tufts Medical Center EP, LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Leigh Anderson Barrow Date of Receipt Mailing Address 2824 E 25th St 17 03 2015 City Zip Code State Transaction ID: 20150317A_3 OK Tulsa 74114-3214 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 250.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 18 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Leigh Anderson Barrow Date of Receipt Mailing Address 2824 E 25th St 04 20 2015 City Zip Code State Transaction ID: 20D7BDD5F07D479C9FF8 OK Tulsa 74114-3214 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Leigh Anderson Barrow Date of Receipt Mailing Address 2824 E 25th St 05 19 2015 City State Zip Code Transaction ID: 20150518183743-5 OK Tulsa 74114-3214 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Leigh Anderson Barrow Date of Receipt Mailing Address 2824 E 25th St 18 2015 City Zip Code State Transaction ID: 20150619175314-94 OK Tulsa 74114-3214 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Robert C Bassler Mailing Address 2822 E Alden PI City Anaheim FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code CA 92806-4403 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 284.60	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Michael P Bellino Mailing Address 714 Mawman Ave City Lake Bluff FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Other (specify)	State Zip Code IL 60044-2008 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 239.00	Date of Receipt 02 16 2015 Transaction ID: 20150218 74 Amount of Each Receipt this Period 239.00
Full Name (Last, First, Middle Initial) Jill Lynn Benson Mailing Address 105 Phacelia Way City Cary FEC ID number of contributing federal political committee. Name of Employer Wake Emergency Physicians PA Receipt For: Primary General Other (specify)	State Zip Code NC 27518-8951 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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FOR LINE NUMBER: PAGE 20 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Andrew I Bern Date of Receipt Mailing Address 9846 NW 18th St 2015 City State Zip Code Transaction ID: 40CAB155240502D164C5 FL **Coral Springs** 33071-5826 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Inphynet Team HIth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew I Bern Date of Receipt Mailing Address 9846 NW 18th St 04 12 2015 City State Zip Code Transaction ID: 41C2B7FDB31BEE7FB0C4 FL **Coral Springs** 33071-5826 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Inphynet Team HIth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Andrew I Bern Date of Receipt Mailing Address 9846 NW 18th St 12 2015 City State Zip Code Transaction ID: 4D9BB7914D7C88D0402F FL **Coral Springs** 33071-5826 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Inphynet Team HIth **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Andrew I Bern Mailing Address 9846 NW 18th St		Date of Receipt
City Coral Springs	State Zip Code FL 33071-5826	06 12 2015 Transaction ID : 45159632561F2944C8F9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Inphynet Team HIth Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) 3. Douglas M Bernstein Mailing Address 39 Alston Ave		Date of Receipt
City New Haven	State Zip Code CT 06515-2702	04 23 2015 Transaction ID : 2015050411131-21 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Physician	Occupation	150.00
Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Douglas M Bernstein Mailing Address 39 Alston Ave	1	Date of Receipt 04 23 2015
City New Haven	State Zip Code CT 06515-2702	Transaction ID : 2015050411131-29 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Physician Receipt For:	Occupation Emergency Physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	>	383.34
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 22 OF 340 Use separate schedule(s) (check only one) X 11a 11b 12 11c 13 14 15 16

for each category of the Detailed Summary Page 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael Bessette Date of Receipt Mailing Address 13 Oak Hill Rd 03 2015 City Zip Code State Transaction ID: 20150612192310-202 Chatham NJ 07928-1508 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates New Jerse Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dale Scott Birenbaum Date of Receipt Mailing Address 3298 Kentshire Blvd 04 27 2015 City State Zip Code Transaction ID: 3B4EF38BDDA846C28AA7 FL Ocoee 34761-4621 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael D Bishop Date of Receipt Mailing Address 1155 W 3rd St 30 2015 City Zip Code State Transaction ID: A1E04E737D43CE67D28 IN Bloomington 47404-5016 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 3400.00 SUBTOTAL of Receipts This Page (optional).....

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

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) Frederick C Blum Mailing Address 1470 Point Marion Rd City	Date of Receipt M = M	
Morgantown FEC ID number of contributing federal political committee. Name of Employer	State Zip Code WV 26508-1454 C Occupation	Amount of Each Receipt this Period 83.34
West Virginia University Hospital Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Frederick C Blum Mailing Address 1470 Point Marion Rd		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 Morgantown FEC ID number of contributing federal political committee.	State Zip Code WV 26508-1454	Transaction ID: 45E5BA5A6EE510B81CC0 Amount of Each Receipt this Period 83.34
Name of Employer West Virginia University Hospital Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Frederick C Blum Mailing Address 1470 Point Marion Rd City Morgantown	State Zip Code WV 26508-1454	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer West Virginia University Hospital Receipt For: Primary General Other (specify)	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	83.34
SUBTOTAL of Receipts This Page (optional)		250.02
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FOR LINE NUMBER: PAGE 24 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Frederick C Blum Date of Receipt Mailing Address 1470 Point Marion Rd 2015 City Zip Code State Transaction ID: 488E86452F303EAA9A09 WV Morgantown 26508-1454 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation West Virginia University Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Vincent Michael Blum Date of Receipt Mailing Address 2910 Sundance Path 04 21 2015 City State Zip Code Transaction ID: DC8666CC5665468EA4C1 Stevensville MI 49127-9380 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. Vincent Michael Blum Date of Receipt Mailing Address 2910 Sundance Path 05 05 2015 City State Zip Code Transaction ID: 20150508192310-15 MI Stevensville 49127-9380 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 533.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 25 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brooks F Bock Date of Receipt Mailing Address 1700 Lions Ridge Loop 2015 City State Zip Code Transaction ID: E8627EA9EAB74F4C98C0 CO Vail 81657-5757 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Medical Center Emergency Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brooks F Bock Date of Receipt Mailing Address 1700 Lions Ridge Loop 04 80 2015 City State Zip Code Transaction ID: C8D0C478FDCB72A96F3 CO Vail 81657-5757 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Medical Center Emergency Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Andrea N Boehland Date of Receipt Mailing Address 3234 Strand Rd 25 2015 City Zip Code State Transaction ID: 20150710125259-46 MN Duluth 55803-9758 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	MBER	:	PAGE	2	26	OF	340
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	Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Michael A Bohrn Mailing Address 70 Timberline Dr City Reading FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 19610-1970 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 03 12 2015 Transaction ID: 4F6ABA77BF3A495344EB Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Michael A Bohrn Mailing Address 70 Timberline Dr City Reading FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 19610-1970 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Keenan M Bora Mailing Address 3475 Ridgeline Ct City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MI 48105-2500 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional).	•	283.34
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NAME OF COMMITTEE (In Full)

National Emergency Medicine Political Action Committee

/							
Full Name (Last, First, Middle Initial) Keenan M Bora Mailing Address 3475 Ridgeline Ct	enan M Bora						
City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MI 48105-2500 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Transaction ID: 46EDB875F427D08A21EE Amount of Each Receipt this Period 83.34					
Full Name (Last, First, Middle Initial) Keenan M Bora Mailing Address 3475 Ridgeline Ct		Date of Receipt					
City Ann Arbor FEC ID number of contributing federal political committee.	State Zip Code MI 48105-2500	05 12 2015 Transaction ID: 4DD684E1FB76D7D65DDC Amount of Each Receipt this Period 83.34					
Name of Employer Physician Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04						
Full Name (Last, First, Middle Initial) Keenan M Bora Mailing Address 3475 Ridgeline Ct		Date of Receipt 06 12 2015					
City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MI 48105-2500 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Transaction ID: 46148AADA3FD1229AE29 Amount of Each Receipt this Period 83.34					
SUBTOTAL of Receipts This Page (optional	l) >	250.02					
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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) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Bradford J Bowls		Date of Receipt
Mailing Address 121 NW Ivanhoe Blvd		M = M / D = D / Y = Y = Y
City	State Zip Code	04 27 2015 Transaction ID : 602BE943B69D4AE384FD
Orlando	FL 32804-5958	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	1
Florida Emergency Physicians Kang & As	Emergency Physician]
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) General	1200.00	
Full Name (Last, First, Middle Initial) Jennifer H Bradstreet	· 	Date of Receipt
Mailing Address 249 S Franklin St		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	03 17 2015 Transaction ID : 20150317A_4
Chagrin Falls	OH 44022-3450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	1
Emergency Medicine Physicians Beceint For:	Emergency Physician	-
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) C. Jennifer H Bradstreet		Date of Receipt
Mailing Address 249 S Franklin St		04 20 / Y Y Y Y Y Y
City Chagrin Falls	State Zip Code OH 44022-3450	Transaction ID : 22BED281004F472EA2E7 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	-
Emergency Medicine Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	499.98	
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or for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) Jennifer H Bradstreet Mailing Address 249 S Franklin St City Chagrin Falls FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code OH 44022-3450 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 05 19 2015 Transaction ID: 20150518183743-6 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Jennifer H Bradstreet Mailing Address 249 S Franklin St City Chagrin Falls FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code OH 44022-3450 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Alkesh Brahmbhatt Mailing Address 1441 Langham Ter City Lake Mary FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 32746-1967 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M / 27 2015 Transaction ID: 83F7E214A7D642B48AB0 Amount of Each Receipt this Period 1200.00
SUBTOTAL of Receipts This Page (optional)	•	1366.66
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\	MMITTEE (In Full) Emergency Medicine F	Political Action Committee	
City Alexandria FEC ID numb federal politica Name of Emp University of V Receipt For: Primary Other (s	er of contributing all committee.	State Zip Code VA 22315-1295 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 416.70	Date of Receipt 03 12 2015 Transaction ID: 4456A441A6B0AE773E7B Amount of Each Receipt this Period 83.34
City Alexandria FEC ID numb federal politica Name of Emp University of V Receipt For: Primary Other (s	er of contributing all committee.	State Zip Code VA 22315-1295 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 416.70	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 Alexandria FEC ID numb federal politica Name of Emp University of V Receipt For: Primary		State Zip Code VA 22315-1295 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 416.70	Date of Receipt M
SUBTOTAL of F	Receipts This Page (optional)	>	250.02
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NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial)		
A. A Compton Broders		Date of Receipt
Mailing Address 4022 Shannon Ln		M = M / D = D / Y = Y = Y
City	State Zip Code	03 28 2015 Transaction ID : 4ECBC785-15D9-48B7-
Dallas	TX 75205-1737	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	2500.00	
Full Name (Last, First, Middle Initial) 3. Robert I Broida		Date of Receipt
Mailing Address 2450 Stockbridge Rd		M = M / D = D / Y = Y = Y
	7. 6	01 07 2015
City	State Zip Code OH 44313-4580	Transaction ID : 30D722CD-FB09-4B52-
Akron	OH 44313-4580	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	
Emergency Medicine Physician Managemen	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 9251 Lawing School Rd		M M / D D / Y Y Y Y
		03 17 2015
City Charlotte	State Zip Code NC 28214-8694	Transaction ID : 20150317A_5
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Emergency Medicine Physicians	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	499.98	
SUBTOTAL of Receipts This Page (optional).		3783.33
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TOTAL This Period (last page this line number	er only)	

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Eric D Brown Mailing Address 9251 Lawing School Rd City Charlotte FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General	State Zip Code NC 28214-8694 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt O4 20 2015 Transaction ID: D2456AEA26E549D097D9 Amount of Each Receipt this Period 83.33
Other (specify) ▼ Full Name (Last, First, Middle Initial) Bric D Brown Mailing Address 9251 Lawing School Rd City	State Zip Code	Date of Receipt M
Charlotte FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: □ Primary □ General Other (specify) ▼	NC 28214-8694 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Eric D Brown Mailing Address 9251 Lawing School Rd City Charlotte FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code NC 28214-8694 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	249.99
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 33 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Willie Charles Bruce Date of Receipt Mailing Address 126 Enclave Ave 2015 City State Zip Code Transaction ID: 2106AD311C3E53E67C3 FL Deland 32724-8072 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Burton Date of Receipt Mailing Address 3875 Geist Rd Ste E381 05 31 2015 City State Zip Code Transaction ID: 2015060313759-193 AK Fairbanks 99709-3564 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joel E Buzy Date of Receipt Mailing Address 10409 Snapdragon PI 04 21 2015 City Zip Code State Transaction ID: D77F7E87D3A6498D82E5 MD North Potomac 20878-4324 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Joel E Buzy Mailing Address 10409 Snapdragon PI City North Potomac FEC ID number of contributing federal political committee. Name of Employer MEP Health LLC Receipt For: Primary General Other (specify)	State Zip Code MD 20878-4324 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 05 05 2015 Transaction ID: 3A5998BB9E3542B7972A Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Joel E Buzy Mailing Address 10409 Snapdragon PI City North Potomac FEC ID number of contributing federal political committee. Name of Employer MEP Health LLC Receipt For: Primary General Other (specify)	State Zip Code MD 20878-4324 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Amabel-Jovan C Cabatu Mailing Address 14081 Portrush Dr City Orlando FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 32828-8241 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt O4 27 2015 Transaction ID: 5D99205C11B348858F8D Amount of Each Receipt this Period 1200.00
SUBTOTAL of Receipts This Page (optional)		1400.00
TOTAL This Period (last page this line number	r only)	

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Folitical Action Committee	
Full Name (Last, First, Middle Initial) A. Christina Campana		Date of Receipt
Mailing Address 4960 Shady Brooke Run		05 26 2015
City	State Zip Code	Transaction ID : 2015060313759-24
Medina	OH 44256-8279	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
General Emer Med Specialists	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) 3. Gregory Cannon		Date of Receipt
Mailing Address 129 Loch Pointe Dr		M = M / D = D / Y = Y = Y
City	State Zin Code	06 11 2015
City Cary	State Zip Code NC 27518-8418	Transaction ID : DFD4420C8A494C06BAC5
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer	Occupation	
Wake Emergency Physicians PA	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) 2. Jesse Caron		Date of Receipt
Mailing Address 2000 Temple Dr		04 27 _2015 _
City	State Zip Code	Transaction ID : A1B463FBC63344A1BD44
Winter Park	FL 32789-1667	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1200.00	
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Champions Gate FL 33896-8387 Amount of Each Receipt this Period C 250.00 Name of Employer Team Health Receipt For: Primary Other (specify) ▼ Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)			
NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jorge L Carreras Mailing Address 8297 Champions Gate Blvd	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 t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Mailing Address 8297 Champions Gate Blvd Apt 417 City Champions Gate FEC ID number of contributing federal political committee. Name of Employer Team Health Receipt For: Primary Other (specify) ▼ Date of Receipt MMM / Dub / 420 2015 Transaction ID : 6BA4ACD232204C5EB9. Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)	NAME OF COMMITTEE (In Full)		
	Mailing Address 8297 Champions Gate Blvd Apt 417 City Champions Gate FEC ID number of contributing federal political committee. Name of Employer Team Health Receipt For: Primary General	State Zip Code FL 33896-8387 C Occupation Emergency Physician Aggregate Year-to-Date ▼	04 20 2015 Transaction ID : 6BA4ACD232204C5EB943 Amount of Each Receipt this Period
Mailing Address 5156 Baker Ridge Dr City Columbus FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary Other (specify) ▼ Date of Receipt Name of Receipt Transaction ID: 20150317A 6 Amount of Each Receipt this Period Amount of Each Receipt this Period Aggregate Year-to-Date ▼ S85.00	Mailing Address 5156 Baker Ridge Dr City Columbus FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General	OH 43228-1794 C Occupation Emergency Physician Aggregate Year-to-Date ▼	03 17 2015 Transaction ID: 20150317A 6 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) John Casey Mailing Address 5156 Baker Ridge Dr City Columbus FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify) Other (specify) Date of Receipt MM	Mailing Address 5156 Baker Ridge Dr City Columbus FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General	OH 43228-1794 C Occupation Emergency Physician Aggregate Year-to-Date ▼	04 20 2015 Transaction ID : A09F4339FA864AD5A9CD Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		<u> </u>	450.00

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John Casey Date of Receipt Mailing Address 5156 Baker Ridge Dr 2015 City Zip Code State Transaction ID: 20150518183743-8 OH Columbus 43228-1794 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 585.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Casey Date of Receipt Mailing Address 5156 Baker Ridge Dr 06 18 2015 City State Zip Code Transaction ID: 20150619175314-98 OH Columbus 43228-1794 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 585.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael David Cawdery Date of Receipt Mailing Address 2755 Herndon Ave 26 2015 Clovis Community Medical CenterEme City Zip Code State Transaction ID: 20150710125259-167 CA Clovis 93611-6800 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation **CEP America Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) 400.00 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kahang Lee Chan Date of Receipt Mailing Address 1618 Bridgewater Dr 2015 27 City State Zip Code Transaction ID: 1578AB24447D4C02BE60 32746-4103 FL Lake Mary Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Name of Employer Occupation **Emergency Physician** Florida Emergency Physicians Kang & As Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elaine Jannine Chiu Date of Receipt Mailing Address 1818 Blake St 06 24 2015 City State Zip Code Transaction ID: 2015062910844-136 Berkeley CA 94703-1904 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee.

	Receipt For: Primary General Other (specify) Other	Emergency Physician Aggregate Year-to-Date ▼ 284.60	
C.	Full Name (Last, First, Middle Initial) Mary Anna Chiu Mailing Address 10220 N Orchard Ln		Date of Receipt M = M
	City Spokane FEC ID number of contributing federal political committee.	State Zip Code WA 99208-5523	Transaction ID: AF547D06D91845298E50 Amount of Each Receipt this Period 250.00
	Name of Employer Physician Receipt For:	Occupation Emergency Physician Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
Ι,	OUDTOTAL (D Ti: D /		1534 60

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mary Anna Chiu Date of Receipt Mailing Address 10220 N Orchard Ln 30 2015 City State Zip Code Transaction ID: 0AD20564EF8041D9AE5C 99208-5523 WA Spokane Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Emergency Physician** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shih-Chin Chou Date of Receipt Mailing Address 14003 Copperwillow Ct 04 09 2015 City State Zip Code Transaction ID: 675B78D4-7749-46E4-TX 77044-5533 Houston Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For

	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 565.00	
C.	Mailing Address 14003 Copperwillow Ct		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City Houston FEC ID number of contributing	State Zip Code TX 77044-5533	Transaction ID: 2015050411131-69 Amount of Each Receipt this Period 200.00
	federal political committee. Name of Employer Physician Receipt For: □ Primary □ General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 565.00	

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Steve C Christos Date of Receipt Mailing Address 1620 Primrose Ln 2015 City State Zip Code Transaction ID: 2015050411131-203 Glenview IL 60026-7767 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** L Anthony Cirillo Date of Receipt Mailing Address 91 Woodridge Dr 03 17 2015 City State Zip Code Transaction ID: 20150317A_7 Saunderstown RΙ 02874-1943 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. L Anthony Cirillo Date of Receipt Mailing Address 91 Woodridge Dr 04 20 2015 City State Zip Code Transaction ID: 7435E7B8397641DE9538 RΙ Saunderstown 02874-1943 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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 personame 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)		
National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) 1. L Anthony Cirillo		Date of Receipt
Mailing Address 91 Woodridge Dr		05 19 2015
City	State Zip Code	Transaction ID : 20150518183743-9
Saunderstown	RI 02874-1943	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Emergency Medicine Physician Managemen	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) 3. L Anthony Cirillo		Date of Receipt
		Date of Receipt
Mailing Address 91 Woodridge Dr		06 18 _2015 _
City	State Zip Code	06 18 2015 Transaction ID : 20150619175314-99
Saunderstown	RI 02874-1943	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	100.00
Name of Employer	Occupation	
Emergency Medicine Physician Managemen	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Leonardo Cisneros		Date of Receipt
Mailing Address 2365 Forrest Rd		
2303 FUTESL RU		04 27 2015
City	State Zip Code	Transaction ID : 489CDBB0B1934C28813B
Winter Park	FL 32789-6028	Amount of Each Receipt this Period
FEC ID number of contributing	C	1200.00
federal political committee.		1200.00
Name of Employer	Occupation	
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1200.00	
Cities (obecity)	1200.00	
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١.	Full Name (Last, First, Middle Initial) Michael R Clark		Date of Receipt
	Mailing Address 3106 Swallow Ln		04 23 2015
	City	State Zip Code	Transaction ID : 3D2763E20C7550F3781
	Wausau	WI 54401-7262	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	Ministry Medical Group	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
3.	Full Name (Last, First, Middle Initial) David James Claypool		Date of Receipt
	Mailing Address 1473 E Starpass Dr		06 24 2015
	City	State Zip Code	Transaction ID: 2015062910844-95
	Fresno	CA 93730-3446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	84.60
	Name of Employer Community Medical Providers Medical Gr	Occupation Emergency Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 284.60	
_	Full Name (Last, First, Middle Initial) R Carter Clements		Date of Receipt
•	Mailing Address 5558 Taft Ave		03 12 2015
	City	State Zip Code	Transaction ID : 4AD1B6EBAFDB9D8391
	Oakland	CA 94618-1519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.34
	Name of Employer	Occupation	
	Oakcare Medical Group	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.04	

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) R Carter Clements Date of Receipt Mailing Address 5558 Taft Ave 2015 City Zip Code State Transaction ID: 436A91C316EA0FBD098E CA Oakland 94618-1519 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Oakcare Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) **B.** R Carter Clements Date of Receipt Mailing Address 5558 Taft Ave 05 12 2015 City State Zip Code Transaction ID: 4E4FBDD7ABEED0462148 CA Oakland 94618-1519 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Oakcare Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. R Carter Clements Date of Receipt Mailing Address 5558 Taft Ave 12 2015 Zip Code City State Transaction ID: 4F35BFA7A96BA42E35F1 CA Oakland 94618-1519 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Oakcare Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Daniel J Cole Date of Receipt Mailing Address 1329 N 22nd St 2015 02 City State Zip Code Transaction ID: 58E170E568DF4B5FB471 Fort Dodge IΑ 50501-2117 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation **Emergency Practice Associates Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Orion J Colfer Date of Receipt Mailing Address 2523 Hanover Ave 05 19 2015 City State Zip Code Transaction ID: 20150518183743-10 VA Richmond 23220-4003 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Orion J Colfer Date of Receipt Mailing Address 2523 Hanover Ave 18 2015 City Zip Code State Transaction ID: 20150619175314-100 Richmond VA 23220-4003 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 45 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Amy Ruben Conley Date of Receipt Mailing Address 6419 Renwick Cir 2015 City State Zip Code Transaction ID: 855B0560-F0C7-4C04-FL Tampa 33647-1173 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Tampa Bay Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Justin D Coomes Date of Receipt Mailing Address 600 12th Ave S Apt 719 06 18 2015 City State Zip Code Transaction ID: 20150619175314-101 TN Nashville 37203-6621 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Raymond Cooney Date of Receipt Mailing Address 15 Ash St 03 12 2015 City Zip Code State Transaction ID: 4967ACBA53B918D81844 PΑ Danville 17821-1101 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 783.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Robert Raymond Cooney Mailing Address 15 Ash St City Danville FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 17821-1101 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Robert Raymond Cooney Mailing Address 15 Ash St City Danville FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 17821-1101 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M
Full Name (Last, First, Middle Initial) Robert Raymond Cooney Mailing Address 15 Ash St City Danville FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary Other (specify)	State Zip Code PA 17821-1101 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M
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)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
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NAME OF COMMITTEE (In Full) National Emergency Medicine Politi	cal Action Committee	
Colleyville FEC ID number of contributing federal political committee. Name of Employer Physician Coccuphysician Coccuphysician Coccuphysician	tate Zip Code X 76034-7319 supation ergency Physician gregate Year-to-Date ▼ 2700.00	Date of Receipt O4 03 2015 Transaction ID: 72506B3E-7B80-4B7A- Amount of Each Receipt this Period 2500.00
Uniontown FEC ID number of contributing federal political committee.	tate Zip Code 0H 44685-6244 cupation	Date of Receipt 03 17 2015 Transaction ID: 20150317A 9 Amount of Each Receipt this Period 83.33
Receipt For: Primary General Other (specify) ▼	ergency Physician gregate Year-to-Date ▼ 499.98	
Uniontown FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Emergency Medicine Physician Managemen	tate Zip Code DH 44685-6244 Eupation ergency Physician gregate Year-to-Date ▼ 499.98	Date of Receipt M M M / 20 2015 Transaction ID: D5F7883953114547B69E Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)		2666.66
TOTAL This Period (last page this line number only).		

FOR LINE NUMBER: PAGE 48 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Christopher Corbit Date of Receipt Mailing Address 1075 Mornington Cir 2015 City Zip Code State Transaction ID: 20150518183743-12 OH Uniontown 44685-6244 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher Corbit Date of Receipt Mailing Address 1075 Mornington Cir 06 18 2015 City State Zip Code Transaction ID: 20150619175314-102 OH Uniontown 44685-6244 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Melissa Wysong Costello Date of Receipt Mailing Address 3762 Oakwood Ln 12 2015 City State Zip Code Transaction ID: 49519D6D11387CA6B6CA AL Mobile 36608-2009 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 816.67 Other (specify) 366.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 49 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Melissa Wysong Costello Date of Receipt Mailing Address 3762 Oakwood Ln 2015 City State Zip Code Transaction ID: 4B6687EED38E73B6A174 36608-2009 Mobile AL Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 816.67 Other (specify) Full Name (Last, First, Middle Initial) B. Melissa Wysong Costello Date of Receipt Mailing Address 3762 Oakwood Ln 04 12 2015 City State Zip Code Transaction ID: 437AA16F4FC84709C5E0 AL Mobile 36608-2009 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 816.67 Other (specify) Full Name (Last, First, Middle Initial) c. Melissa Wysong Costello Date of Receipt Mailing Address 3762 Oakwood Ln 05 10 2015 City State Zip Code Transaction ID: 20150518182247-36 AL Mobile 36608-2009 Amount of Each Receipt this Period FEC ID number of contributing C 16.67 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 816.67 Other (specify) 416.67 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kathleen Cowling Date of Receipt Mailing Address 3400 Midland Rd 04 2015 21 City State Zip Code Transaction ID: E7A69986-0399-4A24-Saginaw MI 48603-9634 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Howard Jeffery Croft Date of Receipt Mailing Address 10712 N Beechwood Dr 06 19 2015 City State Zip Code Transaction ID: 1A1840129237FAEEF2F WI Mequon 53092-5979 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Infinity Healthcare Incorporated **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Michael Cusick Date of Receipt Mailing Address 1077 Race St 03 12 2015 Apt 702 City Zip Code State Transaction ID: 43F09A9043339F0E6207 CO Denver 80206-2832 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) 1883.34 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Steven Edward Davis Date of Receipt Mailing Address 444 Dillon Cir NE 08 2015 City Zip Code State Transaction ID: 20150612192310-21 OH North Canton 44720-7863 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Canton Aultman Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 02 13 2015 City State Zip Code Transaction ID: 734B14AE0430497A9D51 VA Abingdon 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 03 13 2015 City Zip Code State Transaction ID: 7D8DD4D41D5E4A23A3CB Abingdon VA 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 52 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 2015 City Zip Code State Transaction ID: D65F0E081812401B9C3E VA Abingdon 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 05 13 2015 City State Zip Code Transaction ID: 896437D91615474DB8E5 VA Abingdon 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian C Dawson Date of Receipt Mailing Address 359 Augusta Dr 13 2015 City Zip Code State Transaction ID: B26FB54BFA41406391F4 Abingdon VA 24211-3805 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 53 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Robert J Day Date of Receipt Mailing Address 1720 Oak Leaf Ln 2015 City State Zip Code Transaction ID: 00A4BDAF-AE71-4237-OH 43065-9516 Powell Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carrie de Moor Date of Receipt Mailing Address 4701 Paxton Ln 03 06 2015 City State Zip Code Transaction ID: 4F6693245B83AA327BBC TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 227.50 federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1002.50 Other (specify) Full Name (Last, First, Middle Initial) c. Carrie de Moor Date of Receipt Mailing Address 4701 Paxton Ln 30 03 2015 City State Zip Code Transaction ID: 2015040384953-45 TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1002.50 Other (specify) 1452.50 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Carrie de Moor Date of Receipt Mailing Address 4701 Paxton Ln 06 2015 City State Zip Code Transaction ID: 4CC7818189477B33561E TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 227.50 federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1002.50 Other (specify) Full Name (Last, First, Middle Initial) B. Carrie de Moor Date of Receipt Mailing Address 4701 Paxton Ln 05 06 2015 City State Zip Code Transaction ID: 4E6A83BE424157D8DF2B TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 227.50 federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1002.50 Other (specify) Full Name (Last, First, Middle Initial) c. Carrie de Moor Date of Receipt Mailing Address 4701 Paxton Ln 06 2015 City Zip Code State Transaction ID: 4DFD8A51176804E90FE1 TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 227.50 С federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1002.50 Other (specify) 682.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 55 OF 340 Use separate schedule(s) (check only one) X 11a 11b 12 11c 13 14 15 16

for each category of the Detailed Summary Page 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Carrie de Moor Date of Receipt Mailing Address 4701 Paxton Ln 2015 25 City State Zip Code Transaction ID: 20150710125259-68 TX Frisco 75034-2209 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1002.50 Other (specify) Full Name (Last, First, Middle Initial) B. Wendy DeMartino Date of Receipt Mailing Address 19 Little Pine Ln 03 17 2015 City State Zip Code Transaction ID: 20150317A_10 NH Exeter 03833-3109 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Wendy DeMartino Date of Receipt Mailing Address 19 Little Pine Ln 20 04 2015 City Zip Code State Transaction ID: 2B6E11ADD3354F5F8D87 NH Exeter 03833-3109 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 191.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 56 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Wendy DeMartino Date of Receipt Mailing Address 19 Little Pine Ln 2015 City Zip Code State Transaction ID: 20150518183743-13 NH Exeter 03833-3109 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Wendy DeMartino Date of Receipt Mailing Address 19 Little Pine Ln 06 18 2015 City State Zip Code Transaction ID: 20150619175314-103 NH Exeter 03833-3109 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Clifford J Denney Date of Receipt Mailing Address 3603 Ethan Ln 04 27 2015 City State Zip Code Transaction ID: E6CCFFA0BE8948A98515 FL Orlando 32814-6571 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 1366.66 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 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) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Fred Dennis Mailing Address 22287 Mulholland Hwy Ste 187 City Calabasas FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary Other (specify)	State Zip Code CA 91302-5157 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 03 12 2015 Transaction ID: 413DB85E7A3EDBF2A317 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Paul DePonte Mailing Address 107 Baytree Ct City Winter Spgs FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary Other (specify) Other (specify)	State Zip Code FL 32708-5122 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jno Jacob Disch Mailing Address 3892 Savoy Dr City Cleveland FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code OH 44126-1766 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 06 01 2015 Transaction ID: 20150612192310-156 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	•	2300.00
TOTAL This Period (last page this line number	r 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Christopher I Doty Date of Receipt Mailing Address 1200 Birmingham Ln 2015 City State Zip Code Transaction ID: 5197CEE9-B4E7-4316-KY Lexington 40513-1735 Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Name of Employer Occupation SUNY Brooklyn Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ryan M Dowden Date of Receipt Mailing Address 2080 Silver Maple Trl 01 27 2015 City State Zip Code Transaction ID: 20150130_120 North Liberty IΑ 52317-4765 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ryan M Dowden Date of Receipt Mailing Address 2080 Silver Maple Trl 04 28 2015 City State Zip Code Transaction ID: 2015050411131-102 IA North Liberty 52317-4765 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE 59 OF	340							
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for each category of the Detailed Summary Page	X 11a 11b	11c 12								
,	13 14	15 16	17							

Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any per g the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	ne Political Action Committee	
Full Name (Last, First, Middle Initial) Marc M Dreier Mailing Address 295 Richards Rd City Ridgewood FEC ID number of contributing federal political committee. Name of Employer Valley Emergency Room Associates Receipt For: Primary General Other (specify)	State Zip Code NJ 07450-1009 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt 04 07 2015 Transaction ID: 39005CE9BB0B43ACB099 Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Reva Dubin Mailing Address 547 Park Rd City Mays Landing FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code NJ 08330-1917 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 375.00	Date of Receipt 03 04 2015 Transaction ID: 521EB367BC9F4F1F8C66 Amount of Each Receipt this Period 75.00
Full Name (Last, First, Middle Initial) Reva Dubin Mailing Address 547 Park Rd City Mays Landing FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code NJ 08330-1917 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 375.00	Date of Receipt 04 03 2015 Transaction ID: 624CE94E026347FCA83B Amount of Each Receipt this Period 75.00
SUBTOTAL of Receipts This Page (options	al)	1350.00
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\ NA	AME OF COMMITTEE (In Full)		
\	lational Emergency Medicine P	olitical Action Committee	
	ıll Name (Last, First, Middle Initial) Reva Dubin		Date of Receipt
Ma	ailing Address 547 Park Rd		M = M / D = D / Y = Y = Y
Cit	tv	State Zip Code	05 05 2015 Transaction ID: 04295CF0DDB543B18D27
	ays Landing	NJ 08330-1917	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	75.00
Na	ame of Employer	Occupation	
Ph	nysician	Emergency Physician	
	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	375.00	
	III Name (Last, First, Middle Initial) David Alan Dubow		Date of Receipt
ıvlö	ailing Address 2609 Crofton Springs Dr		04 15 _2015 _
Cit	ty	State Zip Code	Transaction ID : 43D06EFF98914E59BCD8
	aleigh	NC 27615-4059	Amount of Each Receipt this Period
	EC ID number of contributing		
	deral political committee.	C	50.00
	ame of Employer	Occupation	
Wa	ake Emergency Physicians PA	Emergency Physician	
Re	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	350.00	
	III Name (Last, First, Middle Initial) David Alan Dubow		Date of Receipt
	ailing Address 2609 Crofton Springs Dr		05 11 2015
Cit		State Zip Code	Transaction ID: 20150511155714-7
R	aleigh	NC 27615-4059	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	50.00
	ame of Employer	Occupation	
	ake Emergency Physicians PA	Emergency Physician	
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-	Primary General	350.00	
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David Alan Dubow Date of Receipt Mailing Address 2609 Crofton Springs Dr 2015 City Zip Code State Transaction ID: A9ADEAC84EE047A1827B NC Raleigh 27615-4059 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Olly C Duckett Date of Receipt Mailing Address 325 Meeting House Cir 06 2015 11 City State Zip Code Transaction ID: 5946070255154A24A489 NC Raleigh 27615-3133 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gannon T Dudlar Date of Receipt Mailing Address 243 W Scott St 06 23 2015 Apt 2 City State Zip Code Transaction ID: 201506297551-52 IL Chicago 60610-1865 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation MEA Management LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Irv E Edwards Date of Receipt Mailing Address 111 N Sepulveda Blvd Ste 210 2015 City State Zip Code Transaction ID: 4510B07885CF7E53741F CA Manhattan Bch 90266-6849 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Emergent Medical Associates Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Irv E Edwards Date of Receipt Mailing Address 111 N Sepulveda Blvd Ste 210 05 12 2015 City State Zip Code Transaction ID: 4C7D8EEDAE26E1F88642 Manhattan Bch CA 90266-6849 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Emergent Medical Associates Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Emile El-Shammaa Date of Receipt Mailing Address 287 Bristol Way 30 2015 City Zip Code State Transaction ID: AAD5604759250CB692D OH Worthington 43085-3272 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Clifford Erickson Mailing Address 31 Forest Dr City Voorheesville FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code NY 12186-9530 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 360.26	Date of Receipt M M M / 20
Full Name (Last, First, Middle Initial) Clifford Erickson Mailing Address 31 Forest Dr City Voorheesville FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code NY 12186-9530 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 360.26	Date of Receipt M M J D D J 2015 Transaction ID: 20150518183743-14 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Clifford Erickson Mailing Address 31 Forest Dr City Voorheesville FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code NY 12186-9530 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 360.26	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) William Basil Felegi Date of Receipt Mailing Address 731 Red Lion Way 09 2015 City State Zip Code Transaction ID: 4CE1ACD5FCA07CA6955E 08807-1668 Bridgewater NJ Amount of Each Receipt this Period FEC ID number of contributing 625.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates New Jerse Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) Full Name (Last, First, Middle Initial) B. David N Ferrand Date of Receipt Mailing Address 193 Bryna Ln 03 17 2015 City State Zip Code Transaction ID: 20150317A_12 PA Carnegie 15106-1473 Amount of Each Receipt this Period FEC ID number of contributing 88.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.98 Other (specify) Full Name (Last, First, Middle Initial) c. David N Ferrand Date of Receipt Mailing Address 193 Bryna Ln 04 20 2015 City State Zip Code Transaction ID: 70CF0CFBB3F94FA4A918 PΑ Carnegie 15106-1473 Amount of Each Receipt this Period FEC ID number of contributing 88.33 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.98 Other (specify) 801.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David N Ferrand Date of Receipt Mailing Address 193 Bryna Ln 2015 City Zip Code State Transaction ID: 20150518183743-15 PΑ Carnegie 15106-1473 Amount of Each Receipt this Period FEC ID number of contributing 88.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.98 Other (specify) Full Name (Last, First, Middle Initial) B. David N Ferrand Date of Receipt Mailing Address 193 Bryna Ln 06 18 2015 City State Zip Code Transaction ID: 20150619175314-106 PA Carnegie 15106-1473 Amount of Each Receipt this Period FEC ID number of contributing 88.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.98 Other (specify) Full Name (Last, First, Middle Initial) c. Clifford Findeiss Date of Receipt Mailing Address 2824 NE 27th St 03 25 2015 City State Zip Code Transaction ID: 2015040384953-63 FL Ft Lauderdale 33306-1913 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 676.66 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John T Finnell II Date of Receipt Mailing Address 505 S 5th St 2015 City Zip Code State Transaction ID: 4DDB9CDD2D01C01BCFE Zionsville IN 46077-1745 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Indiana University Health Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. John T Finnell II Date of Receipt Mailing Address 505 S 5th St 04 12 2015 City State Zip Code Transaction ID: 4A4E95314FC4D73433E3 IN Zionsville 46077-1745 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Indiana University Health Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. John T Finnell II Date of Receipt Mailing Address 505 S 5th St 12 2015 City Zip Code State Transaction ID: 41918B1769082EEDF5CE IN Zionsville 46077-1745 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Indiana University Health Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. John T Finnell II		Date of Receipt
Mailing Address 505 S 5th St		06 12 2015
City	State Zip Code	Transaction ID : 41E28F7AEB078ECC6CF8
Zionsville	IN 46077-1745	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Indiana University Health Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial) 3. Angela Siler Fisher		Date of Receipt
Mailing Address 2211 Bolsover St		M = M / D = D / Y = Y = Y
City	State Zip Code	02 12 2015
Houston	TX 77005-2623	Transaction ID : 4248AC0E5061D9713C23 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Baylor College of Medicine Emergency M	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Angela Siler Fisher		Date of Receipt
Mailing Address 2211 Bolsover St		05 12 2015 _
City	State Zip Code	Transaction ID : 4250AC5C854D3ED09808
Houston	TX 77005-2623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Baylor College of Medicine Emergency M	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jason M Fisher Date of Receipt Mailing Address 20480 Royal Stone Dr 2015 24 City State Zip Code Transaction ID: 2015062910844-200 CA Malibu 90265-5346 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) B. Diana L Fite Date of Receipt Mailing Address 27127 Bridleway Cir 03 27 2015 City State Zip Code Transaction ID: 89A7B938D2A6443591B2 TX Magnolia 77355-2224 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Diana L Fite Date of Receipt Mailing Address 27127 Bridleway Cir 04 27 2015 City State Zip Code Transaction ID: EA8A6B7CD8BE45AE833D TX Magnolia 77355-2224 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 284.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Diana L Fite Date of Receipt Mailing Address 27127 Bridleway Cir 2015 27 City State Zip Code Transaction ID: 02197DF7923541EA86AE TX Magnolia 77355-2224 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diana L Fite Date of Receipt Mailing Address 27127 Bridleway Cir 06 27 2015 City State Zip Code Transaction ID: 2C67C3F073EB4474B465 TX Magnolia 77355-2224 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Juan Francisco Fitz Date of Receipt Mailing Address 6003 84th St 03 12 2015 City Zip Code State Transaction ID: 4A8D853058813A7921A5 TX Lubbock 79424-3686 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **Emergency Aeromedical Specialist Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 283.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 70 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Juan Francisco Fitz Date of Receipt Mailing Address 6003 84th St 2015 City Zip Code State Transaction ID: 4E9AB81FCE6F8404FAB3 Lubbock TX 79424-3686 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Emergency Aeromedical Specialist Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Juan Francisco Fitz Date of Receipt Mailing Address 6003 84th St 05 12 2015 City State Zip Code Transaction ID: 4C1796C826BA17ABE31B TX Lubbock 79424-3686 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Emergency Aeromedical Specialist Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Juan Francisco Fitz Date of Receipt Mailing Address 6003 84th St 12 2015 City Zip Code State Transaction ID: 4CFEA972FC5169DC0DE2 Lubbock TX 79424-3686 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **Emergency Aeromedical Specialist Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Charles A Fleischner Date of Receipt Mailing Address 9 Galbraith Rd 2015 25 City Zip Code State Transaction ID: 33380E70-40E9-402B-NY Suffern 10901-3326 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Kelly Foley Date of Receipt Mailing Address 1133 Pond Cypress Dr 03 12 2015 City State Zip Code Transaction ID: 46AC90D8AC83D45DC9C5 VA Virginia Beach 23455-6859 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Emergency Physicians of Tidewater Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Kelly Foley Date of Receipt Mailing Address 1133 Pond Cypress Dr 04 12 2015 Zip Code State Transaction ID: 488082036ADAB7156D39 Virginia Beach VA 23455-6859 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation **Emergency Physicians of Tidewater Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 1366.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Kelly Foley Mailing Address 1133 Pond Cypress Dr City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Emergency Physicians of Tidewater Receipt For: Primary General Other (specify)	State Zip Code VA 23455-6859 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M
Full Name (Last, First, Middle Initial) Kelly Foley Mailing Address 1133 Pond Cypress Dr City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Emergency Physicians of Tidewater Receipt For: Primary General Other (specify)	State Zip Code VA 23455-6859 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M / D D D / 2015 Transaction ID: 4AA4BBEA49B106A0E3DF Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Matt John Frankovsky Mailing Address 1360 N Rockridge Rd City Flagstaff FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code AZ 86001-1146 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Daniel Freess Date of Receipt Mailing Address 55 Soby Dr 2015 City State Zip Code Transaction ID: 20150317A_13 CT 06107-1034 West Hartford Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Freess Date of Receipt Mailing Address 55 Soby Dr 20 04 2015 City State Zip Code Transaction ID: 87DD6E4ADE054DC8BBC6 West Hartford CT 06107-1034 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel Freess Date of Receipt Mailing Address 55 Soby Dr 19 2015 City State Zip Code Transaction ID: 20150518183743-17 CT West Hartford 06107-1034 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Daniel Freess Date of Receipt Mailing Address 55 Soby Dr 2015 City Zip Code State Transaction ID: 20150619175314-108 CT West Hartford 06107-1034 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeremy Fried Date of Receipt Mailing Address 30 Bainbridge Rd 06 29 2015 City State Zip Code Transaction ID: 20150710125259-232 West Hartford CT 06119-1145 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Vidor E Friedman Date of Receipt Mailing Address 13061 Water Point Blvd 04 27 2015 City State Zip Code Transaction ID: 30B0A53BF9E2489D9818 FL Windermere 34786-5818 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 2800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persibe 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)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) 1. Vicki Kay Friend		Date of Receipt
Mailing Address 5753 Aloma Woods Blvd		04 27 2015
City	State Zip Code	Transaction ID : 5EF53FFA0CAD487DBE45
Oviedo	FL 32765-9437	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	1
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General	1000 60	
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) 3. Wayne S Friestad	•	Date of Receipt
Mailing Address 1528 Langham Ter		M M / D D / Y Y Y Y
5 - 1020 Langilani 16		04 27 2015
City	State Zip Code	Transaction ID : 21500827948A49789A60
Lake Mary	FL 32746-1971	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	-
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General		
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) 2. Anita Marie Gage		Date of Receipt
Mailing Address 2174 N Hametown Rd		M M / D D / Y Y Y Y
		03 17 2015
City	State Zip Code	Transaction ID : 20150317A_14
Akron	OH 44333-1026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	-
Emergency Medicine Physician Managemen	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	499.98	
Other (specify) ▼	499.98	
SUBTOTAL of Receipts This Page (optional).	· · · · · · · · · · · · · · · · · · ·	2483.33
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Anita Marie Gage Date of Receipt Mailing Address 2174 N Hametown Rd 20 2015 City State Zip Code Transaction ID: 8C964F01761442D88ABC OH 44333-1026 Akron Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation **Emergency Physician Emergency Medicine Physician Managemen** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Anita Marie Gage Date of Receipt Mailing Address 2174 N Hametown Rd 05 2015 Citv State Zip Code

	Oity	Otato Zip Oodo	Transaction ID: 20150518183743-18
	Akron	OH 44333-1026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.33
	Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	
C.	Mailing Address 2174 N Hametown Rd		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 Akron	State Zip Code OH 44333-1026	Transaction ID: 20150619175314-109 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.33
	Name of Employer	Occupation	
	Emergency Medicine Physician Managemen	Emergency Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

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	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) William Stephen Gallea Mailing Address PO Box 6622 City Helena FEC ID number of contributing federal political committee. Name of Employer Lewis & Clark Emergency Physicians Receipt For: Primary General Other (specify)	State Zip Code MT 59604-6622 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 03 27 2015 Transaction ID: F9811184F53840E0BBEF Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) William Stephen Gallea Mailing Address PO Box 6622 City Helena FEC ID number of contributing federal political committee. Name of Employer Lewis & Clark Emergency Physicians Receipt For: Primary General Other (specify)	State Zip Code MT 59604-6622 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt Mo6 27 2015 Transaction ID: 750C2225A6894EAAADF6 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Angela F Gardner Mailing Address 3809 Parr Rd City Grapevine FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code TX 76051-6453 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt O4 11 2015 Transaction ID: 493592E5993296503BC2 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	600.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 78 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Angela F Gardner Date of Receipt Mailing Address 3809 Parr Rd 2015 City State Zip Code Transaction ID: 4DD7A5B5AB4D7FF5E983 TX Grapevine 76051-6453 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Angela F Gardner Date of Receipt Mailing Address 3809 Parr Rd 06 2015 11 City State Zip Code Transaction ID: 492393067A19B57EF99E TX Grapevine 76051-6453 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brent F Gardner Date of Receipt Mailing Address 640 E Club Cir 2015 19 City State Zip Code Transaction ID: FA560D24C007CA942A1 FL Longwood 32779-2256 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER: PAGE 79 OF								
Use separate schedule(s) for each category of the	(check		ne)						
Detailed Summary Page	X 11	a	11b		11c		12		
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) A. James P Gardner Mailing Address 5421 Gharrett Ave City	State Zip Code	Date of Receipt M
Missoula FEC ID number of contributing federal political committee. Name of Employer	MT 59803-2601 C Occupation	Amount of Each Receipt this Period 600.00
Western Montana Emergency Physicians Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) B. Michael David Garfinkel Mailing Address 261 S Parkview Ave		Date of Receipt 03 17 2015
City Bexley FEC ID number of contributing federal political committee.	State Zip Code OH 43209-1649	Transaction ID: 20150317A 15 Amount of Each Receipt this Period 100.00
Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) C. Michael David Garfinkel Mailing Address 261 S Parkview Ave		Date of Receipt 04 20 2015
City Bexley FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code OH 43209-1649 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Transaction ID : FC5D6442063F49BEB08D Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u>-</u>	800.00

FOR LINE NUMBER: PAGE 80 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael David Garfinkel Date of Receipt Mailing Address 261 S Parkview Ave 2015 City Zip Code State Transaction ID: 20150518183743-19 OH Bexley 43209-1649 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael David Garfinkel Date of Receipt Mailing Address 261 S Parkview Ave 06 18 2015 City State Zip Code Transaction ID: 20150619175314-110 OH Bexley 43209-1649 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** James E Garrett Date of Receipt Mailing Address 105 Sea Buoy Ct 03 19 2015 City State Zip Code Transaction ID: 40C69509CD0D32B701DD NC **Emerald Isle** 28594-2303 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

		LINE		PAGE	8	1	OF	340			
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Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) National Emergency Medicine F						
Full Name (Last, First, Middle Initial) James E Garrett Mailing Address 105 Sea Buoy Ct		Date of Receipt				
		06 19 2015				
City Emerald Isle	State Zip Code NC 28594-2303	Transaction ID: 42EDA38D31A055AB2A83 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	300.00				
Name of Employer Physician Receipt For:	Occupation Emergency Physician					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name (Last, First, Middle Initial) 3. Marianne Gausche-Hill		Date of Receipt				
Mailing Address 1931 Power St	Mailing Address 1931 Power St City State Zip Code Hermosa Beach CA 90254-2915					
·						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1200.00				
Name of Employer Physician	Occupation Emergency Physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00					
Full Name (Last, First, Middle Initial) Daniel C Geary		Date of Receipt				
Mailing Address 142 Woodshire Rd		03 17 2015 _				
City Pittsburgh	State Zip Code PA 15215-1714	Transaction ID : 20150317A_45 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	83.33				
Name of Employer	Occupation					
Emergency Medicine Physician Managemen Receipt For:	Emergency Physician					
Primary General	Aggregate Year-to-Date ▼					
Other (specify) ▼	499.98					
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Any information copied from such Reports and Stor for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine P	Political Action Committee	
Full Name (Last, First, Middle Initial) Daniel C Geary Mailing Address 142 Woodshire Rd City Pittsburgh FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code PA 15215-1714 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 04 20 2015 Transaction ID: 8FFD7B092BFA4D34957F Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Daniel C Geary Mailing Address 142 Woodshire Rd City Pittsburgh FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code PA 15215-1714 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 05 19 2015 Transaction ID: 20150518183743-52 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Daniel C Geary Mailing Address 142 Woodshire Rd City Pittsburgh FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code PA 15215-1714 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 06 18 2015 Transaction ID: 20150619175314-148 Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	>	249.99
TOTAL This Period (last page this line number of	only)	

	FOR LINE NUMBER:	PAGE	83 OF	340
Use separate schedule(s) for each category of the	(check only one)			
Detailed Summary Page	X 11a 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Christopher M Gentle Date of Receipt Mailing Address 10131 Roulette Dr 05 2015 City State Zip Code Transaction ID: D6716A07F5764525B5FA MD 21740-1492 Hagerstown Amount of Each Receipt this Period FEC ID number of contributing C 600.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Joseph Gerardi Date of Receipt Mailing Address 32 Goldfinch Dr 05 30 2015 City State Zip Code Transaction ID: 4D6C9A90-F1BC-42F9-Hackettstown NJ 07840-3008 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates New Jerse Emergency Physician** Receipt For:

Primary General Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) Stephen J Giebel Mailing Address 1261 E Desert Flower Ln		Date of Receipt 06 30 2015
City Phoenix	State Zip Code AZ 85048-4443	Transaction ID : C766F66555E346728D71 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Aggregate Year-to-Date ▼

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	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) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) David Andrew Goldman Mailing Address 428 Raccoon St City Lake Mary FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 32746-3802 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt O4 27 2015 Transaction ID: B1704F9FCCF04EA69A85 Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Jeffrey Michael Goodloe Mailing Address 3720 E 99th PI City Tulsa FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code OK 74137-5231 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt O1 10 2015 Transaction ID: 4D19A58CBCF2273A8CA9 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Jeffrey Michael Goodloe Mailing Address 3720 E 99th PI City Tulsa FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code OK 74137-5231 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt O2 O7 2015 Transaction ID: 460097111445343DF9D7 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1700.00
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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) Jeffrey Michael Goodloe Mailing Address 3720 E 99th PI City Tulsa FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code OK 74137-5231 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt 05 07 2015 Transaction ID: 472DA3B8DF10A5BE4F7F Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mylissa Amy Graber Mailing Address 7809 Trieste PI City Delray Beach FEC ID number of contributing federal political committee. Name of Employer EmCare Headquarters Receipt For: Primary General Other (specify)	State Zip Code FL 33446-4403 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M J 2015 Transaction ID: 42838FCDA29A22CF0BF2 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Mylissa Amy Graber Mailing Address 7809 Trieste PI City Delray Beach FEC ID number of contributing federal political committee. Name of Employer EmCare Headquarters Receipt For: Primary General Other (specify)	State Zip Code FL 33446-4403 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt O4 12 2015 Transaction ID: 4C0D83F888C55DC617F9 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	>	450.00
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FOR LINE NUMBER: PAGE 86 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mylissa Amy Graber Date of Receipt Mailing Address 7809 Trieste Pl 2015 City State Zip Code Transaction ID: 4FB5B1CDE72EDFED7C80 FL **Delray Beach** 33446-4403 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **EmCare Headquarters Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mylissa Amy Graber Date of Receipt Mailing Address 7809 Trieste PI 06 12 2015 City State Zip Code Transaction ID: 4897B5A298FB8FCD1B06 FL Delray Beach 33446-4403 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **EmCare Headquarters Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ken John Gramyk Date of Receipt Mailing Address 3734 Lakeshore Dr 12 2015 City Zip Code State Transaction ID: 46DB8A94F82DC28F14BC ID Sagle 83860-8100 Amount of Each Receipt this Period FEC ID number of contributing 41.67 С federal political committee. Name of Employer Occupation Lake Pend Oreille Emergency Medicine P **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) 241.67 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 87 OF 340							
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not be sold or used by any person for the purpose of soliciting contributions									

An or	y information copied from such Reports and State for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		
\rangle	National Emergency Medicine P	olitical Action Committee	
١.	Full Name (Last, First, Middle Initial) Ken John Gramyk		Date of Receipt
	Mailing Address 3734 Lakeshore Dr		06 12 2015
	City	State Zip Code	Transaction ID : 494786BF5A80CA601826
	Sagle	ID 83860-8100	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	41.67
	Name of Employer	Occupation	
	Lake Pend Oreille Emergency Medicine P	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	250.02	
3	Full Name (Last, First, Middle Initial) Stephen A D Grant		Date of Receipt
•	Mailing Address 1 Cherry Hills Dr		M M / D D / Y Y Y Y
			03 12 2015
	City	State Zip Code	Transaction ID : 4F94AA2A00490713210B
	Aiken	SC 29803-5688	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.34
	Name of Employer	Occupation	
	Physician	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	500.04	
<u> </u>	Full Name (Last, First, Middle Initial) Stephen A D Grant		Date of Receipt
•	Mailing Address 1 Cherry Hills Dr		M M / D D / Y Y Y Y
	5 TOHOTY TIME DI		04 12 2015
	City	State Zip Code	Transaction ID : 4FBBA6C35040751411C6
	Aiken	SC 29803-5688	Amount of Each Receipt this Period
	FEC ID number of contributing		83.34
	federal political committee.	C	05.34
	Name of Employer	Occupation	
	Physician	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	500.04	
	Other (specify) ▼	300.04	
S	UBTOTAL of Receipts This Page (optional)		208.35
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FOR LINE NUMBER: PAGE 89 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Andrea L Green Date of Receipt Mailing Address 5 Twin Springs Dr 2015 City State Zip Code Transaction ID: 47F69D8C5DFBEF7E17D8 TX Arlington 76016-4027 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Arlington Emergency Medical Associates **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Andrea L Green Date of Receipt Mailing Address 5 Twin Springs Dr 05 12 2015 City State Zip Code Transaction ID: 4A93B3A4B42D917C60E1 TX Arlington 76016-4027 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Arlington Emergency Medical Associates **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) William James Green Date of Receipt Mailing Address 23 Avenida Brio 04 28 2015 City State Zip Code Transaction ID: 45B8D39380474EC5A5CB CA San Clemente 92673-6844 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Newport Emergency Medical Group Incorp **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 865.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 90 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jason Greenbaum Date of Receipt Mailing Address 27 Sussex Pl 05 2015 City Zip Code State Transaction ID: FED861D7-9AE8-4B3C-CT Stamford 06905-2931 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates New Jerse Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert D Greenberg Date of Receipt Mailing Address 1707 Canyon Springs Dr 01 24 2015 City State Zip Code Transaction ID: 9E920C9FEDD447288605 TX **Belton** 76513-1044 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Scott & White Deptartment of Emergency **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert D Greenberg Date of Receipt Mailing Address 1707 Canyon Springs Dr 04 24 2015 Zip Code City State Transaction ID: BF5F849C187040278ACF TX Belton 76513-1044 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Scott & White Deptartment of Emergency **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Rachelle Ann Greenman Date of Receipt Mailing Address 122 Renaissance Dr 08 2015 City State Zip Code Transaction ID: FD76E42F07742B89510 Cherry Hill NJ 08003-5102 Amount of Each Receipt this Period FEC ID number of contributing 1050.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) B. Amy Griffin Date of Receipt Mailing Address 220 Midden Way 06 2015 11 City State Zip Code Transaction ID : AF6959D6D5464844B9F6 NC Holly Springs 27540-6842 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Earl A Grubbs Date of Receipt Mailing Address 7910 Georgetown Cir 12 2015 City State Zip Code Transaction ID: 4CAD8F4E73A5E7D0EBB GA Suwanee 30024-6623 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Paragon Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1350.00 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Puneet Gupta Date of Receipt Mailing Address 4532 Colonial Dr 08 2015 Apt 4 City State Zip Code Transaction ID: 1E924D4F870FED9B40A Saginaw MI 48603-3905 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas E Gutwein Date of Receipt Mailing Address 2429 Lake Ridge Dr 06 15 2015 City State Zip Code Transaction ID: B374852E05C16D53C98 Fort Wayne IN 46804-3822 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Professional Emergency Physicians Inco **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ann Malia Haleakala Date of Receipt Mailing Address PO Box 108 12 2015 City State Zip Code Transaction ID: 4C1CAA0E276E65AE21BE HI Pepeekeo 96783-0108 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Hawaii Emergency Physicians Associates **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1815.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ann Malia Haleakala Date of Receipt Mailing Address PO Box 108 2015 City Zip Code State Transaction ID: 410E87BD37F8123E244B Pepeekeo HI 96783-0108 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Hawaii Emergency Physicians Associates **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy James Hall Date of Receipt Mailing Address 1380 Woodhurst Dr 03 17 2015 City State Zip Code Transaction ID: 20150317A_16 Rock Hill SC 29732-2082 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy James Hall Date of Receipt Mailing Address 1380 Woodhurst Dr 20 04 2015 City Zip Code State Transaction ID: D09E3555A7194A6DB50B SC Rock Hill 29732-2082 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Timothy James Hall Date of Receipt Mailing Address 1380 Woodhurst Dr 2015 City State Zip Code Transaction ID: 20150518183743-20 SC Rock Hill 29732-2082 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy James Hall Date of Receipt Mailing Address 1380 Woodhurst Dr 06 18 2015 City State Zip Code Transaction ID: 20150619175314-111 SC Rock Hill 29732-2082 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. PJ Hamilton-Gaertner Date of Receipt Mailing Address 580 Vista Del Lago Ln 11 2015 City Zip Code State Transaction ID: FEE4FFB0448D4B3D8806 NC Wake Forest 27587-5342 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 250.00 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) J Brian Hancock Date of Receipt Mailing Address 378 Lenox Ln 2015 City Zip Code State Transaction ID: 4E6DABE88FB09F397DFD Brighton MI 48114-5008 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. J Brian Hancock Date of Receipt Mailing Address 378 Lenox Ln 05 12 2015 City State Zip Code Transaction ID: 4633A8A2A5002653A64F MI **Brighton** 48114-5008 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gisli E Haraldsson Date of Receipt Mailing Address 6942 Suncrest Dr 03 12 2015 City State Zip Code Transaction ID: 43478AB4D824B159453C MI Saline 48176-9103 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 600.00 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Gisli E Haraldsson Date of Receipt Mailing Address 6942 Suncrest Dr 2015 City State Zip Code Transaction ID: 4688BA0465C142A875E5 48176-9103 Saline MI Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gisli E Haraldsson Date of Receipt Mailing Address 6942 Suncrest Dr 05 12 2015 City State Zip Code Transaction ID: 409BB8FF3C766F5203C3 MI Saline 48176-9103 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gisli E Haraldsson Date of Receipt Mailing Address 6942 Suncrest Dr 12 2015 City State Zip Code Transaction ID: 4806B0ACAD50CE1E194B MI Saline 48176-9103 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	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) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Russell H Harris Mailing Address 5829 Wissahickon Ave City Philadelphia FEC ID number of contributing federal political committee. Name of Employer EmCare Headquarters Receipt For: Primary General Other (specify)	State Zip Code PA 19144-4446 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 02 05 2015 Transaction ID: 02AB4AAF26B1427E999A Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Russell H Harris Mailing Address 5829 Wissahickon Ave City Philadelphia FEC ID number of contributing federal political committee. Name of Employer	State Zip Code PA 19144-4446 C	Date of Receipt 03 04 2015 Transaction ID: 7BC03F3A18F244B6AF62 Amount of Each Receipt this Period 100.00
EmCare Headquarters Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Russell H Harris Mailing Address 5829 Wissahickon Ave City Philadelphia FEC ID number of contributing federal political committee. Name of Employer EmCare Headquarters Receipt For: Primary General Other (specify)	State Zip Code PA 19144-4446 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M O3 2015 Transaction ID: F5EBAC2F12BB4DE58A06 Amount of Each Receipt this Period 100.00
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Russell H Harris Date of Receipt Mailing Address 5829 Wissahickon Ave 05 2015 City Zip Code State Transaction ID: E256D00808364BD3849E PΑ Philadelphia 19144-4446 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **EmCare Headquarters Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Vernetta L Harris Date of Receipt Mailing Address 1212 Laurel St 06 24 2015 City State Zip Code Transaction ID: 2015062910844-578 TN Nashville 37203-4097 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation **CEP America Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) c. Allison Leigh Harvey Date of Receipt Mailing Address 532 Water Garden Ct 25 2015 City Zip Code State Transaction ID: B3EBD32A-3E5F-4B33-SC Irmo 29063-9785 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Carolina Care **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 1384.60 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jonathan Heidt Date of Receipt Mailing Address 5106 Sockeye Ct 05 2015 City Zip Code State Transaction ID: 10A0EAC25CC14763940C MO Columbia 65203-6489 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Jonathan Heidt Date of Receipt Mailing Address 5106 Sockeye Ct 04 05 2015 City State Zip Code Transaction ID: 869CF5823CBE43B1B0ED MO Columbia 65203-6489 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jonathan Heidt Date of Receipt Mailing Address 5106 Sockeye Ct 05 2015 City Zip Code State Transaction ID: F2AB5A18FB374ACC88C4 MO Columbia 65203-6489 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jonathan Heidt Date of Receipt Mailing Address 5106 Sockeye Ct 05 2015 City Zip Code State Transaction ID: E2D9657E722149609A59 MO Columbia 65203-6489 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Carlton E Heine Date of Receipt Mailing Address 2986 Foster Ave 06 05 2015 City State Zip Code Transaction ID: 43E48860DCD381E44879 ΑK Juneau 99801-1956 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Juneau Emergency Medical Associates **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Marilyn Joan Heine Date of Receipt Mailing Address 900 Twining Rd 30 04 2015 City State Zip Code Transaction ID: 2015050411131-223 PΑ Dresher 19025-1726 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 633.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Co	ommittee					
Full Name (Last, First, Middle Initial) Gary Thomas Hemann Mailing Address 1650 S Sky Ridge Dr City Wdm FEC ID number of contributing federal political committee. Name of Employer Mercy Professional Practice Associates Receipt For: Primary General Other (specify)	State Zip Co IA 50266 C Occupation Emergency Physician Aggregate Year-to-Date	-3812	06 Trans	Receipt 26 action ID:	32A7A47		-
Full Name (Last, First, Middle Initial) Justin P Hensley Mailing Address 5121 Ocean Dr City Corpus Christi FEC ID number of contributing	State Zip Co TX 78412-		06 Trans	Receipt / 24 action ID: 4 of Each Receipt	46F8B15) 1667EF
federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	Occupation Emergency Physician Aggregate Year-to-Dat	e ▼ 300.00				100.0)0
Full Name (Last, First, Middle Initial) Dennis A Hernandez Mailing Address 3278 Tala Loop			M M M 04	Receipt / 27	J L	2015	
City Longwood FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Co FL 32779 C Occupation Emergency Physician Aggregate Year-to-Dat	-3128		action ID:			
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Larry Allen Hobbs Date of Receipt Mailing Address 12717 Brewster Dr Lee Memorial Gulf Coast Med Ctr 2015 City Zip Code State Transaction ID: 47679A34486B1ED84524 FL Fort Myers 33908-1809 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Southwest Florida Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Larry Allen Hobbs Date of Receipt Mailing Address 12717 Brewster Dr Lee Memorial Gulf Coast Med Ctr 12 04 2015 City Zip Code State Transaction ID: 462DB81394B6CFACE30C FL Fort Myers 33908-1809 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Southwest Florida Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Larry Allen Hobbs Date of Receipt Mailing Address 12717 Brewster Dr 12 2015 Lee Memorial Gulf Coast Med Ctr City Zip Code State Transaction ID: 4831877EECDBFC2DCA17 FL Fort Myers 33908-1809 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Southwest Florida Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Larry Allen Hobbs Date of Receipt Mailing Address 12717 Brewster Dr Lee Memorial Gulf Coast Med Ctr 2015 City Zip Code State Transaction ID: 4649B21B46C2F99A4899 FL Fort Myers 33908-1809 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Southwest Florida Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth L Holbert Date of Receipt Mailing Address 130 Laural Hill Dr 05 80 2015 City State Zip Code Transaction ID: 3E74CF93AAB3EE042FA TN Smyrna 37167-4907 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Team Health **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kenneth L Holbert Date of Receipt Mailing Address 130 Laural Hill Dr 05 31 2015 City Zip Code State Transaction ID: 2015060313759-192 TN Smyrna 37167-4907 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Team Health **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	nd Statements may not be sold or used by any person the name and address of any political committee the	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Steven R Horn Mailing Address 5285 Laurelridge Ln City Cincinnati FEC ID number of contributing federal political committee. Name of Employer Premier Physician Services Receipt For: Primary General Other (specify)	State Zip Code OH 45247-7950 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Hans Roberts House Mailing Address 1 Lake Pointe Rd NE City Iowa City FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code IA 52240-9105 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt O1 06 2015 Transaction ID: AF13B54F98D2474390DB Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Hans Roberts House Mailing Address 1 Lake Pointe Rd NE City Iowa City FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary Other (specify)	State Zip Code IA 52240-9105 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 02 06 2015 Transaction ID: E0F2526B85134FC7B913 Amount of Each Receipt this Period 250.00
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Hans Roberts House Date of Receipt Mailing Address 1 Lake Pointe Rd NE 2015 02 City State Zip Code Transaction ID: 20150612192310-15 Iowa City IΑ 52240-9105 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Dianne Hrutkay Date of Receipt Mailing Address 1464 Stoolfire Rd 03 17 2015 City State Zip Code Transaction ID: 20150317A_17 WV 26060-7934 Valley Grove Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Dianne Hrutkay Date of Receipt Mailing Address 1464 Stoolfire Rd 20 04 2015 City Zip Code State Transaction ID: 46D3B9C4FAA6482A93E3 WV Valley Grove 26060-7934 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 266.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FO	R LINE	NU	MBER	:	PAGE	1	07 OF	•	340			
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	nd Statements may not be sold or used by any person the name and address of any political committee the	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Tradional Emergency Medicin	de l'ontical Action Committee	
Full Name (Last, First, Middle Initial) 1. Lisa Dianne Hrutkay		Date of Receipt
Mailing Address 1464 Stoolfire Rd		05 19 _ 2015 _
City	State Zip Code	Transaction ID : 20150518183743-21
Valley Grove	WV 26060-7934	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Emergency Medicine Physician Manageme	en Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) 3. Lisa Dianne Hrutkay	1	Date of Receipt
Mailing Address 1464 Stoolfire Rd		M M / D D / Y Y Y Y
City	Ctata 7in Cada	06 18 2015
City Valley Grove	State Zip Code WV 26060-7934	Transaction ID: 20150619175314-112 Amount of Each Receipt this Period
FEC ID number of contributing	C	83.33
federal political committee.		30.00
Name of Employer	Occupation	
Emergency Medicine Physician Manageme Receipt For:	Emergency Physician	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) C. Daniel J Hull	·	Date of Receipt
Mailing Address 280 SE Summit Dr		06 24 2015
City	State Zip Code OR 97470-4318	Transaction ID: 2015062910844-555
Roseburg	9/4/0-4316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.60
Name of Employer	Occupation	1
Mercy Medical Center Emergency Medicin	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	284.60	
SUBTOTAL of Receipts This Page (optional	1)	251.26
TOTAL This Period (last page this line num	ber only)	

	F	OR	LINE	NU	MBER	:	PAGE	1	08 OF	;	340
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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.

Full Name (Last, First, Middle Initial)		Data of Bassist
Raymond Iannaccone Mailing Address 25 Oakwood Rd		Date of Receipt 03 12 2015
City Allendale	State Zip Code NJ 07401-2100	Transaction ID : 4C43BD6C0CCE35E91 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Emergency Medical Associates New Jerse	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Raymond lannaccone Mailing Address 25 Oakwood Rd		Date of Receipt
City Allendale	State Zip Code NJ 07401-2100	04 12 2015 Transaction ID : 43D89DBCD939F2428E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Emergency Medical Associates New Jerse	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) C. Raymond Iannaccone		Date of Receipt
Mailing Address 25 Oakwood Rd		05 12 2015
City Allendale	State Zip Code NJ 07401-2100	Transaction ID : 44C5AE2B125575FB6E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Emergency Medical Associates New Jerse	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
SUBTOTAL of Receipts This Page (optional)		250.02

	F	DR	LINE	NU	MBER	PAGE 109 OF				340	
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for each category of the Detailed Summary Page		X	11a		11b		11c		12		
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Raymond Iannaccone Mailing Address 25 Oakwood Rd City Allendale FEC ID number of contributing federal political committee. Name of Employer Emergency Medical Associates New Jerse Receipt For: Primary General Other (specify)	State Zip Code NJ 07401-2100 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Frank Anthony Illuzzi Mailing Address 102 Sasco Hill Rd City Fairfield FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code CT 06824-5645 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Peter J Jacoby Mailing Address 167 Sprain Brook Rd City Woodbury FEC ID number of contributing federal political committee. Name of Employer Franklin Medical Group Receipt For: Primary General Other (specify)	State Zip Code CT 06798-1914 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 2500.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	<u> </u>	3083.34
TOTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page	X	11a		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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) William Paul Jaquis Date of Receipt Mailing Address 1216 S Bouldin St 04 2015 City State Zip Code Transaction ID: 1F922D8C608746F4BDE6 MD 21224-5000 Baltimore Amount of Each Receipt this Period FEC ID number of contributing C 90.00 federal political committee. Name of Employer Occupation **Emergency Physician EmCare Headquarters** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Paul Jaquis Date of Receipt Mailing Address 1216 S Bouldin St 04 03 2015 City State Zip Code Transaction ID: 4E49FAAAC26546B6B365 **Baltimore** MD 21224-5000 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation **EmCare Headquarters Emergency Physician** Receipt For:

Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) William Paul Jaquis Mailing Address 1216 S Bouldin St		Date of Receipt
City	State Zip Code	05 05 2015 Transaction ID : 11AB23AC5F974DF58665
Baltimore	MD 21224-5000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer	Occupation	
EmCare Headquarters	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
OUDTOTAL of Descripts This Descripts		270.00

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Any or fo	r information copied from such Reports and Stor commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\ N	NAME OF COMMITTEE (In Full)		
\	National Emergency Medicine P	olitical Action Committee	
	Full Name (Last, First, Middle Initial) Andrew David Jenis		Date of Receipt
N	Mailing Address 115 Cayuga Heights Rd		03 17 2015
(City	State Zip Code	Transaction ID : 20150317A_18
	Ithaca	NY 14850-2102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.33
Ī	Name of Employer	Occupation	
E	Emergency Medicine Physician Managemen	Emergency Physician	
_	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	499.98	
	Full Name (Last, First, Middle Initial) Andrew David Jenis		Date of Receipt
			Date of Receipt
I\	Mailing Address 115 Cayuga Heights Rd		04 20 2015
Ō	City	State Zip Code	Transaction ID : 70FAAFFF228F42F094F2
_!	Ithaca	NY 14850-2102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	83.33
Ī	Name of Employer	Occupation	
	Emergency Medicine Physician Managemen	Emergency Physician	
F	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	499.98	
	Full Name (Last, First, Middle Initial) Andrew David Jenis		Date of Receipt
	Mailing Address 115 Cayuga Heights Rd		
11	Tio Cayuga rieignis Rd		05 19 2015
C	City	State Zip Code	Transaction ID : 20150518183743-22
_	Ithaca	NY 14850-2102	Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C	83.33
Ī	Name of Employer	Occupation	
	Emergency Medicine Physician Managemen	Emergency Physician	
F	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	400.00	
	Other (specify) ▼	499.98	
SU	JBTOTAL of Receipts This Page (optional)		249.99
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Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) Andrew David Jenis Mailing Address 115 Cayuga Heights Rd City Ithaca FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code NY 14850-2102 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 06 18 2015 Transaction ID: 20150619175314-113 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Milan Jockovich Mailing Address 460 Riggs Ave City Melbourne Bch FEC ID number of contributing federal political committee. Name of Employer Brevard Emergency Services Receipt For: Primary General Other (specify)	State Zip Code FL 32951-3221 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 06 25 2015 Transaction ID: 73E502DFE56CAC48047 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) David Peter John Mailing Address 20 Hartley St City North Haven FEC ID number of contributing federal political committee. Name of Employer Northeast Emergency Medicine Specialis Receipt For: Primary General Other (specify)	State Zip Code CT 06473-4409 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	1333.33
TOTAL This Period (last page this line number	only)	7

FOR LINE NUMBER: PAGE 113 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Bruce G Jones Date of Receipt Mailing Address 465 Woodard PI **Doctors Hospital** 2015 City Zip Code State Transaction ID: 20150619175314-114 OH Powell 43065-7448 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians of Frank Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert J Jones Date of Receipt Mailing Address PSC 2 Box 10376 05 03 2015 City State Zip Code Transaction ID: 20150508192310-74 ΑE APO 09012-0104 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Eric Wayne Jordan Date of Receipt Mailing Address 27 Regina Dr 29 2015 City Zip Code State Transaction ID: EB9F4149411209E66DF MS Hattiesburg 39402-8378 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation South Mississippi Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 565.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 114 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Costas Andreas Kaiafas Date of Receipt Mailing Address 1913 Vermont Ave 2015 25 City Zip Code State Transaction ID: 20150710125259-89 Toms River NJ 08755-1340 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Emergency Medical Associates New Jerse Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Amit S Kalaria Date of Receipt Mailing Address 17804 Cricket Hill Dr 04 21 2015 City State Zip Code Transaction ID: D6C5F503DB0C4E5ABDF8 MD Germantown 20874-3475 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Amit S Kalaria Date of Receipt Mailing Address 17804 Cricket Hill Dr 05 2015 City Zip Code State Transaction ID: 9156BC26E08A49DFA8E2 MD Germantown 20874-3475 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Amit S Kalaria Mailing Address 17804 Cricket Hill Dr City Germantown FEC ID number of contributing federal political committee. Name of Employer MEP Health LLC Receipt For: Primary General Other (specify)	State Zip Code MD 20874-3475 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / 2015 Transaction ID: 086AC85E1A4B448B92E4 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Achyut B Kamat Mailing Address 19 Everett Ave City Providence FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code RI 02906-3321 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / 25 2015 Transaction ID : CD411435-42BB-4A83- Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Achyut B Kamat Mailing Address 19 Everett Ave City Providence FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code RI 02906-3321 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / 27 2015 Transaction ID: 118A5E9D-480A-4F72- Amount of Each Receipt this Period 700.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1300.00
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						
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NAME OF COMMITTEE (In Full)	ano name anu a	da coo or any pontical committee	to some continuations from such confinities.						
National Emergency Medicine	e Political A	ction Committee							
Full Name (Last, First, Middle Initial) Christopher S Kang			Date of Receipt						
Mailing Address 2184 Bobs Hollow Ln			04 23 2015						
City Dupont	State WA	Zip Code 98327-7747	Transaction ID: 9E7465A9-ACEE-4985- Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		1200.00						
Name of Employer	Occupation								
Madigan Army Medical Center Faculty	Emergency	<u> </u>							
Receipt For: Primary General	Aggregate	Year-to-Date ▼							
Other (specify)		1200.00							
Full Name (Last, First, Middle Initial) 3. Julius (Jay) A Kaplan	'		Date of Receipt						
Mailing Address 300 Oak Ave			06 01 _2015						
City	State	Zip Code	Transaction ID : 4AE382E630A6D78DE1C2						
San Anselmo	CA	94960-2703	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		100.00						
Name of Employer CEP America	Occupation								
Receipt For:	Emergency	<u> </u>							
Primary General	Aggregate	Year-to-Date ▼	,						
Other (specify) ▼		300.00							
Full Name (Last, First, Middle Initial) C. Gary R Katz			Date of Receipt						
Mailing Address 7918 Wisteria Ct			03 11 2015						
City	State	Zip Code	Transaction ID : 4157BB3F0777F37B5FFD						
Dublin	ОН	43016-8531	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		300.00						
Name of Employer	Occupation								
Physician	Emergency	Physician							
Receipt For: Primary General	Aggregate	Year-to-Date ▼							
Other (specify)		600.00							
SUBTOTAL of Receipts This Page (optional)			1600.00						
TOTAL This Period (last page this line numb	er only)								

FOR LINE NUMBER: PAGE 117 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Gary R Katz Date of Receipt Mailing Address 7918 Wisteria Ct 2015 City Zip Code State Transaction ID: 486CB7D0711F3CB0722C OH Dublin 43016-8531 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Noah L Keller Date of Receipt Mailing Address 10119 Easterday Ct 03 04 2015 City State Zip Code Transaction ID: 3FE29D9DFC8D15B33D5 MD Hagerstown 21742-9791 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian M Kelley Date of Receipt Mailing Address 635 Sundance Ln 17 03 2015 Apt 105 City State Zip Code Transaction ID: 20150317A_19 Blacksburg VA 24060-1247 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 1383.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 118 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Brian M Kelley Date of Receipt Mailing Address 635 Sundance Ln Apt 105 04 20 2015 City State Zip Code Transaction ID: 539D6B45710841A890AF VA Blacksburg 24060-1247 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Brian M Kelley Date of Receipt Mailing Address 635 Sundance Ln Apt 105 05 19 2015 City State Zip Code Transaction ID: 20150518183743-24 VA Blacksburg 24060-1247 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Brian M Kelley Date of Receipt Mailing Address 635 Sundance Ln 18 2015 Apt 105 City State Zip Code Transaction ID: 20150619175314-115 Blacksburg VA 24060-1247 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR	LINE	NU	MBER	PAGE	PAGE 119 OF			340	
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) James Raymond Kennedye Date of Receipt Mailing Address 908 Fox Hill Dr 2015 City State Zip Code Transaction ID: 4039954FE297D897803D OK 73034-7317 Edmond Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Emergency Physician** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Raymond Kennedye Date of Receipt Mailing Address 908 Fox Hill Dr 05 12 2015 City State Zip Code Transaction ID: 4E3CB8DD78EE7FB48146 OK Edmond 73034-7317 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Kathleen Kerrigan Mailing Address 195 Eton Rd		Date of Receipt
City Longmeadow	State Zip Code MA 01106-1515	06 29 2015 Transaction ID: 38A1E42B-04D4-4549- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Baystate Medical Center Emergency Phys	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

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

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865.00

C.

FOR LINE NUMBER: PAGE 120 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Eric Michael Ketcham Date of Receipt Mailing Address 228 W 35th St 04 2015 City Zip Code State Transaction ID: AA3DCC2380B3190A181 NM 87401-4047 Farmington Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Medical Emergency Services Associates **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rami R Khoury Date of Receipt Mailing Address 48575 Stoneridge Dr 05 01 2015 City State Zip Code Transaction ID: F60B8795-5FE9-43EE-Northville MI 48168-8674 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Paul Daniel Kivela Date of Receipt Mailing Address 1370 Trancas St 12 2015 City State Zip Code Transaction ID: 411984E4AEF44C7D5A50 CA Napa 94558-2912 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Napa Valley Emergency Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 2050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	12	21 OF	=	34
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used by any persing the 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) National Emergency Medic	ine Political Action Committee	
Full Name (Last, First, Middle Initial) 1. Paul Daniel Kivela		Date of Receipt
Mailing Address 1370 Trancas St		M = M / D = D / Y = Y = Y
City	State Zip Code	05 12 2015 Transaction ID : 49C88B552B0627FE1AE9
Napa	CA 94558-2912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Napa Valley Emergency Medical Group	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial) Scott Jason Korvek		Date of Receipt
Mailing Address 21 Lees Ave		M = M / D = D / Y = Y = Y
City	State Zip Code	02 12 2015 Transaction ID : 4502B12514221313152E
Collingswood	NJ 08108-1925	Transaction ID : 4502B125142213131F3E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	-
Albert Einstein Heallthcare Emergency	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Scott Jason Korvek		Date of Receipt
Mailing Address 21 Lees Ave		05 12 2015
City	State Zip Code	Transaction ID: 45E183214384B33014E2
Collingswood	NJ 08108-1925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Albert Einstein Heallthcare Emergency	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (option	nal)	800.00
TOTAL TILL BULL # 100 P. 100 P	· · · · · · · · · · · · · · · · · · ·	
TOTAL This Period (last page this line nu	umber only)	

SCHEDULE A (FEC Form 3X)

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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 phe name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Terry Kowalenko Mailing Address 4619 Oak Pointe Dr City Brighton FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code MI 48116-7728 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 504.00	Date of Receipt 03 07 2015 Transaction ID : FED897DAD0914CDE8494 Amount of Each Receipt this Period 84.00
Full Name (Last, First, Middle Initial) Terry Kowalenko Mailing Address 4619 Oak Pointe Dr City Brighton FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 48116-7728 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 504.00	Date of Receipt O4 07 2015 Transaction ID: 5A2D15E147D24EC09DBD Amount of Each Receipt this Period 84.00
Full Name (Last, First, Middle Initial) Terry Kowalenko Mailing Address 4619 Oak Pointe Dr City Brighton FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary Other (specify) General Other (specify)	State Zip Code MI 48116-7728 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional)		252.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 123 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Terry Kowalenko Date of Receipt Mailing Address 4619 Oak Pointe Dr 07 2015 City State Zip Code Transaction ID: E9FF8493EF324DE6AC3E Brighton MI 48116-7728 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 504.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark S Kruger Date of Receipt Mailing Address PO Box 1209 04 27 2015 City State Zip Code Transaction ID: B8871D6DB8AC4A8B9AE1 FL Sanford 32772-1209 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph J Kuchinski Date of Receipt Mailing Address 32 Woodland Ave 17 03 2015 City State Zip Code Transaction ID: 20150317A_20 NJ Mountain Lks 07046-1421 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1384.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 124 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Joseph J Kuchinski Date of Receipt Mailing Address 32 Woodland Ave 20 2015 City State Zip Code Transaction ID: 0A24E44B9E2A4DCF95F9 Mountain Lks NJ 07046-1421 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph J Kuchinski Date of Receipt Mailing Address 32 Woodland Ave 05 19 2015 City State Zip Code Transaction ID: 20150518183743-25 Mountain Lks NJ 07046-1421 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph J Kuchinski Date of Receipt Mailing Address 32 Woodland Ave 18 2015 City State Zip Code Transaction ID: 20150619175314-116 NJ Mountain Lks 07046-1421 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David Lancaster Date of Receipt Mailing Address 6633 Silver Fox Rd 2015 City State Zip Code Transaction ID: 20150317A_21 NC Charlotte 28270-0683 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. David Lancaster Date of Receipt Mailing Address 6633 Silver Fox Rd 20 04 2015 City State Zip Code Transaction ID: BF28C9E6E8EC47BE8E33 NC Charlotte 28270-0683 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. David Lancaster Date of Receipt Mailing Address 6633 Silver Fox Rd 19 2015 City State Zip Code Transaction ID: 20150518183743-26 NC Charlotte 28270-0683 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David Lancaster Date of Receipt Mailing Address 6633 Silver Fox Rd 2015 City State Zip Code Transaction ID: 20150619175314-117 NC Charlotte 28270-0683 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Linda L Lawrence Date of Receipt Mailing Address 6323 Wilmington Dr 04 12 2015 City State Zip Code Transaction ID: 84300D9C-2E69-4767-VA Burke 22015-4070 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. David L Leader Jr. Date of Receipt Mailing Address 1937 Partridge Berry Dr 11 2015 City State Zip Code Transaction ID: 19F394B0CCA24C90A0DC NC Raleigh 27606-9695 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1333.33 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 127 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David C Lee Date of Receipt Mailing Address 894 Plandome Rd 08 2015 City State Zip Code Transaction ID: 4E14ECC1E10DCF5230B 11030-1302 NY Manhasset Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation North Shore University Hospital Emerge **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Marshall Lee Date of Receipt Mailing Address 12489 Shropshire Ln 06 24 2015 City State Zip Code Transaction ID: 2015062910844-101 CA San Diego 92128-1015 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) c. Alexis Lieser Date of Receipt Mailing Address PO Box 51 10 2015 City State Zip Code Transaction ID: 48F08FA19B05399AC438 CA Georgetown 95634-0051 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1384.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 128 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Richard J Limperos Date of Receipt Mailing Address 5087 Noor Park Cir 2015 City State Zip Code Transaction ID: 20150317A_22 OH Dublin 43016-7075 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians of Frank Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard J Limperos Date of Receipt Mailing Address 5087 Noor Park Cir 04 20 2015 City State Zip Code Transaction ID: A09080D53A2240828582 OH Dublin 43016-7075 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians of Frank Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard J Limperos Date of Receipt Mailing Address 5087 Noor Park Cir 19 2015 City State Zip Code Transaction ID: 20150518183743-28 OH Dublin 43016-7075 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation **Emergency Medicine Physicians of Frank Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) Richard J Limperos Mailing Address 5087 Noor Park Cir City Dublin FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians of Frank Receipt For: Primary General Other (specify)	State Zip Code OH 43016-7075 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 06 18 2015 Transaction ID: 20150619175314-120 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Christopher M Lloyd Mailing Address 2286 Picket Post Ln City Columbus FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians of Frank Receipt For: Primary General Other (specify)	State Zip Code OH 43220-2918 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 03 17 2015 Transaction ID: 20150317A 24 Amount of Each Receipt this Period 100.00
Christopher M Lloyd Mailing Address 2286 Picket Post Ln City Columbus FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians of Frank Receipt For: Primary General Other (specify)	State Zip Code OH 43220-2918 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M / 20 2015 Transaction ID: F210BA072B574F888FDE Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 130 OF 340 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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NAME OF COMMITTEE (In Full)

	1 1 -7 -1 - 1 - 3 - 1	7	
\rangle	NAME OF COMMITTEE (In Full) National Emergency Medicine P	olitical Action Committee	
Δ.	Full Name (Last, First, Middle Initial) Bruce M Lo Mailing Address 249 W Freemason St	State Zip Code VA 23510-1353 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Full Name (Last, First, Middle Initial) Donald Lombino Mailing Address 111 Connecticut Ave Apt A City Greenwich FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code CT 06830-5710 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 03 17 2015 Transaction ID: 20150317A 25 Amount of Each Receipt this Period 83.33
C.	Full Name (Last, First, Middle Initial) Donald Lombino Mailing Address 111 Connecticut Ave Apt A City Greenwich FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code CT 06830-5710 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M M M / 20
s	UBTOTAL of Receipts This Page (optional)	>	216.66
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Donald Lombino Date of Receipt Mailing Address 111 Connecticut Ave 2015 Apt A City State Zip Code Transaction ID: 20150518183743-30 CT 06830-5710 Greenwich Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **B.** Donald Lombino Date of Receipt Mailing Address 111 Connecticut Ave 06 Apt A 18 2015 City State Zip Code Transaction ID: 20150619175314-122 CT Greenwich 06830-5710 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) Jorge Lopez-Ferrer Date of Receipt Mailing Address 322 E Central Blvd 04 27 2015 Unit 2301 City State Zip Code Transaction ID: E6608A73F40B4C57BEA0 FL Orlando 32801-4355 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 1366.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 133 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Seth A Lotterman Date of Receipt Mailing Address 7 Willow Ln 2015 City Zip Code State Transaction ID: 463DAFC713BDBB5886EE CT West Hartford 06107-1149 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Fremont Emergency Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Seth A Lotterman Date of Receipt Mailing Address 7 Willow Ln 06 29 2015 City State Zip Code Transaction ID: 4EECB61CB3E9CA0285B0 West Hartford CT 06107-1149 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Fremont Emergency Medical Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nathan Lowien Date of Receipt Mailing Address 11114 Rosewood Ln 04 07 2015 City State Zip Code Transaction ID: 2DF99FF30E6B43FFA285 OH Athens 45701-9001 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 965.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 134 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael Lozano Date of Receipt Mailing Address 4824 Longwater Way 08 2015 City State Zip Code Transaction ID: 0EDFAE7C322E25F75CB FL Tampa 33615-4216 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation **EMCare South Division Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Thomas Ludlow Date of Receipt Mailing Address 1441 Ardmore Ave 02 12 2015 City State Zip Code Transaction ID: 465EAD2737A6A8DD9497 CA Modesto 95350-4101 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Thomas Ludlow Date of Receipt Mailing Address 1441 Ardmore Ave 12 2015 City State Zip Code Transaction ID: 4038ACA7D94788B37DC8 CA Modesto 95350-4101 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1700.00 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Katia M Lugo Enriquez Date of Receipt Mailing Address 65 Starlight Ct 2015 27 City State Zip Code Transaction ID: F082B5ABC62F4E9F8EF8 FL 32765-9692 Oviedo Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. John L Lyman Date of Receipt Mailing Address 8281 Rhine Way 17 05 2015 City State Zip Code Transaction ID: 3F3597F70B50480C9286 OH Dayton 45458-3013 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Premier Physician Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** John L Lyman Date of Receipt Mailing Address 8281 Rhine Way 17 2015 City State Zip Code Transaction ID: 3CFFB6F02F734D59B2DB OH Dayton 45458-3013 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Premier Physician Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional).....

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	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) Melissa Lynch Mailing Address 2327 Venndale Ave City San Jose FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code CA 95124-4930 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 284.60	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mark L Mackey Mailing Address 1225 W Lexington St City Chicago FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code IL 60607-4166 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 05 08 2015 Transaction ID: 36BAD780E568FC6013D Amount of Each Receipt this Period 600.00
Full Name (Last, First, Middle Initial) Merci G Madar Mailing Address 7805 Valderrama Way City Lakewood Ranch FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code FL 34202-5651 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	Date of Receipt 03 17 2015 Transaction ID: 20150317A_26 Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	>	767.93
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		
NAME OF COMMITTEE (In Full) National Emergency Medicine P	Political Action Committee	
Full Name (Last, First, Middle Initial) Merci G Madar Mailing Address 7805 Valderrama Way City Lakewood Ranch FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code FL 34202-5651 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	Date of Receipt 04 20 2015 Transaction ID: DA7E1938C0D64A488D1A Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Merci G Madar Mailing Address 7805 Valderrama Way City Lakewood Ranch FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code FL 34202-5651 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	Date of Receipt 05 19 2015 Transaction ID: 20150518183743-31 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Merci G Madar Mailing Address 7805 Valderrama Way City Lakewood Ranch FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code FL 34202-5651 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 549.99	Date of Receipt M M / D B / 2015 Transaction ID: 20150619175314-123 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	300.00
TOTAL This Period (last page this line number of	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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Robert T Malinowski Date of Receipt Mailing Address 660 Norborne Ave 2015 City State Zip Code Transaction ID: FBD5E7AA-0CF1-4340-Dearborn Hts MI 48127-3707 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Medical Center Emergency Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Manning Date of Receipt Mailing Address 10525 Canyon PI 06 10 2015 City State Zip Code Transaction ID: 43B92B732E1648B949D SD Rapid City 57702-7739 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Rapid City Emergency Services PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Gary Gerard March Date of Receipt Mailing Address 10643 Arbour Dr 30 2015 City State Zip Code Transaction ID: B73BAC427772FBFCA9A MI **Brighton** 48114-9095 Amount of Each Receipt this Period

300.00

С

Occupation

Emergency Physician

Aggregate Year-to-Date ▼

300.00

FEC ID number of contributing

Independent Emergency Physicians, PC

General

federal political committee.

Other (specify)

Name of Employer

Primary

Receipt For:

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Detailed Summary Page	×	11a		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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Catherine Anna Marco Date of Receipt Mailing Address 569 Calumet PI 04 2015 City Zip Code State Transaction ID: 20150112_11 OH Beavercreek 45434-6287 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation South Jersey Health System Emergency P **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Danna Michelle Markides Date of Receipt Mailing Address 2120 Oxford St 06 05 2015 City State Zip Code Transaction ID: 20150612192310-238 TX Houston 77008-2649 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin D Markowski Date of Receipt Mailing Address 572 White Tail Ridge Dr 17 03 2015 City Zip Code State Transaction ID: 20150317A_27 OH Fairlawn 44333-3288 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee.

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600.00

Occupation

Emergency Physician

Aggregate Year-to-Date ▼

Name of Employer

Primary

Other (specify)

Receipt For:

Emergency Medicine Physician Managemen

General

FOR LINE NUMBER: PAGE 140 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kevin D Markowski Date of Receipt Mailing Address 572 White Tail Ridge Dr 20 2015 City Zip Code State Transaction ID: C1EBA8AC1F084D8DA50A OH Fairlawn 44333-3288 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin D Markowski Date of Receipt Mailing Address 572 White Tail Ridge Dr 05 19 2015 City State Zip Code Transaction ID: 20150518183743-32 OH Fairlawn 44333-3288 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin D Markowski Date of Receipt Mailing Address 572 White Tail Ridge Dr 18 2015 City Zip Code State Transaction ID: 20150619175314-124 OH Fairlawn 44333-3288 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 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 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)		
National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) A. Scott P Marquis		Date of Receipt
Mailing Address 1407 E Rockwood Blvd		06 05 2015
City	State Zip Code	Transaction ID : 65CD0EB076EA556EE0F
Spokane	WA 99203-3841	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	1
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) 3. Heather Anne Marshall	1	Date of Receipt
Mailing Address 2418 N 31st St		†
Walling Fluoress 2418 N 31st St		05 01 2015
City	State Zip Code	Transaction ID : 92C2CFC9-BC10-4A18-
Tacoma	WA 98407-6402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer	Occupation	1
Tacoma Emergency Care Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 804 Mount Vernon St		†
		04 27 2015
City	State Zip Code	Transaction ID: 44A7F0DABF2C4219813A
Orlando	FL 32803-5308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	1
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
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TOTAL This Period (last page this line numb	er only)	9 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Angela F Mattke Date of Receipt Mailing Address 1080 Pebblebrook Rd SE 2015 25 City State Zip Code Transaction ID: 2015040384953-123 GA 30126-5612 Mableton Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.02 Other (specify) Full Name (Last, First, Middle Initial) B. Angela F Mattke Date of Receipt Mailing Address 1080 Pebblebrook Rd SE 05 12 2015 City State Zip Code Transaction ID: 47628C6A8B67DEF92C47 GA Mableton 30126-5612 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.02 Other (specify) Full Name (Last, First, Middle Initial) c. Eric E Maur Date of Receipt Mailing Address 6209 Dwayne Starnes Dr 04 27 2015 City State Zip Code Transaction ID: 84963AC0-AA03-4E22-NC Hickory 28602-8959 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 783.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 143 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Lisa J Maurer Date of Receipt Mailing Address 11901 W Hayes Ave 08 2015 City State Zip Code Transaction ID: A4F5E8E0D42EC6F6009 WI West Allis 53227-1838 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rodney L McCaskill Date of Receipt Mailing Address 4124 Stansted Dr 06 2015 11 City State Zip Code Transaction ID: C1B75968B2AD4F4191FC NC Fuquay Varina 27526-6831 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph T McCaslin Date of Receipt Mailing Address 16402 Ridgemont St 04 20 2015 City State Zip Code Transaction ID: E7F58E8337744BA1B342 NF Omaha 68136-4020 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) John McCourt Mailing Address 9436 Steeplehill Dr		Date of Receipt 03 17 2015
City Las Vegas	State Zip Code NV 89117-7270	Transaction ID : 20150317A_28 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Emergency Medicine Physicians Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 533.32	
Full Name (Last, First, Middle Initial) John McCourt Mailing Address 9436 Steeplehill Dr		Date of Receipt 04 20 _2015 _
City Las Vegas	State Zip Code NV 89117-7270	Transaction ID: 790EF4EF5E154138A47C Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Emergency Medicine Physicians	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 533.32	
Full Name (Last, First, Middle Initial) C. John McCourt		Date of Receipt
Mailing Address 9436 Steeplehill Dr	7.0.4	05 19 2015
City Las Vegas	State Zip Code NV 89117-7270	Transaction ID: 20150518183743-33 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Emergency Medicine Physicians Receipt For: Primary General Other (specify)	Emergency Physician Aggregate Year-to-Date ▼ 533.32	
SUBTOTAL of Receipts This Page (optional)		266.66
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or for commercial purposes, other than using	d Statements may not be sold or used by any per- the name and address of any political committee t	
Name of COMMITTEE (In Full) National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) John McCourt Mailing Address 9436 Steeplehill Dr		Date of Receipt
City	State Zip Code	06 18 2015 Transaction ID : 20150619175314-125
Las Vegas FEC ID number of contributing federal political committee.	NV 89117-7270	Amount of Each Receipt this Period
Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	Occupation Emergency Physician Aggregate Year-to-Date ▼ 533.32	
Full Name (Last, First, Middle Initial) 3. Michael McCrea Mailing Address 2017 Lexington Dr		Date of Receipt
City Perrysburg	State Zip Code OH 43551-5449	Transaction ID: 4442A4475101410C00FA Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	83.34
Premier Physician Services Receipt For: Primary General Other (specify) Other (specify)	Emergency Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) C. Michael McCrea		Date of Receipt
Mailing Address 2017 Lexington Dr City Perrysburg	State Zip Code OH 43551-5449	04 12 2015 Transaction ID: 4F33B7DA4C4F4A0E7427 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Premier Physician Services Receipt For: □ Primary □ General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	
SUBTOTAL of Receipts This Page (optional)		266.68
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael McCrea Date of Receipt Mailing Address 2017 Lexington Dr 2015 City State Zip Code Transaction ID: 4EFBAB69277E3F9775BB OH Perrysburg 43551-5449 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Premier Physician Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Michael McCrea Date of Receipt Mailing Address 2017 Lexington Dr 06 12 2015 City State Zip Code Transaction ID: 4C139D70F33DD085AE3E OH 43551-5449 Perrysburg Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Premier Physician Services **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Robert McCurren IV Date of Receipt Mailing Address 1007 Arborview Blvd 10 2015 City State Zip Code Transaction ID: 17246A5B9C64FCFE4B8 MI Ann Arbor 48103-3709 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Emergency Physician Medical Group PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 766.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	Statements may not be sold or used by any pers are name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Edward McCutcheon Mailing Address 605 McDonald Ave City Charlotte FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code NC 28203-5323 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 579.99	Date of Receipt 03 17 2015 Transaction ID: 20150317A_29 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Edward McCutcheon Mailing Address 605 McDonald Ave City Charlotte FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NC 28203-5323 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 579.99	Date of Receipt 04 20 2015 Transaction ID: E6B716E73165450CA9F1 Amount of Each Receipt this Period 110.00
Full Name (Last, First, Middle Initial) Edward McCutcheon Mailing Address 605 McDonald Ave City Charlotte FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code NC 28203-5323 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 579.99	Date of Receipt M 05 19 2015 Transaction ID: 20150518183743-34 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<u> </u>	303.33
TOTAL This Period (last page this line number	r only)	

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Edward McCutcheon Date of Receipt Mailing Address 605 McDonald Ave 2015 City Zip Code State Transaction ID: 20150619175314-126 NC 28203-5323 Charlotte Amount of Each Receipt this Period FEC ID number of contributing 110.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 579.99 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew John McDevitt Date of Receipt Mailing Address 800 S Gaylord St 14 04 2015 City State Zip Code Transaction ID: DFF844CACD4940AEA6BF CO Denver 80209-4632 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Care Point PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cary Crane McDonald Date of Receipt Mailing Address 106 Juniper PI 11 2015 City Zip Code State Transaction ID: EAC8EE451F504090B27C NC Chapel Hill 27514-9576 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 660.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	d Statements may not be sold or used by any pers the name and address of any political committee to					
NAME OF COMMITTEE (In Full)						
National Emergency Medicine	Political Action Committee					
Full Name (Last, First, Middle Initial) A. Dennis Lucas McGill		Date of Receipt				
Mailing Address 19 Camden Rd		02 12 2015				
City	State Zip Code	Transaction ID : 4ECB9C9AF31863D85F91				
Hillsborough	NJ 08844-3842	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	1				
Emergency Medical Associates New Jerse	Emergency Physician					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General						
Other (specify) ▼	500.00					
Full Name (Last, First, Middle Initial) 3. Dennis Lucas McGill		Date of Receipt				
Mailing Address 19 Camden Rd		M = M / D = D / Y = Y = Y				
0''	7.6	05 12 2015				
City						
Hillsborough	NJ 08844-3842	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	250.00				
Name of Employer	Occupation	1				
Emergency Medical Associates New Jerse	Emergency Physician					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	500.00					
Full Name (Last, First, Middle Initial) C. Mark A McLean		Date of Receipt				
Mailing Address 613 Stonewater Blvd		M M / D D / Y Y Y Y				
		06 25 2015				
City	State Zip Code	Transaction ID: 20150710125259-99				
Franklin	TN 37064-4890	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	-				
Physician	Emergency Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General						
Other (specify) ▼	250.00					
SUBTOTAL of Receipts This Page (optional).		750.00				
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FOR LINE NUMBER: PAGE 150 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Richard S McMonigal Date of Receipt Mailing Address 3610 45th St NE 05 2015 City Zip Code State Transaction ID: D9D2B97126D1194006A WA Tacoma 98422-2293 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Cascade Emergency Physicians Incorpora **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Howard K Mell Date of Receipt Mailing Address 10312 Glenmeade Rd 05 80 2015 City State Zip Code Transaction ID: A1EF971332BA75CD3A9 NC Cornelius 28031-9023 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Wake Forest University Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Christina Millhouse Date of Receipt Mailing Address 129 Longwood Green Ct 80 2015 City Zip Code State Transaction ID: 7AB30544EFF9D62C81C SC Aiken 29803-2775 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation ApolloMD **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) David Scott Miner Mailing Address 2398 S Garfield St City Denver FEC ID number of contributing federal political committee. Name of Employer Emergency Service Phys, PC Receipt For: Primary General Other (specify)	State Zip Code CO 80210-5615 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 04 26 2015 Transaction ID: 2015050411131-53 Amount of Each Receipt this Period 200.00
Full Name (Last, First, Middle Initial) Swarup Misra Mailing Address 9667 Ashley Green Ct NW City Concord FEC ID number of contributing federal political committee. Name of Employer EMP Receipt For: Primary General Other (specify)	State Zip Code NC 28027-7236 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt O1 31 2015 Transaction ID: 6C74EC99293542969AEE Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Thomas R Mitchell Mailing Address 3370 Sweeney Hollow Rd City Franklin FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code TN 37064-9575 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1000.00	Date of Receipt O2 26 2015 Transaction ID: 18F90E55138E4E2FBDA6 Amount of Each Receipt this Period 200.00
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NAME OF COMMITTEE (In Full)	The state of the s	
	Political Action Committee	
National Emergency Medicine	1 Ontical Action Committee	
Full Name (Last, First, Middle Initial)		
Thomas R Mitchell		Date of Receipt
Mailing Address 3370 Sweeney Hollow Rd		·
Maining Address 3570 Owechey Hollow Nu		03 23 2015
City	State Zip Code	Transaction ID : 55C5383C252A4DF69FD0
Franklin	TN 37064-9575	Amount of Each Receipt this Period
		, Amount of Lacif Heceipt this Fellou
FEC ID number of contributing		200.00
federal political committee.		
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)	•	
3. Thomas R Mitchell		Date of Receipt
Mailing Address 3370 Sweeney Hollow Rd		M M / D D / Y N Y N Y
22.00.000, 1.0.000 100		04 23 2015
City	State Zip Code	Transaction ID : 22773BBBFF4E421FA4BF
Franklin	Amount of Each Receipt this Period	
FEC ID number of contributing		
federal political committee.		200.00
·		
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
	,	
Full Name (Last, First, Middle Initial)		
C. Thomas R Mitchell		Date of Receipt
Mailing Address 3370 Sweeney Hollow Rd		05 21 2015
City	State Zip Code	Transaction ID : 2015060313759-16
Franklin	TN 37064-9575	Amount of Each Receipt this Period
FEC ID number of contributing		Table 3. East Floorpe and Forton
federal political committee.		200.00
Name of Employer	Occupation	
, ,	'	
Physician Receipt For:	Emergency Physician	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	
Ciriot (opcony)	133330	
	1	
SUBTOTAL of Receipts This Page (optional)		600.00
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Craig B Mittleman Date of Receipt Mailing Address 25 Equestrian Rdg 30 2015 City State Zip Code Transaction ID: BC801001A8BE49C8BFF7 CT Newtown 06470-1869 Amount of Each Receipt this Period FEC ID number of contributing C 90.00 federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name (Last, First, Middle Initial) B. Craig B Mittleman Date of Receipt Mailing Address 25 Equestrian Rdg 04 21 2015 City State Zip Code Transaction ID: F7CF2CF8260343B6BA14 CT 06470-1869 Newtown Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For:

Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
Full Name (Last, First, Middle Initial) Craig B Mittleman Mailing Address 25 Equestrian Rdg		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Newtown	State Zip Code CT 06470-1869	Transaction ID: 0518AA1FDC1942A69D78 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer MEP Health LLC	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
SUBTOTAL of Receipts This Page (optional).		270.00

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Craig B Mittleman Date of Receipt Mailing Address 25 Equestrian Rdg 2015 02 City State Zip Code Transaction ID: CFD38197B2BB4A239B35 CT Newtown 06470-1869 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name (Last, First, Middle Initial) B. Craig B Mittleman Date of Receipt Mailing Address 25 Equestrian Rdg 06 30 2015 City State Zip Code Transaction ID: 050643352079420C9B4C CT Newtown 06470-1869 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rupen Girish Modi Date of Receipt Mailing Address 5038 Pellingham Cir 02 2015 City State Zip Code Transaction ID: 20150612192310-181 PΑ Enola 17025-1293 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 200.02 Other (specify) 330.00 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Rupen Girish Modi Date of Receipt Mailing Address 5038 Pellingham Cir 02 2015 City State Zip Code Transaction ID: 20150612192310-163 PΑ 17025-1293 Enola Amount of Each Receipt this Period FEC ID number of contributing C 8.37 federal political committee. Name of Employer Occupation **Emergency Physician** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 200.02 Other (specify) Full Name (Last, First, Middle Initial) B. Caroline Marie Molins Date of Receipt Mailing Address 2601 Middlesex Rd 04 27 2015 City State Zip Code Transaction ID: 3058938B184D4E24BFB5 Orlando FL 32803-1321 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼

Primary General Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) Kevin Monfette Mailing Address 2954 Island Point Dr		Date of Receipt O2 27 2015
City	State Zip Code	Transaction ID : 1181F6F0094E47028BF1
Metamora	MI 48455-9625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
LIDTOTAL of Descripto This Descriptoral		1458.37

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kevin Monfette Date of Receipt Mailing Address 2954 Island Point Dr 09 2015 City State Zip Code Transaction ID: EB4D1809DC0E4F34A04D Metamora MI 48455-9625 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Montoya Date of Receipt Mailing Address 3870 American River Dr 06 24 2015 City State Zip Code Transaction ID: 2015062910844-196 CA Sacramento 95864-5903 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation California Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) c. Karolyn K Moody Date of Receipt Mailing Address 760 Boozy Creek Rd 12 2015 City Zip Code State Transaction ID: 498891FDB21428F1FCFC TN Blountville 37617-6609 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Emergency Consultants, Inc. **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 467.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Karolyn K Moody Mailing Address 760 Boozy Creek Rd City Blountville FEC ID number of contributing federal political committee. Name of Employer Emergency Consultants, Inc. Receipt For: Primary General	State Zip Code TN 37617-6609 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 04 12 2015 Transaction ID: 43FA850058D9527EC2F8 Amount of Each Receipt this Period 83.34
Other (specify) ▼ Full Name (Last, First, Middle Initial) Karolyn K Moody Mailing Address 760 Boozy Creek Rd	500.04	Date of Receipt
City Blountville FEC ID number of contributing federal political committee.	State Zip Code TN 37617-6609	05 12 2015 Transaction ID: 44CDBC0735C78ADB8FA2 Amount of Each Receipt this Period 83.34
Name of Employer Emergency Consultants, Inc. Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Karolyn K Moody Mailing Address 760 Boozy Creek Rd City Blountville FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TN 37617-6609 C	Date of Receipt 06 12 2015 Transaction ID: 49B9AF799E521A8BEB6F Amount of Each Receipt this Period 83.34
Emergency Consultants, Inc. Receipt For: Primary General Other (specify)	Emergency Physician Aggregate Year-to-Date ▼ 500.04	
SUBTOTAL of Receipts This Page (optional)	>	250.02
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for each category of the Detailed Summary Page 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John C Moorhead Date of Receipt Mailing Address 4138 SW Hamilton Ter 2015 10 City Zip Code State Transaction ID: 49A68A39DED9EF62B611 OR Portland 97239-4110 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Ohio State University Medical Group -**Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert L Morris Date of Receipt Mailing Address 2344 4 Mile Rd NE 05 12 2015 City State Zip Code Transaction ID: 4C90DDAFA97E410584EE **Grand Rapids** MI 49525-2016 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Certified Emergency Medical Specialist **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joshua B Moskovitz Date of Receipt Mailing Address 200 E 32nd St 03 12 2015 Apt 9D Zip Code City State Transaction ID: 4D52BCB9483DC855B9F6 NY New York 10016-6530 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation North Shore Forest Hills Emergency Phy **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 433.34 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Joshua B Moskovitz Mailing Address 200 E 32nd St Apt 9D City New York FEC ID number of contributing federal political committee. Name of Employer North Shore Forest Hills Emergency Phy Receipt For: Primary General Other (specify)	State Zip Code NY 10016-6530 C Occupation Emergency Physician Aggregate Year-to-Date 500.04	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Joshua B Moskovitz Mailing Address 200 E 32nd St Apt 9D City New York FEC ID number of contributing federal political committee. Name of Employer North Shore Forest Hills Emergency Phy Receipt For: Primary General Other (specify)	State Zip Code NY 10016-6530 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt M
Full Name (Last, First, Middle Initial) Joshua B Moskovitz Mailing Address 200 E 32nd St Apt 9D City New York FEC ID number of contributing federal political committee. Name of Employer North Shore Forest Hills Emergency Phy Receipt For: Primary General Other (specify)	State Zip Code NY 10016-6530 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt 06 12 2015 Transaction ID: 4C51B2976195ED9B3B10 Amount of Each Receipt this Period 83.34
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mark Alexander Muiznieks Date of Receipt Mailing Address 831 River Run Rd 2015 City Zip Code State Transaction ID: 03751B8CC038E2D7E43 TN Clarksville 37043 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Emergency Services Network Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carla Elizabeth Murphy Date of Receipt Mailing Address 1196 Preserve Cir 03 12 2015 City State Zip Code Transaction ID: 4E3595BA1DB3BEB08B97 CO Golden 80401-7045 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Emergency Service Phys, PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Carla Elizabeth Murphy Date of Receipt Mailing Address 1196 Preserve Cir 04 12 2015 City Zip Code State Transaction ID: 4CDBB1E897536DFA1597 CO Golden 80401-7045 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Emergency Service Phys, PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Carla Elizabeth Murphy Date of Receipt Mailing Address 1196 Preserve Cir 2015 City State Zip Code Transaction ID: 438184ECF541AC02025F CO 80401-7045 Golden Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Emergency Service Phys, PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Carla Elizabeth Murphy Date of Receipt Mailing Address 1196 Preserve Cir 06 12 2015 City State Zip Code Transaction ID: 4B339C9AFCE58F8583E5 CO Golden 80401-7045 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Emergency Service Phys, PC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Todd Allen Nash Date of Receipt Mailing Address 7317 Vista Mountain Dr 05 2015 City Zip Code State Transaction ID: DBC4FC50435A73EF20F TX Austin 78731-1806 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Steven Nazario Date of Receipt Mailing Address 7597 Saint Stephens Ct 2015 27 City State Zip Code Transaction ID: 3AF13737970D4D4E9ED3 FL 32835-6526 Orlando Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Susan Marie Nedza Date of Receipt Mailing Address 812 S Clay St 03 12 2015 City State Zip Code Transaction ID: 43CE9B30970EB75CF7C3 IL Hinsdale 60521-4541 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Elmhurst Emergency Medical Services Lt **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Susan Marie Nedza Date of Receipt Mailing Address 812 S Clay St 04 12 2015 City State Zip Code Transaction ID: 416C9DF287FCE501EB39 IL Hinsdale 60521-4541 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Elmhurst Emergency Medical Services Lt **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	nd Statements may not be sold or used by any person the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		33.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
National Emergency Medicin	ne Political Action Committee	
Full Name (Last, First, Middle Initial) A. Susan Marie Nedza		Date of Receipt
Mailing Address 812 S Clay St		M = M / D = D / Y = Y = Y
City	State 7in Code	05 12 2015
City Hinsdale	State Zip Code IL 60521-4541	Transaction ID: 483290339F4EB9FA3F89 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	+
Elmhurst Emergency Medical Services Lt	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) 3. Susan Marie Nedza	1	Date of Receipt
Mailing Address 812 S Clay St		M = M / D = D / Y = Y = Y
City	State Zip Code	06 12 2015
Hinsdale	IL 60521-4541	Transaction ID: 403BB5E8E733D3B79CB5 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Elmhurst Emergency Medical Services Lt	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	, 600.00	
Full Name (Last, First, Middle Initial)	'	Date of Receipt
Mailing Address 217 Lumber St		02 12 2015
City	State Zip Code	Transaction ID: 4A708A9BA31517D4E3B2
Hopkinton	MA 01748-2307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional	11)	325.00
	<u> </u>	
TOTAL This Period (last page this line num	nber only)	7

	FOF	R LINE	NU	MBER	:	PAGE	= 1	64 OF	;	340
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for each category of the Detailed Summary Page	×	11a		11b		11c		12		
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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	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Ira R Nemeth Mailing Address 217 Lumber St City Hopkinton FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MA 01748-2307 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt 03 12 2015 Transaction ID: 4E2A80FB69323550E731 Amount of Each Receipt this Period 125.00
Full Name (Last, First, Middle Initial) Ira R Nemeth Mailing Address 217 Lumber St City Hopkinton FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MA 01748-2307 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt O4 12 2015 Transaction ID: 4536AC5A13F04401B51D Amount of Each Receipt this Period 125.00
Full Name (Last, First, Middle Initial) Ira R Nemeth Mailing Address 217 Lumber St City Hopkinton FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MA 01748-2307 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 750.00	Date of Receipt March 12
SUBTOTAL of Receipts This Page (optional)	<u> </u>	375.00
TOTAL This Period (last page this line number	only)	

Name of Employer

Physician

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Use separate schedule(s)	(che	(check only one)									
for each category of the Detailed Summary Page	X	11a		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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ira R Nemeth Date of Receipt Mailing Address 217 Lumber St 2015 City State Zip Code Transaction ID: 417099B490BCB65FA660 MA 01748-2307 Hopkinton Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation **Emergency Physician** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Douglas Edward Newton Date of Receipt Mailing Address 7320 N Canyon View PR NE 06 30 2015 City State Zip Code Transaction ID: 5B945868FC5A02BFEAC Benton City WA 99320-9582 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee.

Physician Receipt For: □ Primary □ General □ Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Constance Gail Nichols Mailing Address 8 Laurel St City Paxton FEC ID number of contributing federal political committee. Name of Employer UMass Memorial Emergency Medicine Receipt For: Primary General Other (specify)	State Zip Code MA 01612-1238 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Occupation

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

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625.00

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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) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Patricia Nichols Mailing Address 13401 Bellaria Cir City Windermere FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 34786-7403 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt O4 27 2015 Transaction ID: 8BAE371364484AD8BDF7 Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Charles Niziol Mailing Address 2815 Kings Forest Dr City Kingwood FEC ID number of contributing federal political committee. Name of Employer EmCare Headquarters Receipt For: Primary General Other (specify)	State Zip Code TX 77339-2450 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brian Nobie Mailing Address 9712 Lake Hugh Dr City Gotha FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 34734-4629 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt O4 27 2015 Transaction ID: 08C2338AB89D4DE48870 Amount of Each Receipt this Period 1200.00
SUBTOTAL of Receipts This Page (optional)	>	3900.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 167 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jason T Nomura Date of Receipt Mailing Address 1014 Old Forge Rd 04 2015 City State Zip Code Transaction ID: A37D893D-B6D3-439B-DE **New Castle** 19720-5422 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation **Doctors Emergency Services Delaware Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Donald L Norris Date of Receipt Mailing Address 2792 Alisop Pl Apt 205 06 18 2015 City State Zip Code Transaction ID: 20150619175314-127 MI 48084-3464 Troy Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeffrey G Norvell Date of Receipt Mailing Address 5345 Norwood St 01 25 2015 City State Zip Code Transaction ID: FA85D58A-178B-45E5-KS Fairway 66205-2647 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Physician Services of Kansas Universit **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 168 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Andrew Sean Nugent Date of Receipt Mailing Address 2261 Brown Deer Rd 2015 City State Zip Code Transaction ID: 4877ACD4BB9409C1DA32 Coralville IΑ 52241-3346 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew Sean Nugent Date of Receipt Mailing Address 2261 Brown Deer Rd 04 12 2015 City State Zip Code Transaction ID: 4F4DBE021E4BD91740EE Coralville IΑ 52241-3346 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Andrew Sean Nugent Date of Receipt Mailing Address 2261 Brown Deer Rd 05 12 2015 City State Zip Code Transaction ID: 409CA5A3845B7B451D2E IA Coralville 52241-3346 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	MBER	:	PAGE 169 OF 34					
Use separate schedule(s)	(che	ck only	or	ne)							
for each category of the Detailed Summary Page	X	11a		11b		11c		12			
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		tatements may not be sold or used by any person name and address of any political committee to	
	NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·	
\	National Emergency Medicine P	Political Action Committee	
	Tadonal Emorgonoy Michigane I	ondon folion committee	
	Full Name (Last, First, Middle Initial)		
	Andrew Sean Nugent		Date of Receipt
i	Mailing Address 2261 Brown Deer Rd		M = M / D = D / Y = Y = Y
			06 12 2015
	City	State Zip Code	Transaction ID: 4387BE2CC956F27CB2A4
-	Coralville	IA 52241-3346	Amount of Each Receipt this Period
	FEC ID number of contributing	C	100.00
1	federal political committee.		100.00
Ī	Name of Employer	Occupation	
	Physician	Emergency Physician	
	Receipt For:		
	Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	600.00	
		7	
	Full Name (Last, First, Middle Initial)		
	Ramon Nunez		Date of Receipt
i	Mailing Address 7926 Saint Giles Pl		M = M / D = D / Y = Y = Y
			04 27 2015
	City	State Zip Code	Transaction ID : CB29F9CC4C1D4B63B3EA
-	Orlando	FL 32835-7909	Amount of Each Receipt this Period
	FEC ID number of contributing		4200.00
1	federal political committee.	C	1200.00
Ī	Name of Employer	Occupation	
	Florida Emergency Physicians Kang & As	Emergency Physician	
	Receipt For:		
	Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1300.00	
		7	
	Full Name (Last, First, Middle Initial)		
Э.	Ramon Nunez		Date of Receipt
i	Mailing Address 7926 Saint Giles PI		M = M / D = D / Y = Y = Y
			06 01 2015
	City	State Zip Code	Transaction ID: 20150710151347-2
-	Orlando	FL 32835-7909	Amount of Each Receipt this Period
	FEC ID number of contributing	C	100.00
1	federal political committee.	0	100.00
Ī	Name of Employer	Occupation	
	Florida Emergency Physicians Kang & As	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggiogale Teal-to-Date ₹	
	Other (specify) ▼	1300.00	
		7	
SI	UBTOTAL of Receipts This Page (optional)	·····	1400.00
TC	OTAL This Period (last page this line number of	only)	

	FOF	R LINE	NU	MBER	:	PAGE 170 OF 34				
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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such or for commercial purposes, other	Reports and Statements may not be sold or used by any than using the name and address of any political committed.	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full	11)	
	Medicine Political Action Committee	
Full Name (Last, First, Middle Ir	nitial)	Date of Receipt
Mailing Address 2820 Lincroft A	ve	04 27 _ 2015 _
City	State Zip Code	Transaction ID : 70F63BF8091543C0ACD7
Orlando	FL 32814-6765	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	
Florida Emergency Physicians Ka	ang & As Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		7
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Ir 3. Robert E O'Connor	nitial)	Date of Receipt
Mailing Address 515 Foxdale Ln	1	M = M / D = D / Y = Y = Y
		02 12 2015
City	State Zip Code	Transaction ID: 4BEE908FD705C82C2AB9
Charlottesville	VA 22903-9201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
University of Virginia Physicians (Grou Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Ir	nitial)	Date of Receipt
Mailing Address 515 Foxdale Lr		<u> </u>
		05 12 2015
City	State Zip Code	Transaction ID: 4D7AB9D1AC7B90572164
Charlottesville	VA 22903-9201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
University of Virginia Physicians	Grou Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	_
SUBTOTAL of Receipts This Page	e (optional)	1700.00
TOTAL This Period (last page this	s line number only)	>

FOR LINE NUMBER: PAGE 171 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kathleen T O'Donnell Date of Receipt Mailing Address 434 Euclid Ter NE 05 2015 City State Zip Code Transaction ID: 5757E9E76CFC46059198 GA 30307-2042 Atlanta Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Emory Department of Emergency Medicine Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Marie O'Grady Date of Receipt Mailing Address 1320 Webster St 04 27 2015 City State Zip Code Transaction ID: 75F57420F0E24EF995AB FL Orlando 32804-2855 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Susan A O'Malley Date of Receipt Mailing Address 6 Prospect Dr 03 17 2015 City Zip Code State Transaction ID: 20150317A_30 NY **Brentwood** 11717-2352 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 1533.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 172 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Susan A O'Malley Date of Receipt Mailing Address 6 Prospect Dr 04 20 2015 City Zip Code State Transaction ID: B288816BCF4941788F91 NY Brentwood 11717-2352 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Susan A O'Malley Date of Receipt Mailing Address 6 Prospect Dr 05 19 2015 City State Zip Code Transaction ID: 20150518183743-36 NY **Brentwood** 11717-2352 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Susan A O'Malley Date of Receipt Mailing Address 6 Prospect Dr 18 2015 Zip Code City State Transaction ID: 20150619175314-128 NY **Brentwood** 11717-2352 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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An or	y information copied from such Reports and Stator commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u></u>	NAME OF COMMITTEE (In Full)		
\rangle	National Emergency Medicine Po	olitical Action Committee	
۸.	Full Name (Last, First, Middle Initial) Brian J O'Neil		Date of Receipt
	Mailing Address 8187 Cotswold Ln		04 09 _ 2015 _
	City	State Zip Code	Transaction ID : 1565681DBC35478B8B59
	Clarkston	MI 48348-4365	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1200.00
	Name of Employer	Occupation	
	Medical Center Emergency Services	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	1200.00	
3.	Full Name (Last, First, Middle Initial) Elizabeth Oehler		Date of Receipt
•	Mailing Address 715 W Live Oak St		M M / D D / Y Y Y Y
	Live San St		06 12 2015
	City	State Zip Code	Transaction ID : 9FDC103475070DAF77F
	Austin	TX 78704-5007	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	Emergency Service Partners	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	"Agrogate rear-to-Date ▼	
	Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Joanna M Olewicz		Date of Receipt
	Mailing Address 850 Saint Clair St		M M / D D / Y Y Y Y
	J America OSO Sallit Clall St		05 08 2015
	City	State Zip Code	Transaction ID: 6610DC9C9D4821C3CF0
	Grosse Pointe	MI 48230-1247	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	Physician	Emergency Physician	
	Receipt For:		
	Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1000.00	
-	UBTOTAL of Receipts This Page (optional)	<u></u>	2450.00
_	COLOTAL OF HEGETHIS THIS FAGE (OPTIONAL)		
T	OTAL This Period (last page this line number o	nly)	7

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael B Osmundson Date of Receipt Mailing Address 62 East Dr 2015 City Zip Code State Transaction ID: 20150317A_31 OH Hartville 44632-8890 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 567.99 Other (specify) Full Name (Last, First, Middle Initial) B. Michael B Osmundson Date of Receipt Mailing Address 62 East Dr 20 04 2015 City State Zip Code Transaction ID: CF300D41788A46B19106 OH Hartville 44632-8890 Amount of Each Receipt this Period FEC ID number of contributing 106.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 567.99 Other (specify) Full Name (Last, First, Middle Initial) c. Michael B Osmundson Date of Receipt Mailing Address 62 East Dr 05 19 2015 City Zip Code State Transaction ID: 20150518183743-37 OH Hartville 44632-8890 Amount of Each Receipt this Period FEC ID number of contributing 106.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 567.99 Other (specify) 295.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR I	LINE N	IUMBER:		PAGE	: 1	75 OF	3	340	
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Michael B Osmundson Mailing Address 62 East Dr		Date of Receipt 06 18 2015
City Hartville	State Zip Code OH 44632-8890	Transaction ID: 20150619175314-129 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	106.00
Name of Employer Physician Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 567.99	
Full Name (Last, First, Middle Initial) 3. Jorge E Otero Mailing Address 22 Turtle Bay Dr		Date of Receipt 03 12 2015
City Branford	State Zip Code CT 06405-4970	Transaction ID: 4928A0337C022221BEE7 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Physician Receipt For:	Occupation Emergency Physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial) C. Jorge E Otero		Date of Receipt
Mailing Address 22 Turtle Bay Dr		04 12 2015
City Branford	State Zip Code CT 06405-4970	Transaction ID: 49E39F9FF39A5F467B88 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Physician	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
SUBTOTAL of Receipts This Page (optional)		272.68
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 176 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Jorge E Otero Date of Receipt Mailing Address 22 Turtle Bay Dr 2015 City State Zip Code Transaction ID: 4EA89FD98ED9E8D0903F CT Branford 06405-4970 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Jorge E Otero Date of Receipt Mailing Address 22 Turtle Bay Dr 06 12 2015 City State Zip Code Transaction ID: 4B0291EE529712A9113A CT Branford 06405-4970 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. David C Packo Date of Receipt Mailing Address 4535 Dressler Rd NW 18 2015 Zip Code City State Transaction ID: 20150619175314-130 OH Canton 44718-2545 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:				PAGE	: 1	77 OF	. ;	340		
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not be sold or used by any person for the purpose of soliciting contributions											

		<u> </u>
	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine I	Political Action Committee	
Full Name (Last, First, Middle Initial) Ernest Page II Mailing Address 11030 Ullswater Ln City Windermere FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 34786-5411 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt 04 27 2015 Transaction ID: F8073C124227465FB531 Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) James F Palombaro Mailing Address 11500 Black Horse Run City Raleigh FEC ID number of contributing federal political committee. Name of Employer Wake Emergency Physicians PA Receipt For: Primary General Other (specify)	State Zip Code NC 27613-7003 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 06 11 2015 Transaction ID : AF4827CDE0844EA3AC81 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Ketan Pandya Mailing Address 13049 Water Point Blvd City Windermere FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 34786-5818 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt O4 27 2015 Transaction ID: 89B939E5391B4A5081CA Amount of Each Receipt this Period 1200.00
SUBTOTAL of Receipts This Page (optional)	>	2450.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 178 OF 340

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stor 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) National Emergency Medicine P	Political Action Committee	
Full Name (Last, First, Middle Initial) Diane Paratore Mailing Address 3960 Lincoln Rd City Bloomfld HIs FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MI 48301-3963 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Rebecca B Parker Mailing Address 423 Engel Blvd City Park Ridge FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Other (specify)	State Zip Code IL 60068-4456 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 420.00	Date of Receipt M M O O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Rebecca B Parker Mailing Address 423 Engel Blvd City Park Ridge FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code IL 60068-4456 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 420.00	Date of Receipt 04 03 2015 Transaction ID: 07955FE7571C4862974F Amount of Each Receipt this Period 84.00
SUBTOTAL of Receipts This Page (optional)	>	368.00
TOTAL This Period (last page this line number of	only)	

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Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) Rebecca B Parker Mailing Address 423 Engel Blvd City Park Ridge FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code IL 60068-4456 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 420.00	Date of Receipt 05 05 2015 Transaction ID: 7DC27D4E71C946BE8639 Amount of Each Receipt this Period 84.00
Full Name (Last, First, Middle Initial) Swapnesh M Patel Mailing Address 314 Felspar Way City Cary FEC ID number of contributing federal political committee. Name of Employer Wake Emergency Physicians PA Receipt For: Primary General Other (specify)	State Zip Code NC 27518-2201 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 11 2015 Transaction ID: E75A18D109B247C3853A Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Sanjay Pattani Mailing Address 13124 Bellaria Cir City Windermere FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 34786-7401 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M / 27 2015 Transaction ID: 93357C8D6B7F4F759353 Amount of Each Receipt this Period 1200.00
SUBTOTAL of Receipts This Page (optional)		1334.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 180 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Charles F Pattavina Date of Receipt Mailing Address 360 Broadway St Joseph Hosp 2015 City Zip Code State Transaction ID: 418BA4244E025F030F18 ME Bangor 04401-3979 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation St Joseph Hospital Bangor Maine **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles F Pattavina Date of Receipt Mailing Address 360 Broadway St Joseph Hosp 04 12 2015 City State Zip Code Transaction ID: 46BB986BE03441330DB3 ME Bangor 04401-3979 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation St Joseph Hospital Bangor Maine **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charles F Pattavina Date of Receipt Mailing Address 360 Broadway 05 12 2015 St Joseph Hosp Zip Code City State Transaction ID: 46D583EC1BC9321CE160 MF Bangor 04401-3979 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation St Joseph Hospital Bangor Maine **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FOR	R LINE	NU	MBER	PAGE	340		
Use separate schedule(s) for each category of the	(che	eck only	or or	ne)				
Detailed Summary Page	×	11a		11b		11c	12	
		13		14		15	16	17

Any information copied from such Reports and Statements may not be sold or used by 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Charles F Pattavina Date of Receipt Mailing Address 360 Broadway St Joseph Hosp 2015 City Zip Code State Transaction ID: 49928AA24987D750E0EA ME Bangor 04401-3979 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation St Joseph Hospital Bangor Maine **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christine Mae Patton Date of Receipt Mailing Address 111 Hibernia Dr 80 04 2015 City State Zip Code Transaction ID: 5498BEBD042C4E6BA74D PA Harmony 16037-8519 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation **Butler Emergency Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Michael A Pawlowski Date of Receipt Mailing Address 3902 Woodhollow Ct 25 06 2015 City State Zip Code Transaction ID: 2F382D92-C52A-45AD-TX Sugar Land 77479-2839 Amount of Each Receipt this Period FEC ID number of contributing C 365.00 federal political committee. Name of Employer Occupation Schumacher Group **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify)

865.00

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

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

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Detailed Summary Page	×	11a		11b		11c		12			
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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Lee E Payne Mailing Address 1836 Yount Cir City Jbsa Lackland FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code TX 78236-1007 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt 03 12 2015 Transaction ID: 4C4AA45A8C513096B483 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Lee E Payne Mailing Address 1836 Yount Cir City Jbsa Lackland FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78236-1007 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.04	Date of Receipt 04 12 2015 Transaction ID: 4F4FA57B2223EA4C01AE Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Lee E Payne Mailing Address 1836 Yount Cir City Jbsa Lackland FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code TX 78236-1007 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	<u> </u>	250.02
TOTAL This Period (last page this line number	or only)	

	FOR	FOR LINE NUMBER: PAGE 183 OF								
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persthe 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)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) 1. Lee E Payne		Date of Receipt
Mailing Address 1836 Yount Cir		06 12 2015
City	State Zip Code	Transaction ID : 4E8FB910692DC50B23D0
Jbsa Lackland	TX 78236-1007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real to bate ¥	
Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial) 3. Daniel Eugene Peckenpaugh		Date of Receipt
Mailing Address 4107 Wood Creek Ct		M M / D D / Y Y Y Y
		01 15 2015
City	State Zip Code	Transaction ID : DCADEB1F-F7CC-4F39-
Colleyville	TX 76034-4101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	†
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) C. Vanessa C Peluso	•	Date of Receipt
Mailing Address 1768 Elizabeths Walk		†
1700 LIIZADELIIS WAIK		04 27 2015
City	State Zip Code	Transaction ID : 339F4EED62354F7A8F3F
Winter Park	FL 32789-5948	Amount of Each Receipt this Period
FEC ID number of contributing		1000.00
federal political committee.	C	1200.00
Name of Employer	Occupation	1
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	4000.00	
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional).		2483.34
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TOTAL This Period (last page this line number	er only)	9 9 9

FOR LINE NUMBER: PAGE 184 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Debra G Perina Date of Receipt Mailing Address 200 Welsh Run Rd 08 2015 City State Zip Code Transaction ID: 33BA4F2FDEA4E4F3DB6 VA Ruckersville 22968-2737 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation University of Virginia Physicians Grou **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul K Perry Date of Receipt Mailing Address 3401 N Wilder Rd 06 17 2015 City State Zip Code Transaction ID: 03E05DEB3D0995660B9 FL Plant City 33565-2677 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Winter Haven Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) c. David J Pillow Jr Date of Receipt Mailing Address 5332 Wateka Dr 02 04 2015 City State Zip Code Transaction ID: 1F90B3F1C3E6F36C2A4 TX **Dallas** 75209-5512 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 185 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

340

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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David J Pillow Jr Date of Receipt Mailing Address 5332 Wateka Dr 2015 City State Zip Code Transaction ID: EEAF1985D866DA62DE5 TX 75209-5512 Dallas Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jayson Scott Podber Date of Receipt Mailing Address 221 Weaver St Apt 19C 03 17 2015 City State Zip Code Transaction ID: 20150317A_33 CT Greenwich 06831-4254 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Fairfield Emergency Physicians Incorpo **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jayson Scott Podber Date of Receipt Mailing Address 221 Weaver St 20 04 2015 Apt 19C City State Zip Code Transaction ID: 8F52DC46BF6A4682A172 CT Greenwich 06831-4254 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Fairfield Emergency Physicians Incorpo **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 1166.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FOF	R LINE	NU	IMBER	:	PAGE	1	86 OF	: 3	34
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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he 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)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Jayson Scott Podber		Date of Receipt
Mailing Address 221 Weaver St		M = M / D = D / Y = Y = Y
Apt 19C		05 19 2015
City	State Zip Code	Transaction ID: 20150518183743-39
Greenwich	CT 06831-4254	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Fairfield Emergency Physicians Incorpo	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) 3. Jayson Scott Podber	•	Date of Receipt
Mailing Address 221 Weaver St		M M / D D / Y Y Y Y
Apt 19C		06 18 2015
City	State Zip Code	Transaction ID : 20150619175314-131
Greenwich	CT 06831-4254	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	-
Fairfield Emergency Physicians Incorpo	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggrogate real to bate •	
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) C. David Portelli	•	Date of Receipt
Mailing Address 33 Anthony Rd		M M / D D / Y Y Y Y
	-	05 06 2015
City Barrington	State Zip Code RI 02806-2258	Transaction ID: 20150508192310-126 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
University Emergency Medicine Foundati	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	400.00	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		366.66
TOTAL This Period (last page this line number	er only)	
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	FOF	R LINE	NU	IMBER	:	PAGE	. 1	87 OF	=	34
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		Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMP National En		Political Action Committee	
A. Jason A Porte Mailing Address City Orlando FEC ID number of federal political contact of Employers	of contributing ommittee. er cy Physicians Kang & As	State Zip Code FL 32806-1336 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt O4 27 2015 Transaction ID: B83CCC34C01D4F47B4F7 Amount of Each Receipt this Period 1200.00
3. Matthew E P	737 N Orange Cir of contributing ommittee. er ency Associates General	State Zip Code AZ 85201-4827 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 05 2015 Transaction ID: 4FC7F2643C114CCDF45 Amount of Each Receipt this Period 250.00
. James Leor	29 Grand Lake Cir of contributing ommittee. er ncy Associates General	State Zip Code GA 31405-8113 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / 30
SUBTOTAL of Rec	ceipts This Page (optional)	>	1500.00
TOTAL This Period	I (last page this line number	only)	

FOR LINE NUMBER: PAGE 188 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 2015 City State Zip Code Transaction ID: 4010A1785AFA2B46D466 PΑ Lancaster 17601-5193 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 04 12 2015 City State Zip Code Transaction ID: 4C0FA602A25874D1820B PA Lancaster 17601-5193 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) **c.** Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 2015 12 City State Zip Code Transaction ID: 44F89B30836A67BFAD7E PΑ Lancaster 17601-5193 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FEC ID number of contributing

federal political committee.

Name of Employer

	FOF	FOR LINE NUMBER: PAGE 189 OF									
Use separate schedule(s)	(che	ck only	or	ne)							
for each category of the Detailed Summary Page	X	11a		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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ericka Powell Date of Receipt Mailing Address 384 Spring Haven Dr 2015 City State Zip Code Transaction ID: 42038C60CAECF2009EA5 PΑ 17601-5193 Lancaster Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation **Emergency Physician** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. John T Powell Date of Receipt Mailing Address 1 Deer Run Dr 04 14 2015 City State Zip Code Transaction ID: 344FA46934ED43A697FE Greenville DE 19807-2403 Amount of Each Receipt this Period

	Receipt For: Primary General Other (specify) Other	Emergency Physician Aggregate Year-to-Date ▼ 600.00	
C.	Full Name (Last, First, Middle Initial) Sanjay K Premakumar Mailing Address 1406 Shepherd St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Durham FEC ID number of contributing	State Zip Code NC 27707-1649	Transaction ID : 8511B26F9FC347B2935D Amount of Each Receipt this Period 50.00
	Name of Employer Wake Emergency Physicians PA	Occupation Emergency Physician	30.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		·	

Occupation

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

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600.00

	FO	R LINE	NU	MBER	:	PAGE	190 ()F	34
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for each category of the Detailed Summary Page	×	11a		11b		11c	12		
		13		14		15	16		□ 17

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		tatements may not be sold or used by any personame and address of any political committee to	
\rangle	NAME OF COMMITTEE (In Full) National Emergency Medicine F	· · · · · · · · · · · · · · · · · · ·	
Α.	Full Name (Last, First, Middle Initial) John H Proctor Mailing Address 5004 Bentgrass Ct City Franklin FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code TN 37069-7254 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) Floriano Putigna Mailing Address 405 Macchi Ave City Oakland FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 34787-3059 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M / 27 2015 Transaction ID : C6E2CE9E6C464D47BB91 Amount of Each Receipt this Period 1200.00
-	Full Name (Last, First, Middle Initial) Shawn M Quinn Mailing Address 1505 Camelot Dr City Allentown FEC ID number of contributing federal political committee. Name of Employer Lehigh Valley Physicians Group Receipt For: Primary General Other (specify)	State Zip Code PA 18103-9302 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D D / 2015 Transaction ID: 4F4C91D9674ACC0A8D43 Amount of Each Receipt this Period 300.00
s	UBTOTAL of Receipts This Page (optional)	>	2700.00
т	OTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Russell D Radtke Mailing Address 3917 W Swann Ave City Tampa FEC ID number of contributing federal political committee. Name of Employer Emergency Medical Associates of Tampa Receipt For: Primary General	State Zip Code FL 33609-4432 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt 05 08 2015 Transaction ID: 64B10F7D26B0A352DCD Amount of Each Receipt this Period 600.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ali S Raja Mailing Address 11 Old Meadow Rd	600.00	Date of Receipt
City Sudbury FEC ID number of contributing federal political committee.	State Zip Code MA 01776-2725	06 30 2015 Transaction ID: FEA9F3B8-E0C2-4787- Amount of Each Receipt this Period 1200.00
Name of Employer Brigham & Women's Hospital Emergency P Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) Jennifer L Raley Mailing Address 5408 Amsterdam PI City Raleigh FEC ID number of contributing federal political committee. Name of Employer Wake Emergency Physicians PA Receipt For:	State Zip Code NC 27606-9708 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	250.00	1850.00
TOTAL This Period (last page this line number	:i Offis)	

	FO	R LINE	NU	IMBER	:	PAGE	= 1	92 OF	•	340
Use separate schedule(s)	(che	eck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports a or for commercial purposes, other than using	and Statements may not be sold or used by any pers g the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
,	ne Political Action Committee	
Full Name (Last, First, Middle Initial) 1. R Lynn Rea		Date of Receipt
Mailing Address 7618 Tanglecrest Dr		02 13 2015
City	State Zip Code	Transaction ID : 4CC28C50CAA96547D7FC
Dallas	TX 75254-8021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real to Date ¥	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		Date of Possint
R Lynn Rea		Date of Receipt
Mailing Address 7618 Tanglecrest Dr		05 13 2015
City	State Zip Code	Transaction ID: 4655A4AD0E09DBB62187
Dallas	TX 75254-8021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggregate real-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Steven D Rea		Date of Pagaint
		Date of Receipt
Mailing Address 4214 Coyote Trl		05 08 2015
City	State Zip Code	Transaction ID : DCC2E60B7A18946BA4D
Midland	TX 79707-4013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	-
Midland Emergency Management	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	
Other (specify) ▼	1300.00	
SUBTOTAL of Receipts This Page (optional	al)	1700.00
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TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: PAGE 193 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) William E Reisinger III Date of Receipt Mailing Address 2624 Macnaughten St NW 2015 City Zip Code State Transaction ID: 20AB41D37EEB936F0E1 OH North Canton 44720-9545 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Pomerene Hospital **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kathy Diana Reschke Date of Receipt Mailing Address PO Box 993744 06 24 2015 City State Zip Code Transaction ID: 2015062910844-262 CA Redding 96099-3744 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) c. Julio E Rios Date of Receipt Mailing Address 801 Briny Ave 03 2015 Apt 503 City State Zip Code Transaction ID: BA84CC25121A44C1B9B2 FL Pompano Beach 33062-6328 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1384.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	19	94 OF	34
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	nd Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Emergency Medicine		
Full Name (Last, First, Middle Initial) Julio E Rios Mailing Address 801 Briny Ave Apt 503 City Pompano Beach FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code FL 33062-6328 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M M / D3 2015 Transaction ID: B12C7772E8354FD4B337 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Julio E Rios Mailing Address 801 Briny Ave Apt 503 City Pompano Beach FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code FL 33062-6328 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 05 03 2015 Transaction ID: B0A7319ADE7E4EBDA457 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Julio E Rios Mailing Address 801 Briny Ave Apt 503 City Pompano Beach FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code FL 33062-6328 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt 06 03 2015 Transaction ID: 30CA64EB6EB54BC28BF0 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number	ber only)	

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Detailed Summary Page	X 11a 11b 11c	12							
., .,	13 14 15	16 17							

	Statements may not be sold or used by any pers ie name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Mark R Riser Mailing Address 229 W 60th St		Date of Receipt
Apt 23S		05 12 2015
City	State Zip Code	Transaction ID: 47869B27133D98727163
New York	NY 10023-7515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real to Date V	
Other (specify) ▼	246.00	
Full Name (Last, First, Middle Initial) Mark R Riser		Date of Receipt
Mailing Address 229 W 60th St		M = M / D = D / Y = Y = Y
Apt 23S	Olata 7's Oads	06 12 2015
City	State Zip Code	Transaction ID : 4DE188F166E4F0E6D8C9
New York	NY 10023-7515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	41.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggrogato roal to Dato v	
Other (specify) ▼	246.00	
Full Name (Last, First, Middle Initial) C. Megan Rishel		Date of Receipt
Mailing Address 204 Montag Cir NE		06 18 2015
City	State Zip Code	Transaction ID : 20150619175314-132
Atlanta	GA 30307-5504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	220.00	
SUBTOTAL of Receipts This Page (optional)		102.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 196 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sam S Roberts Date of Receipt Mailing Address 3806 Bonnell Dr 2015 City State Zip Code Transaction ID: 20150619175314-82 TX Austin 78731-5820 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Emergency Service Partners Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard Dean Robinson Date of Receipt Mailing Address 501 Samuels Ave Apt 540 06 12 2015 City State Zip Code Transaction ID: 20150619175314-3 Fort Worth TX 76102-8642 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maritza Rodriguez Date of Receipt Mailing Address 2336 Kettle Dr 04 27 2015 City State Zip Code Transaction ID: 9F51882D072B43AEA069 FL Orlando 32835-8129 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 3200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 197 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John J Rogers Date of Receipt Mailing Address 10673 Estes Rd 06 2015 City State Zip Code Transaction ID: 20150311_47 GA Macon 31210-5135 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. John J Rogers Date of Receipt Mailing Address 10673 Estes Rd 03 30 2015 City State Zip Code Transaction ID: 2015040384953-175 GA Macon 31210-5135 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. John J Rogers Date of Receipt Mailing Address 10673 Estes Rd 04 28 2015 City State Zip Code Transaction ID: 2015050411131-177 GA Macon 31210-5135 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 198 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) John J Rogers Date of Receipt Mailing Address 10673 Estes Rd 01 2015 City State Zip Code Transaction ID: 20150612192310-132 GA Macon 31210-5135 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. David H Rosenbaum Date of Receipt Mailing Address 2112 Fallon Oaks Ct 06 2015 11 City State Zip Code Transaction ID: 340CACC263F24F86A527 NC Raleigh 27608-1675 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark S Rosenberg Date of Receipt Mailing Address 38 N Ridge Rd 03 15 2015 City State Zip Code Transaction ID: 4EC6B95FFBE64FFA6D5F NJ Denville 07834-9629 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 433.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1	340	
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	and Statements may not be sold or used by any person the name and address of any political committee to	
	g and mario and address of any political committee t	o contra contributions from such continues.
NAME OF COMMITTEE (In Full)	ne Political Action Committee	
/ National Emergency Medicil	ne Political Action Committee	
Full Name (Last, First, Middle Initial)		
Mark S Rosenberg		Date of Receipt
Mailing Address 38 N Ridge Rd		M = M / D = D / Y = Y = Y
		06 15 2015
City	State Zip Code	Transaction ID: 407EBDBDA1538D0AE324
Denville	NJ 07834-9629	Amount of Each Receipt this Period
FEC ID number of contributing	C	300.00
federal political committee.	C	300.00
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:		-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	600.00	
		
Full Name (Last, First, Middle Initial)	'	
B. David William Ross		Date of Receipt
Mailing Address 15340 Raton Rd		M = M / D = D / Y = Y = Y
		02 12 2015
City	State Zip Code	Transaction ID: 4449BE8101B6B427F224
Colorado Spgs	CO 80921-2140	Amount of Each Receipt this Period
FEC ID number of contributing	C	250.00
federal political committee.	0	250.00
Name of Employer	Occupation	1
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
·		
Full Name (Last, First, Middle Initial)		
David William Ross		Date of Receipt
Mailing Address 15340 Raton Rd		M = M / D = D / Y = Y = Y
City	State Zin Code	05 12 2015
City Colorado Spgs	State Zip Code CO 80921-2140	Transaction ID : 4026B93D8345B4528F61
	00021-2140	Amount of Each Receipt this Period
FEC ID number of contributing	C	250.00
federal political committee.		
Name of Employer	Occupation	1
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional	al) >	800.00
TOTAL This Period (last page this line nur	nber only)	

FOR LINE NUMBER: PAGE 200 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Scott Edward Rudkin Date of Receipt Mailing Address 6731 E Boscana Ct 2015 City State Zip Code Transaction ID: 4E10905578A3430C100 CA Orange 92867-6406 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of California Irvine Emerge **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Laura A Russell Date of Receipt Mailing Address 92-303 Kiowao Pl 04 16 2015 City State Zip Code Transaction ID: 4022ED4916284492AF0D HI 96707-2809 Kapolei Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Laura A Russell Date of Receipt Mailing Address 92-303 Kiowao PI 05 22 2015 City State Zip Code Transaction ID: 2015060313759-105 HI Kapolei 96707-2809 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 950.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 201 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael A Russell Date of Receipt Mailing Address 4571 N Banta Rd 2015 City State Zip Code Transaction ID: 153E6D0C9BE56AF2176 46106-8820 Bargersville IN Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **Emergency Physicians of Indianapolis Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tracy G Sanson Date of Receipt Mailing Address 812 Lorena Rd 03 26 2015 City State Zip Code Transaction ID: 23BF287F61DC4A9EBADC FL Lutz 33548-4589 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation Team Health **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tracy G Sanson Date of Receipt Mailing Address 812 Lorena Rd 26 04 2015 City State Zip Code Transaction ID: 033FA2DD5D52437D88AE FL Lutz 33548-4589 Amount of Each Receipt this Period FEC ID number of contributing 84.00 С federal political committee. Name of Employer Occupation Team Health **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 418.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial)		B (B
Tracy G Sanson		Date of Receipt
Mailing Address 812 Lorena Rd		05 26 2015
City	State Zip Code	Transaction ID : C293894574E746C592D4
Lutz	FL 33548-4589	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	
Team Health	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	
Full Name (Last, First, Middle Initial) 3. Marc Santambrosio		Date of Receipt
Mailing Address 7965 S Park Pl		M = M / D = D / Y = Y = Y
City	State Zip Code	04 27 2015
Orlando	FL 32819-4885	Transaction ID : 0CC6907F756A48E9A42C Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each Fleedipt this Feriou
federal political committee.	C	1200.00
Name of Employer	Occupation	
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial) C. David D Sarkarati		Date of Receipt
Mailing Address 1048 Howell Branch Rd		04 27 2015
City	State Zip Code	Transaction ID: 8362221A4EDA4999B796
Winter Park	FL 32789-1004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional)		2484.00
. 5 () ()		
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 203 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Luke Chris Saski Date of Receipt Mailing Address 7573 Knoll Crest Dr 2015 City State Zip Code Transaction ID: 68C639AA-0744-44FE-48322-2650 W Bloomfield MI Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lawrence J Satkowiak Date of Receipt Mailing Address 2807 W Decatur Ave 03 17 2015 City State Zip Code Transaction ID: 20150317A_35 CA Fresno 93711-0356 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **c.** Lawrence J Satkowiak Date of Receipt Mailing Address 2807 W Decatur Ave 20 04 2015 City State Zip Code Transaction ID: 5014B5DCF08F4A4AAD69 CA Fresno 93711-0356 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 1366.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 204 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Lawrence J Satkowiak Date of Receipt Mailing Address 2807 W Decatur Ave 2015 City State Zip Code Transaction ID: 20150518183743-41 CA Fresno 93711-0356 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Lawrence J Satkowiak Date of Receipt Mailing Address 2807 W Decatur Ave 06 18 2015 City State Zip Code Transaction ID: 20150619175314-133 CA Fresno 93711-0356 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physicians Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Christopher G Scharenbrock Date of Receipt Mailing Address 2504 Cotswold Hill Dr 05 01 2015 Zip Code City State Transaction ID: A3E343B4-0B4E-4146-CA Fairfield 94534-7112 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 766.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 205 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Leroy R Schlesselman Date of Receipt Mailing Address 2280 Washington Dr 2015 31 City State Zip Code Transaction ID: 2015060313759-187 Northbrook IL 60062-7803 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nathaniel R Schlicher Date of Receipt Mailing Address 4615 77th Ave NW 03 12 2015 City State Zip Code Transaction ID: 4570BFEF8BDB6C4338C8 WA Gig Harbor 98335-6532 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Nathaniel R Schlicher Date of Receipt Mailing Address 4615 77th Ave NW 04 12 2015 City Zip Code State Transaction ID: 423A90CDD1AE621193F1 WA Gig Harbor 98335-6532 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 566.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 206 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Nathaniel R Schlicher Date of Receipt Mailing Address 4615 77th Ave NW 2015 City Zip Code State Transaction ID: 4C069A6334DF13DC98F1 WA 98335-6532 Gig Harbor Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Nathaniel R Schlicher Date of Receipt Mailing Address 4615 77th Ave NW 06 12 2015 City State Zip Code Transaction ID: 4166B6F571E36EBAC2BD WA Gig Harbor 98335-6532 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. David T Schwartz Date of Receipt Mailing Address 40 W 77th St 10 2015 # 2E City State Zip Code Transaction ID: 25A86B30B684FB3D8A7 NY New York 10024-5128 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** 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).....

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Detailed Summary Page	<u> </u>	11a		11b		11c		12			
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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Regan Andre Schwartz Mailing Address 2446 Westminster Ter City Oviedo FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 32765-7503 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / 27 2015 Transaction ID: 4857C80092204464AE7B Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Evan Schwarz Mailing Address 2604 Cecelia Ave City Saint Louis FEC ID number of contributing federal political committee. Name of Employer Washington University - Missouri Receipt For: Primary General Other (specify)	State Zip Code MO 63144-2517 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt O4
Full Name (Last, First, Middle Initial) Christopher Ian Scott Mailing Address 3524 Alabama St City San Diego FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code CA 92104-4004 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	2165.00
TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page	X	11a		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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David L Scott Date of Receipt Mailing Address 4733 N Ridge Dr 2015 City State Zip Code Transaction ID: 20150317A_36 OH Akron 44333-4703 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation **Emergency Physician Emergency Medicine Physician Managemen** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. David L Scott Date of Receipt Mailing Address 4733 N Ridge Dr 04 20 2015 City State Zip Code Transaction ID: 95A4460C10CD43CA9104 OH 44333-4703 Akron Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Emergency Medicine Physician Managemen	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) C. David L Scott		Date of Receipt
Mailing Address 4733 N Ridge Dr		05 19 2015
City	State Zip Code	Transaction ID: 20150518183743-42
Akron	OH 44333-4703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	
Emergency Medicine Physician Managemen	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
		249 99

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	FOR LINE NUMBER:	PAGE 209 OF 340								
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for each category of the Detailed Summary Page	X 11a 11b	11c 12								
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.										

				13	14 15 16 17
Any information copied from for commercial purpos	om such Reports and S es, other than using the	tatements may name and add	not be sold or used by an dress of any political comm	y person for the pui	rpose of soliciting contributions butions from such committee.
NAME OF COMMITTE	EE (In Full)				
\	gency Medicine F	Political Act	tion Committee		
Full Name (Last, First, David L Scott	Middle Initial)			Date of Re	eceipt
Mailing Address 4733	N Ridge Dr			M M M A	18 2015
City		State	Zip Code		tion ID : 20150619175314-134
Akron		ОН	44333-4703		Each Receipt this Period
FEC ID number of confederal political commi	•	С			83.33
Name of Employer		Occupation			
Emergency Medicine F	Physician Managemen	Emergency P	hysician		
Receipt For: Primary	General	Aggregate Ye	ear-to-Date ▼		
Other (specify)			499.98		
Full Name (Last, First, William P Scrugg				Date of Ro	eceipt
Mailing Address 1445	Akiikii Pl			03	02 2015
City		State	Zip Code		tion ID : DA56298D-9793-4E5E-
Kailua		HI	96734-4285		Each Receipt this Period
FEC ID number of confederal political commi	•	C			1200.00
Name of Employer		Occupation			
Hawaii Emergency Phy	sicians Associates	Emergency Pl	hysician		
Receipt For:			ear-to-Date ▼		
Primary Other (specify)	General	1.55. 384.0	1200.00		
Full Name (Last, First,	Middle Initial)		7		
David Charles S				Date of Re	eceipt
Mailing Address 9348				M - M 03	14 _ 2015 _
City		State	Zip Code		tion ID: 8A0BFAA9826D4835835F
Chattanooga		TN	37421-2067		Each Receipt this Period
FEC ID number of confederal political commi	0	С			250.00
Name of Employer		Occupation			
Physician		Emergency P	hysician		
Receipt For:		Aggregate Ye	ear-to-Date ▼		
Primary Other (appoint)	General		550.00		
Other (specify)			550.00		
SUBTOTAL of Receipts	This Page (optional)				1533.33
TOTAL This Period (last	t 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David Charles Seaberg Date of Receipt Mailing Address 9348 Royal Mountain Dr 09 2015 City Zip Code State Transaction ID: 4757873989E56A5C8A73 TN Chattanooga 37421-2067 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Victoria Hutto Selley Date of Receipt Mailing Address 204 Glenn Abby Dr 03 17 2015 City State Zip Code Transaction ID: 20150317A_37 NC Morehead City 28557-2578 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) Full Name (Last, First, Middle Initial) c. Victoria Hutto Selley Date of Receipt Mailing Address 204 Glenn Abby Dr 20 04 2015 City State Zip Code Transaction ID: 1B365CE81B8242C58D40 NC Morehead City 28557-2578 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) 483.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 211 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Victoria Hutto Selley Date of Receipt Mailing Address 204 Glenn Abby Dr 2015 City State Zip Code Transaction ID: 20150518183743-43 NC Morehead City 28557-2578 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) Full Name (Last, First, Middle Initial) **B.** Victoria Hutto Selley Date of Receipt Mailing Address 204 Glenn Abby Dr 06 18 2015 City State Zip Code Transaction ID: 20150619175314-135 NC Morehead City 28557-2578 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) Full Name (Last, First, Middle Initial) c. Parin Shah Date of Receipt Mailing Address 9909 Marie Mdw 26 2015 City State Zip Code Transaction ID: 7DC854AAE99BCA6EE7B TX San Antonio 78266-2343 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation E Merge Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 212 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Gregory L Shangold Date of Receipt Mailing Address 66 Beacon Hill Dr 2015 City State Zip Code Transaction ID: 42BD8C0C0A52375FFAAD CT Storrs Manfld 06268-2756 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Northeast Emergency Medicine Specialis **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul M Sheehan Date of Receipt Mailing Address 4923 Elm St 05 01 2015 City State Zip Code Transaction ID: 20150508192310-44 TX Bellaire 77401-2810 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. William K Sheffield Date of Receipt Mailing Address 5922 S 1000 E 10 2015 City Zip Code State Transaction ID: BD3A9E2D4D9C2D69A44 UT Ogden 84405-7200 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation EPIC, LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Use separate schedule(s)	(check only one)	•	
for each category of the Detailed Summary Page	X 11a 11b	11c 12	
	13 14	15 16	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) James Brent Sholar Mailing Address 3740 Rocky Ridge Ct City Hood River FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code OR 97031-7738 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Suzy Schneider Shukovsky Mailing Address 41 Old Hwy City Wilton FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code CT 06897-3114 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 03 17 2015 Transaction ID: 20150317A 38 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Suzy Schneider Shukovsky Mailing Address 41 Old Hwy City Wilton FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code CT 06897-3114 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt M M / 20
SUBTOTAL of Receipts This Page (optional)	>	266.66
TOTAL This Period (last page this line number	only)	

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Detailed Summary Page		X	11a		11b		11c		12		
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Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any pers	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) A. Suzy Schneider Shukovsky		Date of Receipt
Mailing Address 41 Old Hwy		05 19 2015
City	State Zip Code	Transaction ID : 20150518183743-44
Wilton	CT 06897-3114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.33
Name of Employer	Occupation	1
Emergency Medicine Physician Manageme	n Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial) 3. Suzy Schneider Shukovsky	ı	Date of Receipt
Mailing Address 41 Old Hwy		M = M / D = D / Y = Y = Y
,		06 18 2015
City	State Zip Code	Transaction ID : 20150619175314-137
Wilton	CT 06897-3114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	†
Emergency Medicine Physician Manageme	n Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	499.98	
Full Name (Last, First, Middle Initial)	<u>'</u>	Date of Receipt
Mailing Address 7860 Ficquette Rd		M M / D D / Y Y Y Y
7000 Ficquette Nu		04 27 _ 2015 _
City	State Zip Code	Transaction ID : 6821A6C1F44547079233
Windermere	FL 34786-6904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	-
Florida Emergency Physicians Kang & As	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	4000.00	
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional)	1366.66
TOTAL This Deviced float ages this float	how only)	
IVIAL This Period (last page this line num	ber only)	

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Any information copied from such Reports an 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 t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Deepika Singh		Date of Receipt
Mailing Address 15 Smethwick Ct		03 17 2015
City Pittsford	State Zip Code NY 14534-9789	Transaction ID : 20150317A_39 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Physician	Occupation Emergency Physician	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) 3. Deepika Singh Mailing Address 15 Smethwick Ct		Date of Receipt
City	State Zip Code	04 20 2015 Transaction ID : 8B5DBD2ADCF34C958E5E
Pittsford	NY 14534-9789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.33
Name of Employer Physician	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) Deepika Singh	<u>'</u>	Date of Receipt
Mailing Address 15 Smethwick Ct		05 19 2015 _
City Pittsford	State Zip Code NY 14534-9789	Transaction ID : 20150518183743-45 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation Emergency Physician	-
Physician Receipt For:	Emergency Physician	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	499.98	
SUBTOTAL of Receipts This Page (optional)) >	249.99
	<u>-</u>	
TOTAL This Period (last page this line numb	per only)	

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

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	nd Statements may not be sold or used by any pers g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicin	ne Political Action Committee	
Full Name (Last, First, Middle Initial) Deepika Singh		Date of Receipt
Mailing Address 15 Smethwick Ct		06 18 2015
City Pittsford	State Zip Code NY 14534-9789	Transaction ID : 20150619175314-138 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer Physician	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Full Name (Last, First, Middle Initial) Siva Sivanesan Mailing Address 765 Bear Creek Cir	,	Date of Receipt
City Winter Spgs	State Zip Code FL 32708-3892	O4 27 2015 Transaction ID : 6BBEE6B95EA9467B8776 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer Florida Emergency Physicians Kang & As	Occupation Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) David P Sklar	,	Date of Receipt
Mailing Address 1805 Newton PI NE		04 02 2015
City Albuquerque	State Zip Code NM 87106-2526	Transaction ID : 70D58330713E43F1B146 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer Physician	Occupation Emergency Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional	ıl) >	2483.33
TOTAL This Period (last page this line num	aber only)	

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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 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)

National Emergency Medicine Political Action Committee

	National Emergency Medicine i	Ontion / Ottor Committee	
١.	Full Name (Last, First, Middle Initial) Mark Slabinski		Date of Receipt
	Mailing Address 3004 Edison St NW		03 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID : 20150317A_40
	Uniontown	OH 44685-7212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	100.00
	Name of Employer	Occupation	
	Emergency Medicine Physician Managemen	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	583.33	
3.	Full Name (Last, First, Middle Initial) Mark Slabinski		Date of Receipt
	Mailing Address 3004 Edison St NW		04 20 2015
	City	State Zip Code	Transaction ID: 063FB032527747379618
	Uniontown	OH 44685-7212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	100.00
	Name of Employer	Occupation	
	Emergency Medicine Physician Managemen	Emergency Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	583.33	
<u> </u>	Full Name (Last, First, Middle Initial) Mark Slabinski		Date of Receipt
	Mailing Address 3004 Edison St NW		05 19 2015
	City	State Zip Code	Transaction ID: 20150518183743-46
	Uniontown	OH 44685-7212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	100.00
	Name of Employer	Occupation	
	Emergency Medicine Physician Managemen	Emergency Physician	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	583.33	
s	UBTOTAL of Receipts This Page (optional)		300.00
Т	OTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 218 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Mark Slabinski Date of Receipt Mailing Address 3004 Edison St NW 2015 City State Zip Code Transaction ID: 20150619175314-140 OH Uniontown 44685-7212 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 583.33 Other (specify) Full Name (Last, First, Middle Initial) B. Todd Slesinger Date of Receipt Mailing Address 427 Daub Ave 03 12 2015 City State Zip Code Transaction ID: 463B8FDB30877E5439FC NY Hewlett 11557-1136 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Todd Slesinger Date of Receipt Mailing Address 427 Daub Ave 04 12 2015 City Zip Code State Transaction ID: 4BBE926081E090A5F201 NY Hewlett 11557-1136 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any persthe name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) 1. Todd Slesinger		Date of Receipt
Mailing Address 427 Daub Ave		05 12 2015
City	State Zip Code	Transaction ID : 47578FE492E9F7F75506
Hewlett	NY 11557-1136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	0.0	
Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial)		Date of Possint
Todd Slesinger		Date of Receipt
Mailing Address 427 Daub Ave		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	06 12 2015 Transaction ID : 4250BBB151D240822820
Hewlett	NY 11557-1136	Transaction ID : 42E9BBB1F1D310822829 Amount of Each Receipt this Period
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial) C. Virgil W Smaltz	-	Date of Receipt
		Date of Receipt
Mailing Address 24 Bay View Ter		03 10 2015
City	State Zip Code	Transaction ID : 9FAF241478F94CCAA5B3
Geneva	NY 14456-9768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
Emergency Medicine Physician Managemen	Emergency Physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	540.70	
Other (specify) ▼	516.70	
SUBTOTAL of Receipts This Page (optional).	·	250.02
TOTAL TILL D. L. L. C. L		
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 220 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 2015 10 City Zip Code State Transaction ID: FE45B8AA2FA7434580FD NY Geneva 14456-9768 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 516.70 Other (specify) Full Name (Last, First, Middle Initial) B. Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 05 09 2015 City State Zip Code Transaction ID: 4F2191D1A65ACD99761D NY 14456-9768 Geneva Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 516.70 Other (specify) Full Name (Last, First, Middle Initial) c. Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 10 2015 City State Zip Code Transaction ID: 24B3DFB36F19443D88FA NY Geneva 14456-9768 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 516.70 Other (specify) 266.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 221 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 2015 City Zip Code State Transaction ID: 404B6E232D2543E5822A NY Geneva 14456-9768 Amount of Each Receipt this Period FEC ID number of contributing -100.00federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 516.70 Other (specify) Full Name (Last, First, Middle Initial) B. Virgil W Smaltz Date of Receipt Mailing Address 24 Bay View Ter 06 30 2015 City State Zip Code Transaction ID: 4DE9A81D2A9A7D651020 NY 14456-9768 Geneva Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 516.70 Other (specify) Full Name (Last, First, Middle Initial) c. Sullivan K Smith Date of Receipt Mailing Address 1 Medical Center Blvd 12 2015 City Zip Code State Transaction ID: 46BA93E98064014B688C TN Cookeville 38501-4294 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 222 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Sullivan K Smith Date of Receipt Mailing Address 1 Medical Center Blvd 2015 City State Zip Code Transaction ID: 475F843D2AEA150EFF24 TN Cookeville 38501-4294 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Snediker Date of Receipt Mailing Address 1425 Browning Rd 03 17 2015 City State Zip Code Transaction ID: 20150317A_46 Pittsburgh PA 15206-1737 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel Snediker Date of Receipt Mailing Address 1425 Browning Rd 20 04 2015 City State Zip Code Transaction ID: 1772553FC90D4845A4C7 PΑ Pittsburgh 15206-1737 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) 433.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 223 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Daniel Snediker Date of Receipt Mailing Address 1425 Browning Rd 2015 City State Zip Code Transaction ID: 20150518183743-53 PΑ Pittsburgh 15206-1737 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Snediker Date of Receipt Mailing Address 1425 Browning Rd 06 18 2015 City State Zip Code Transaction ID: 20150619175314-149 Pittsburgh PA 15206-1737 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 549.99 Other (specify) Full Name (Last, First, Middle Initial) c. Robert C Solomon Date of Receipt Mailing Address 108 Saddle Ridge Dr 04 12 2015 Zip Code City State Transaction ID: 48CFBA23FCCF95A91A60 PΑ Oakdale 15071-3726 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 416.70 Other (specify) 283.34 SUBTOTAL of Receipts This Page (optional).....

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

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	ı	13		14		15		16		17	

	Statements may not be sold or used by any pers le name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Robert C Solomon Mailing Address 108 Saddle Ridge Dr City Oakdale FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 15071-3726 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 416.70	Date of Receipt 05 12 2015 Transaction ID: 447BAA5E4470A780CA85 Amount of Each Receipt this Period 83.34
Full Name (Last, First, Middle Initial) Robert C Solomon Mailing Address 108 Saddle Ridge Dr City Oakdale FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 15071-3726 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 416.70	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Steven Joseph Stack Mailing Address 2083 Bridgeport Dr City Lexington FEC ID number of contributing federal political committee. Name of Employer Team Health Receipt For: Primary General Other (specify)	State Zip Code KY 40502-2615 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M M / D P / 2015 Transaction ID: 40EE13AC-7AFC-4A7C- Amount of Each Receipt this Period 1200.00
SUBTOTAL of Receipts This Page (optional)	>	1366.68
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 225 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ryan Stanton Date of Receipt Mailing Address 203 Deerfield Cir 2015 City State Zip Code Transaction ID: 4E05BBE833E50BF5D9BF KY 40356-8038 Nicholasville Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.19 Other (specify) Full Name (Last, First, Middle Initial) B. Ryan Stanton Date of Receipt Mailing Address 203 Deerfield Cir 03 30 2015 City State Zip Code Transaction ID: 2015040384953-193 Nicholasville KY 40356-8038 Amount of Each Receipt this Period FEC ID number of contributing 4.17 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.19 Other (specify) Full Name (Last, First, Middle Initial) c. Ryan Stanton Date of Receipt Mailing Address 203 Deerfield Cir 04 12 2015 City State Zip Code Transaction ID: 47B6A376FB3328213F91 KY Nicholasville 40356-8038 Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.19 Other (specify) 170.85 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 226 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Ryan Stanton Date of Receipt Mailing Address 203 Deerfield Cir 2015 City State Zip Code Transaction ID: 2015050411131-185 KY 40356-8038 Nicholasville Amount of Each Receipt this Period FEC ID number of contributing C 4.17 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.19 Other (specify) Full Name (Last, First, Middle Initial) B. Ryan Stanton Date of Receipt Mailing Address 203 Deerfield Cir 05 12 2015 City State Zip Code Transaction ID: 4FA9A2BC9461A1248F55 Nicholasville KY 40356-8038 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.19 Other (specify) Full Name (Last, First, Middle Initial) c. Ryan Stanton Date of Receipt Mailing Address 203 Deerfield Cir 01 2015 City State Zip Code Transaction ID: 20150612192310-141 KY Nicholasville 40356-8038 Amount of Each Receipt this Period FEC ID number of contributing C 4.13 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 529.19 Other (specify) 91.64 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FO	R LINE	NU	MBER	:	PAGE	2	27 OF	;	340
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camer cammen, reage		13		14		15		16		17

	I Statements may not be sold or used by any persibe name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Ryan Stanton Mailing Address 203 Deerfield Cir		Date of Receipt
City Nicholasville	State Zip Code KY 40356-8038	06 12 2015 Transaction ID: 45CF99DD439A6BCA805D Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Physician Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 529.19	
Full Name (Last, First, Middle Initial) Ryan Stanton Mailing Address 203 Deerfield Cir		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 Nicholasville FEC ID number of contributing	State Zip Code KY 40356-8038	Transaction ID: 20150710125259-132 Amount of Each Receipt this Period
federal political committee. Name of Employer Physician	Occupation Emergency Physician	4.17
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 529.19	
Full Name (Last, First, Middle Initial) Gary C Starr	·	Date of Receipt
Mailing Address 5012 Russell Ave S City Minneapolis FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MN 55410-2209 C Occupation Emergency Physician	Transaction ID: 4FA58A384B07AB3B4EA4 Amount of Each Receipt this Period 100.00
Physician Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 283.34	
SUBTOTAL of Receipts This Page (optional).	>	187.51
TOTAL This Period (last page this line number	er only)	

	FOF	R LINE	NU	MBER	:	PAGE	2	28 OF	340
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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	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Sandra L Steffenson Mailing Address 4 Valley High City Lafayette FEC ID number of contributing	State Zip Code CA 94549-2418	Date of Receipt M M
federal political committee. Name of Employer Physician Receipt For: □ Primary □ General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 284.60	
Full Name (Last, First, Middle Initial) John James Stroh Jr Mailing Address 2802 Cascade Springs Ct City	State Zip Code	Date of Receipt M
Manvel FEC ID number of contributing federal political committee. Name of Employer	TX 77578-4885 C Occupation	Amount of Each Receipt this Period 300.00
Medical Center Emergency Physicians Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Geeta Subramaniam Mailing Address 106 Lendl Ct City Cary FEC ID number of contributing federal political committee.	State Zip Code NC 27511-6694	Date of Receipt 06 11 2015 Transaction ID: 839F7A731B9A4DB1BD55 Amount of Each Receipt this Period 50.00
Name of Employer Wake Emergency Physicians PA Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	•	434.60
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 229 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Thomas Jerome Sugarman Date of Receipt Mailing Address 1115 Miller Ave 2015 24 City Zip Code State Transaction ID: 2015062910844-457 CA Berkeley 94708-1726 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation **CEP America Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Eduard Suter Date of Receipt Mailing Address 5926 Saint Marks Cir 05 2015 11 City State Zip Code Transaction ID: 1BE3D3A4965146C999B9 **Dallas** TX 75230-4048 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Texas Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Brian Sutton Date of Receipt Mailing Address 47 Stephanie Ln 03 12 2015 City State Zip Code Transaction ID: 4955A6008C674DAD602A MA Westfield 01085-1484 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Westfield Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1384.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	MBER	:	PAGE	2	30 OF	: ;	34
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,,g.		13		14		15		16		17

	nd Statements may not be sold or used by any person the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) A. Brian Sutton		Date of Receipt
Mailing Address 47 Stephanie Ln		04 12 2015
City	State Zip Code	Transaction ID : 4C96B66F6F3342A3AFF8
Westfield	MA 01085-1484	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Westfield Emergency Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary	600.00	
Full Name (Last, First, Middle Initial) 3. Brian Sutton		Date of Receipt
Mailing Address 47 Stephanie Ln	05 12 _2015 _	
City	Transaction ID : 41ECA497A20A0351944A	
Westfield	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Westfield Emergency Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 47 Stephanie Ln		06 12 2015
City	State Zip Code	Transaction ID : 4943AAE1ED4FF487CE08
Westfield	MA 01085-1484	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Westfield Emergency Physicians	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional	l) >	300.00
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: PAGE 231 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Timothy Scott Talbot Date of Receipt Mailing Address 1100 Pegasus Dr NW 2015 City State Zip Code Transaction ID: 3182F8FE35F2C7BB1FE Huntsville AL 35806-5009 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stefan Teitge Date of Receipt Mailing Address 1391 San Marcos Ct 06 24 2015 City State Zip Code Transaction ID: 2015062910844-430 CA Sn Luis Obisp 93401-5336 Amount of Each Receipt this Period FEC ID number of contributing 84.60 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) Full Name (Last, First, Middle Initial) c. Fred Foster Tilden Date of Receipt Mailing Address 36 Bainbridge Rd 26 2015 City State Zip Code Transaction ID: 42AAA78509608E1DFDB4 CT West Hartford 06119-1145 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1534.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR	LINE 1	UΝ	MBER	:	PAGE	2	.32 OF	34
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		13		14		15		16	1 1·

Any information copied from such Reports and Sor for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Emergency Medicine P	Political Action Committee	
Full Name (Last, First, Middle Initial) Alfredo Tirado-Gonzalez Mailing Address 4432 Twinview Ln City Orlando FEC ID number of contributing federal political committee. Name of Employer Florida Emergency Physicians Kang & As Receipt For: Primary General Other (specify)	State Zip Code FL 32814-6055 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt 04 27 2015 Transaction ID: C65574360D414DA58C39 Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Kevin James Torres Mailing Address 52 High Ridge Dr City Pawcatuck FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code CT 06379-1237 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 03 17 2015 Transaction ID: 20150317A 41 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Kevin James Torres Mailing Address 52 High Ridge Dr City Pawcatuck FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physician Managemen Receipt For: Primary General Other (specify)	State Zip Code CT 06379-1237 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 499.98	Date of Receipt 04 20 2015 Transaction ID: 552AD03207D144BD91CF Amount of Each Receipt this Period 83.33
SUBTOTAL of Receipts This Page (optional)	>	1366.66
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 233 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kevin James Torres Date of Receipt Mailing Address 52 High Ridge Dr 2015 City State Zip Code Transaction ID: 20150518183743-48 CT Pawcatuck 06379-1237 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin James Torres Date of Receipt Mailing Address 52 High Ridge Dr 06 18 2015 City State Zip Code Transaction ID: 20150619175314-143 CT Pawcatuck 06379-1237 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Louis P Tran Date of Receipt Mailing Address 1581 Tustin Ave 24 2015 City State Zip Code Transaction ID: 2015062910844-295 CA Costa Mesa 92627-3264 Amount of Each Receipt this Period FEC ID number of contributing 84.60 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 234.60 Other (specify) 251.26 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 234 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Kevin Lawrence Trappe Date of Receipt Mailing Address 10635 Bear Path Ct 05 2015 City State Zip Code Transaction ID: 20150508192310-104 Noblesville IN 46060-1275 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Medical Associates LLP **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gerad A Troutman Date of Receipt Mailing Address 7808 London Ct 06 25 2015 City State Zip Code Transaction ID: 20150710125259-155 TX Amarillo 79119-4998 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeremy David Tucker Date of Receipt Mailing Address 23959 Meredith Ct 04 22 2015 City Zip Code State Transaction ID: AAE43104-75D1-4C3C-MD Hollywood 20636-2172 Amount of Each Receipt this Period FEC ID number of contributing 1600.00 С federal political committee. Name of Employer Occupation MEP Health LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) 2200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 235 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Joseph Adrian Tyndall Date of Receipt Mailing Address 7962 SW 85th Ter 2015 City State Zip Code Transaction ID: 482DB953D4991FD8637B FL Gainesville 32608-5792 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation UF Department of Emergency Medicine Gr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph Adrian Tyndall Date of Receipt Mailing Address 7962 SW 85th Ter 04 12 2015 City State Zip Code Transaction ID: 40118FEA572854808847 FL 32608-5792 Gainesville Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation UF Department of Emergency Medicine Gr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph Adrian Tyndall Date of Receipt Mailing Address 7962 SW 85th Ter 12 2015 City State Zip Code Transaction ID: 420DA76A5A97B33CA20C FL Gainesville 32608-5792 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation UF Department of Emergency Medicine Gr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 236 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Joseph Adrian Tyndall Date of Receipt Mailing Address 7962 SW 85th Ter 2015 City State Zip Code Transaction ID: 486FACEDE97DFC16045F FL Gainesville 32608-5792 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation UF Department of Emergency Medicine Gr **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Dennis T Uehara Date of Receipt Mailing Address 5092 Crofton Dr 17 06 2015 City State Zip Code Transaction ID: B84811AD1ABD68EC8DB Rockford IL 61114-5422 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Travis Ulmer Date of Receipt Mailing Address 1240 Broadview Ave 17 03 2015 City State Zip Code Transaction ID: 20150317A_42 OH Columbus 43212-3344 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 433.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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NAME OF COMMITTE	EE (In Full)			
\	gency Medicine F	Political Action	n Committee	
Full Name (Last, First	t, Middle Initial)			Date of Receipt
Mailing Address 1240) Broadview Ave			04 20 _ 2015 _
City		State Z	Zip Code	Transaction ID : F33FBCD57CC94F6589C6
Columbus			43212-3344	Amount of Each Receipt this Period
FEC ID number of co federal political comm	•	С		100.00
Name of Employer		Occupation		1
Emergency Medicine F	Physician Managemen	Emergency Physi	cian	
Receipt For:	General	Aggregate Year-t		1
Other (specify)			600.00	
Full Name (Last, First Travis Ulmer	t, Middle Initial)			Date of Receipt
Mailing Address 1240	Broadview Ave			05 19 _2015 _
City		State Z	Zip Code	Transaction ID : 20150518183743-49
Columbus			13212-3344	Amount of Each Receipt this Period
FEC ID number of co federal political comm	•	С		100.00
Name of Employer		Occupation		†
Emergency Medicine F	Physician Managemen	Emergency Physic	cian	
Receipt For:		Aggregate Year-t		1
Primary	General	.55.53ato 10at		
Other (specify)	*		600.00	
Full Name (Last, First Travis Ulmer	t, Middle Initial)			Date of Receipt
Mailing Address 1240) Broadview Ave			06 18 2015
City		State Z	Zip Code	Transaction ID : 20150619175314-145
Columbus		OH 4	13212-3344	Amount of Each Receipt this Period
FEC ID number of co federal political comm	0	С		100.00
Name of Employer		Occupation		-
	Physician Managemen	Emergency Physi	ician	1
Receipt For:	¬ •	Aggregate Year-t	to-Date ▼	
Primary Other (specify)	General		600.00	
Other (specify)	V		600.00	
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FOR LINE NUMBER: PAGE 238 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Vincent G Valente Date of Receipt Mailing Address 2220 Via Tuscany 2015 27 City State Zip Code Transaction ID: 88194D1A67AA4B839FA4 FL Winter Park 32789-1239 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Florida Emergency Physicians Kang & As **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeff Van Bendegom Date of Receipt Mailing Address 914 Winding Way 06 25 2015 City State Zip Code Transaction ID: 681D59FA5B2256971A6 Middleton WI 53562-5072 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. David E Van Ryn Date of Receipt Mailing Address 51192 Stratford Dr 29 2015 Zip Code City State Transaction ID: 44583955B3ACA42F8D1 IN Elkhart 46514-9110 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Elkhart Emergency Physicians, Inc. **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 239 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Arjun K Venkatesh Date of Receipt Mailing Address 754 Orange St 08 2015 Apt 4 City State Zip Code Transaction ID: 0A8D957CDFB0066B6F5 CT New Haven 06511-2546 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 465.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Arjun K Venkatesh Date of Receipt Mailing Address 754 Orange St 06 Apt 4 09 2015 City State Zip Code Transaction ID: 20150612192310-284 CT New Haven 06511-2546 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 465.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard J Wadas Date of Receipt Mailing Address 1003 Amy PI 29 03 2015 City State Zip Code Transaction ID: 3205919A-139E-4D72-PΑ Gibsonia 15044-8074 Amount of Each Receipt this Period FEC ID number of contributing 600.00 С federal political committee. Name of Employer Occupation **Emergency Resource Management Incorpor Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1065.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Mary Jo Wagner Mailing Address 5425 Nottingham Dr N City Saginaw FEC ID number of contributing federal political committee. Name of Employer Covenant Health Care Receipt For: Primary General Other (specify)	State Zip Code MI 48603-2821 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Bradford L Walters Mailing Address 6033 Orchard Woods Dr City W Bloomfield FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code MI 48324-3281 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1400.00	Date of Receipt 05 08 2015 Transaction ID: 5E88E347F877ABE848A Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) David Todd Walters Mailing Address 3407 Oyster Bay Ave City Davis FEC ID number of contributing federal political committee. Name of Employer Emergency Medicine Physicians Receipt For: Primary General Other (specify)	State Zip Code CA 95616-5603 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / 24 2015 Transaction ID: 2015062910844-107 Amount of Each Receipt this Period 84.60
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1584.60
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Richard C Walz III Date of Receipt Mailing Address 15240 Dunrobin Dr 05 2015 City State Zip Code Transaction ID: C2BE945D908306CE921 IN Noblesville 46062-7702 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Saint Vincent Emergency Physicians Inc **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Neil Wang Date of Receipt Mailing Address 255 N Sierra St Unit 1112 06 26 2015 City State Zip Code Transaction ID: 20150710125259-195 NV Reno 89501-1368 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nathan P Watkins Date of Receipt Mailing Address 7505 Olive Glen Ct 10 2015 Zip Code City State Transaction ID: C0160CA75F3621084BE CA Granite Bay 95746-9113 Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Name of Employer Occupation Kaiser Permanente Southern Sacramento **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Bradley Alan Watling Date of Receipt Mailing Address 109 Viewpoint Ln 2015 City State Zip Code Transaction ID: 20150317A_43 NC 28117-7558 Mooresville Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation **Emergency Physician** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 583.33 Other (specify) Full Name (Last, First, Middle Initial) B. Bradley Alan Watling Date of Receipt Mailing Address 109 Viewpoint Ln 04 20 2015 City State Zip Code Transaction ID: B287959442B846BB9662 Mooresville NC 28117-7558 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee

	rederar political committee.		
	Name of Employer Physician Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 583.33	
c	Full Name (Last, First, Middle Initial) Bradley Alan Watling Mailing Address 109 Viewpoint Ln		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City Mooresville FEC ID number of contributing	State Zip Code NC 28117-7558	Transaction ID: 20150518183743-50 Amount of Each Receipt this Period
	rederal political committee. Name of Employer Physician Receipt For: Primary General Other (specify) ▼	Occupation Emergency Physician Aggregate Year-to-Date ▼ 583.33	
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Bradley Alan Watling Date of Receipt Mailing Address 109 Viewpoint Ln 2015 City Zip Code State Transaction ID: 20150619175314-146 NC Mooresville 28117-7558 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 583.33 Other (specify) Full Name (Last, First, Middle Initial) B. Michael L Weaver Date of Receipt Mailing Address 4505 Headwood Dr Apt 1 06 12 2015 City State Zip Code Transaction ID: 0624A427C3F19DF24BC MO Kansas City 64111-3439 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Metropolitan Emergency Physicians LLC **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. L Kendall Webb Date of Receipt Mailing Address 6040 Oakbrook Ct 14 2015 State Zip Code Transaction ID: 4CF4A81572B389977193 FL Ponte Vedra Beach 32082-2052 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation University of Florida Jacksonville **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 783.34 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) L Kendall Webb Date of Receipt Mailing Address 6040 Oakbrook Ct 2015 City State Zip Code Transaction ID: 4B9D84B67BB074927A57 FL Ponte Vedra Beach 32082-2052 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Florida Jacksonville **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. L Kendall Webb Date of Receipt Mailing Address 6040 Oakbrook Ct 05 12 2015 City State Zip Code Transaction ID: 459D8F5C9F27CAB19B8E FL Ponte Vedra Beach 32082-2052 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation University of Florida Jacksonville **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) c. L Kendall Webb Date of Receipt Mailing Address 6040 Oakbrook Ct 12 2015 State Zip Code Transaction ID: 43329034F5F12B43265B FL Ponte Vedra Beach 32082-2052 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation University of Florida Jacksonville **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)		
$\Big angle$ National Emergency Medicine	e Political Action Committee	
Full Name (Last, First, Middle Initial) Daniel R Wehner		Date of Receipt
Mailing Address 355 Bliss St		Mam / Dab / Yayayay
City	Choko 7:- Co-d-	04 07 2015
City Johnstown	State Zip Code PA 15905-2755	Transaction ID: 4E87FCAFCC1744649802 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2400.00	
Full Name (Last, First, Middle Initial) 3. Daniel R Wehner		Date of Receipt
Mailing Address 355 Bliss St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	06 06 2015 Transaction ID : 1BEFCE27-C777-44AB-
Johnstown	PA 15905-2755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1200.00
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2400.00	
Full Name (Last, First, Middle Initial) 2. Jesse Adams Wells		Date of Receipt
Mailing Address 12005 Iron Mountain Rd		06 24 2015
City	State Zip Code	Transaction ID : 2015062910844-217
Redding	CA 96001-9643	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.60
Name of Employer	Occupation	-
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	284.60	
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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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Richard Preston Wendell Date of Receipt Mailing Address 735 Pitt St 04 08 2015 City Zip Code State Transaction ID: 7669E081CD16B6EC59D SC Mt Pleasant 29464-5022 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Trident Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard Preston Wendell Date of Receipt Mailing Address 735 Pitt St 05 02 2015 City State Zip Code Transaction ID: 20150508192310-61 SC Mt Pleasant 29464-5022 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Trident Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Erin McNutt Wentzien Date of Receipt Mailing Address 16634 Marchmont Dr 06 25 2015 City State Zip Code Transaction ID: 20150710125259-136 CA Los Gatos 95032-5609 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 284.60 Other (specify) 1900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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\	AME OF COMMITTEE (In Full) National Emergency Medicine P	olitical Action Committee	
The state of the s	ull Name (Last, First, Middle Initial) Steven G Werdehoff lailing Address 1233 Deborah Dr SE ity Huntsville EC ID number of contributing aderal political committee. ame of Employer luntsville Emergency Physicians eceipt For: Primary General Other (specify)	State Zip Code AL 35801-1414 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M A 2015 Transaction ID: 327F163AB00F4E768EDE Amount of Each Receipt this Period 600.00
B. E	ull Name (Last, First, Middle Initial) Brenden M Wetherton Iailing Address 3910 Clarke Pointe Ct ity Crestwood EC ID number of contributing ederal political committee. ame of Employer eam Health ecceipt For: Primary General Other (specify) ▼	State Zip Code KY 40014-7789 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M O7 2015 Transaction ID: 0F4A5D70D1AE4AF683B5 Amount of Each Receipt this Period 500.00
C. M. C. M. FI fe	ull Name (Last, First, Middle Initial) Gordon Wheeler lailing Address 6344 Old Dominion Dr ity McLean EC ID number of contributing sederal political committee. ame of Employer Physician eceipt For: Primary General Other (specify)	State Zip Code VA 22101-4117 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicine	Political Action Committee	
Full Name (Last, First, Middle Initial) Gordon Wheeler Mailing Address 6344 Old Dominion Dr City McLean FEC ID number of contributing federal political committee. Name of Employer Physician	State Zip Code VA 22101-4117 C Occupation Emergency Physician	Date of Receipt 04 12 2015 Transaction ID: 45158C6E8E952E391D19 Amount of Each Receipt this Period 83.34
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Gordon Wheeler Mailing Address 6344 Old Dominion Dr City	State Zip Code	Date of Receipt M
McLean FEC ID number of contributing federal political committee. Name of Employer Physician	VA 22101-4117 C Occupation	Amount of Each Receipt this Period 83.34
Receipt For: Primary General Other (specify) ▼	Emergency Physician Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Gordon Wheeler Mailing Address 6344 Old Dominion Dr City McLean FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For:	State Zip Code VA 22101-4117 C Occupation Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M M
Primary General Other (specify) ▼	500.04	250.02
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		200.02

FOR LINE NUMBER: PAGE 249 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Dennis C Whitehead Date of Receipt Mailing Address W9040 Peavy Falls Rd 2015 City Zip Code State Transaction ID: 1FBCDFAED16D5CB70DD Iron Mountain MI 49801-8924 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph Wiater Date of Receipt Mailing Address 110 Legault Dr 06 2015 11 City State Zip Code Transaction ID: E94EC4BF32D445648A77 NC Cary 27513-1774 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wake Emergency Physicians PA **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. David E Wilcox Date of Receipt Mailing Address 8 Aspen Dr 14 2015 City State Zip Code Transaction ID: A485451A494EC573BD9 CT S Glastonbury 06073-2938 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 665.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	MBER	:	PAGE	2	:50 OF	-	34
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zotanou cummary r ago		13		14		15		16		117

	nd Statements may not be sold or used by any person the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Emergency Medicin	e Political Action Committee	
Full Name (Last, First, Middle Initial) Dean Wilkerson Mailing Address 538 Rolling Hills Rd City Coppell FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code TX 75019-4049 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1200.00	Date of Receipt M M / 29 2015 Transaction ID: 4201CFB4770FE563D5B Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) James M Williams Mailing Address 1400 Carrollton Ave City Baltimore FEC ID number of contributing federal political committee. Name of Employer Impact Medical Services Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MD 21204-6517 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 350.02	Date of Receipt 03 04 2015 Transaction ID: 20150307 30 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) James M Williams Mailing Address 1400 Carrollton Ave City Baltimore FEC ID number of contributing federal political committee. Name of Employer Impact Medical Services Receipt For: Primary General Other (specify)	State Zip Code MD 21204-6517 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 350.02	Date of Receipt 03 12 2015 Transaction ID: 4DCC912647D544DA95A1 Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optiona	1)	1383.34
TOTAL This Period (last page this line num	ber only)	

	FOF	R LINE	NU	IMBER	PAGE 251 OF			=	340	
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for each category of the Detailed Summary Page	X	11a		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) National Emergency Medicine Political Action Committee									
Α.	Full Name (Last, First, Middle Initial) Mildred J Willy Mailing Address 5576 Hickory Ln		Date of Receipt							
	City Bay City	State Zip Code MI 48706-9722	04 25 2015 Transaction ID: 98467B3B-5CAD-44D4-							
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
	Name of Employer Timberline Emergency Physicians PC Receipt For: Primary General	Occupation Emergency Physician Aggregate Year-to-Date ▼								
	Other (specify) ▼	1200.00								
В.	Full Name (Last, First, Middle Initial) Mark E Winther Mailing Address 219 Bibik Rd		Date of Receipt							
	City	06 25 2015 Transaction ID : 20150710125259-141								
	Richfld Spgs FEC ID number of contributing federal political committee.	NY 13439-4541	Amount of Each Receipt this Period 1000.00							
	Name of Employer Bassett Healthcare	Occupation Emergency Physician								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00								
<u> </u>	Full Name (Last, First, Middle Initial) David Wirtz		Date of Receipt							
	Mailing Address 1 Highgate NE		03 17 2015							
	City Ithaca	State Zip Code NY 14850-1483	Transaction ID : 20150317A_44 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C	83.33							
	Name of Employer Emergency Medicine Physician Managemen	Occupation Emergency Physician								
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 499.98								
s	SUBTOTAL of Receipts This Page (optional)		2283.33							
Т	OTAL This Period (last page this line number	only)								

FOR LINE NUMBER: PAGE 252 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) David Wirtz Date of Receipt Mailing Address 1 Highgate NE 04 20 2015 City Zip Code State Transaction ID: E89C7A9AB7B04490BC33 NY Ithaca 14850-1483 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **B.** David Wirtz Date of Receipt Mailing Address 1 Highgate NE 05 19 2015 City State Zip Code Transaction ID: 20150518183743-51 NY 14850-1483 Ithaca Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation **Emergency Medicine Physician Managemen Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. David Wirtz Date of Receipt Mailing Address 1 Highgate NE 18 2015 City State Zip Code Transaction ID: 20150619175314-147 NY Ithaca 14850-1483 Amount of Each Receipt this Period FEC ID number of contributing 83.33 С federal political committee. Name of Employer Occupation Emergency Medicine Physician Managemen **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 499 98 Other (specify) 249.99 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	IMBER	:	PAGE	: 2	.53 OF	=	34
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Detailed Summary Page	X	11a		11b		11c		12		
,		13		14		15		16		11

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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Stanley Longjyi Wu Date of Receipt Mailing Address 2726 Bissonnet St Ste 240-104 30 2015 City State Zip Code Transaction ID: 4CB33C80-4D09-4A09-TX 77005-1319 Houston Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Name of Employer Occupation Baylor College of Medicine Emergency M **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas E Wyatt Date of Receipt Mailing Address 3925 Drew Ave S 03 12 2015 City State Zip Code Transaction ID: 46F390F1E96B9B0F79B1 Minneapolis MN 55410-1049 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Mercy Hospital Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼	500.04	
Full Name (Last, First, Middle Initial) Thomas E Wyatt Mailing Address 3925 Drew Ave S		Date of Receipt
City Minneapolis	State Zip Code MN 55410-1049	04 12 2015 Transaction ID : 4CFB9BC4FB5E9077E1C7 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Mercy Hospital Emergency Physicians	Emergency Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

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	FOF	R LINE	NU	MBER	:	PAGE	2	54 OF	340
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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 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Thomas E Wyatt Date of Receipt Mailing Address 3925 Drew Ave S 2015 City Zip Code State Transaction ID: 4B81BCAFD698163D874E MN Minneapolis 55410-1049 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Mercy Hospital Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas E Wyatt Date of Receipt Mailing Address 3925 Drew Ave S 06 12 2015 City State Zip Code Transaction ID: 4F519B9B60F3E9EEFE20 MN Minneapolis 55410-1049 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Mercy Hospital Emergency Physicians **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.04 Other (specify)

Full Name (Last, First, Middle Initial) c. Charlotte S Yeh Date of Receipt Mailing Address 345 West St 04 15 2015 City State Zip Code Transaction ID: 906C66D69F644A03B54E MA Dedham 02026-5519 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

366.68

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

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

FOR LINE NUMBER: PAGE 255 OF 340 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Liam Yore Date of Receipt Mailing Address 15350 162nd Ave NE 09 2015 City Zip Code State Transaction ID: 458D8DA050D4A714922F WA Woodinville 98072-8932 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation North Sound Emergency Medicine **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey Yosten Date of Receipt Mailing Address 1005 Kelland Dr 05 12 2015 City State Zip Code Transaction ID: 20150518182247-13 NE Norfolk 68701-9217 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wesley Zeger Date of Receipt Mailing Address 290 Skyline Dr 09 03 2015 City State Zip Code Transaction ID: 60D85A8890E84899ADAD NF Elkhorn 68022-1788 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Physician **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	2	:56 OF	340
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
,g.		13		14		15		16	□ 17

Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personanne and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Emergency Medicine F	Political Action Committee	
Full Name (Last, First, Middle Initial) A. Wesley Zeger		Date of Receipt
Mailing Address 290 Skyline Dr		04 09 2015
City	State Zip Code	7 Transaction ID : B2691DE60FCF4BC3B9CA
Elkhorn	NE 68022-1788	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	100.00	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) 3. Nestor R Zenarosa		Date of Receipt
Mailing Address 3402 Merritt Rd		M = M / D = D / Y = Y = Y
Ste 750-411STE		06 26 2015
City	State Zip Code	Transaction ID : 78890BAFE9FC9C85594
Sachse	TX 75048-4600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. Gary David Zimmer		Date of Pessint
		Date of Receipt
Mailing Address 419 Boxwood Rd		02 01 2015
City Bryn Mawr	State Zip Code PA 19010-1254	Transaction ID: 45D38D30E0E57C32F864 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	625.00
Name of Employer	Occupation	
Physician	Emergency Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1250.00	
Other (specify)	1250.00	
SUBTOTAL of Receipts This Page (optional)		1325.00
	` _	
TOTAL This Period (last page this line number	only)	

	FOR LINE NUMBER:	: PAG	E 257 OF	34
Use separate schedule(s)	check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	16	-17

	and Statements may not be sold or used by any pering the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Emergency Medici	ne Political Action Committee	
Full Name (Last, First, Middle Initial) Gary David Zimmer Mailing Address 419 Boxwood Rd City Bryn Mawr FEC ID number of contributing federal political committee. Name of Employer Physician Receipt For: Primary General Other (specify)	State Zip Code PA 19010-1254 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 1250.00	Date of Receipt 05 01 2015 Transaction ID: 4E04AEFAB08C6CAA3170 Amount of Each Receipt this Period 625.00
Full Name (Last, First, Middle Initial) Andrew R Zinkel Mailing Address 5517 Oaklawn Ave City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Regions Medical Center Receipt For: Primary General Other (specify)	State Zip Code MN 55424-1612 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.02	Date of Receipt Mark
Full Name (Last, First, Middle Initial) Andrew R Zinkel Mailing Address 5517 Oaklawn Ave City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Regions Medical Center Receipt For: Primary General Other (specify)	State Zip Code MN 55424-1612 C Occupation Emergency Physician Aggregate Year-to-Date ▼ 600.02	Date of Receipt 05 08 2015 Transaction ID: 6595B0BADD866886602 Amount of Each Receipt this Period 350.00
SUBTOTAL of Receipts This Page (option	al) >	1058.34
TOTAL This Period (last page this line nu	mber only)	

FOR LINE NUMBER: PAGE 258 OF (check only one) X 11a 11b 11c

340 Use separate schedule(s) 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) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) Michael D Zwank Date of Receipt Mailing Address 2131 Pinehurst Ave 05 2015 City Zip Code State Transaction ID: 99224D2A55D465F2A16 MN Saint Paul 55116-1318 Amount of Each Receipt this Period FEC ID number of contributing C 1200.00 federal political committee. Name of Employer Occupation Regions Medical Center **Emergency Physician** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B 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) 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) 1200.00 SUBTOTAL of Receipts This Page (optional)..... 243144.60 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 25					259 (OF 340	
ITEMIZED DISBURSEMENTS	Use separate scl		(check	-						¬	
	Detailed Summar			21b 27	22		23 28b		24 28c	25 29	26
			<u> </u>		28a						30
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NAME OF COMMITTEE (In Full)											
National Emergency Medicine Poli	tical Action Co	ommitte	е								
Full Name (Last, First, Middle Initial)											
A. JPMorgan Chase Bank NA					Date of	f Disb	ursen		V	Y	V
Mailing Address 1717 Main Street					01		30	_		2015	
3rd Floor											
City : Dallas	State Zip Co TX 75201				Trans	actio	n ID :	E6C	F8D03	8633FI	F4028
Purpose of Disbursement	75201	·									
JAN15 BANK FEES			001		Amoun	t of E	ach [Disbu	rsemei	nt this I	Period
Candidate Name			Category	y/					-	340	68
000			Type			7		-	7	340	.00
Office Sought: House Disburser Senate		General									
President	Other (specify)	derierai									
State: District:	Carlor (opcony)										
Full Name (Last, First, Middle Initial)											
B. JPMorgan Chase Bank NA					Date of	f Disb					
Mailing Address 1717 Main Street 3rd Floor					02		28	_		2015	Y
City Salas	State Zip Co				Trans	sactio	n ID :	A37	43785	948776	6ABC0
Purpose of Disbursement FEB15 BANK FEES			001	\exists	Атопр	t of E	ach F	Dichu	rcomo	nt this I	Pariod
Candidate Name				_	Amoun	t OI E	acii L	JISDU	Seme	111 11115	enou
			Category Type	y/						289	9.34
Office Sought: House Disburser	ment For:		71								
Senate	Primary G	General									
President	Other (specify) ▼										
State: District:											
Full Name (Last, First, Middle Initial)					Date o	f Dich	uroon	nont			
C. JPMorgan Chase Bank NA						ו טוטט		_			
Mailing Address 1717 Main Street					03	╽	31	_		2015	Y
3rd Floor City	State Zip Co	nde									
Dallas	TX 75201				Trans	sactio	n ID :	229I	31A26	A6EDE	5EE722
Purpose of Disbursement MAR15 BANK FEES		Г	001								
Candidate Name			001 Category	y/	Amoun	t of E	ach E	Disbu	rsemer	nt this 1	Period .32
Office Sought: House Disburser	nent For:		Туре			7		-	7		
Senate Sought.		General									
President	Other (specify)										
State: District:	· · · · · · · · · · · · · · · · · · ·										
'						-	-	-	_	-	-
SUBTOTAL of Disbursements This Page (optional)				•		,			7	991	.34
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TOTAL This Period (last page this line number only)						,			7		

SCHEDULE B (FEC Form 3X)		FOR LINE		PAGE 260 OF 340
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	00
	Detailed Summary Page	X 21b 27	22 28a	23 24 25 26 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)			23111100	
National Emergency Medicine Polit	ical Action Committ	ee		
Full Name (Last, First, Middle Initial)				
A. JPMorgan Chase Bank NA			Date of Dis	
Mailing Address 1717 Main Street			04	30 2015
3rd Floor			O-T	2010
City	State Zip Code		Transactio	on ID : 6CF133083EC6443E57D
Dallas	TX 75201		HallSacile	JII ID . 0CF 133063EC6443E37D
Purpose of Disbursement APR15 BANK FEES		001	Amount of I	Each Disbursement this Period
Candidate Name			Amount of t	Lacii Disbuisement this Fellou
		Category/ Type	1	285.15
Office Sought: House Disbursen	nent For:	71: -		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. IDMorgan Chang Bank NA			Date of Dis	hureamant
B. JPMorgan Chase Bank NA			M M /	D D / Y Y Y Y
Mailing Address 1717 Main Street 3rd Floor			05	31 2015
	State Zip Code		Transacti	ID - 0.4 D 4070D040C 44 C422C
Dallas	TX 75201		Transactio	on ID : 2AB4072D9196A1C1336
Purpose of Disbursement MAY15 BANK FEES		004	A	Tools Diskumsomsont this Devised
Candidate Name		001	Amount of t	Each Disbursement this Period
Canadate Name		Category/ Type	1	855.62
Office Sought: House Disbursen	nent For:	1,700		, ,
Senate	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Dis	huvaamant
C. JPMorgan Chase Bank NA				
Mailing Address 1717 Main Street			06 /	30 2015
3rd Floor				
,	State Zip Code		Transactio	on ID : 226F13B32D9198BFFD2
Dallas Purpose of Disbursement	TX 75201			
JUN15 BANK FEES		001	Amount of F	Each Disbursement this Period
Candidate Name		Category/	Amount of t	
		Type		1026.59
Office Sought: House Disbursen				
	Primary General			
State: District:	Other (specify) ▼			
State. District.				
SUBTOTAL of Disbursements This Page (optional)				2167.36
22212 S. 2.220100monte (mo i ago (optional)				
TOTAL This Period (last page this line number only)				3158.70

SCHEDULE B (FEC Form 3X)	Llee congrete cohodule(e)	FOR LINE		PAGE 261 OF 340
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 X 23	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
Any information copied from such Reports and State	ments may not be sold or use	ed by any perso	on for the purpose of so	Diciting contributions
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
National Emergency Medicine Pol	tical Action Committe	ee		
Full Name (Last, First, Middle Initial)				
A. Alaskans for Don Young Inc.			Date of Disbursemen	nt
			M M / D D	/
Mailing Address 2504 Fairbanks Street			06 17	_2015
City	State Zip Code			
Anchorage	AK 99503		Transaction ID : Do	61C550BC56EA28F81E
Purpose of Disbursement 2016 Primary		244		
Candidate Name		011	Amount of Each Disi	bursement this Period
Donald Edwin Young		Category/ Type		1000.00
<u> </u>	ment For: 2016	.,,,,,		,
Senate	Primary General			
President	Other (specify) ▼			
State: AK District: 01 Full Name (Last, First, Middle Initial)				
B. Alaskans for Don Young Inc.			Date of Disbursemer	nt
Alaskans for Bott Foung inc.			M = M / D = D	/
Mailing Address 2504 Fairbanks Street			06 30	2015
O't	State Zip Code			
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City Anchorage	AK 99503		Transaction ID : C	032C320DCB43EA3BD9
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SCHEDULE B (FEC Form 3X)		FOR LINE	FOR LINE NUMBER: PAGE 265 OF			
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National Emergency Medicine Poli	tical Action Commit	tee				
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Full Name (Last, First, Middle Initial)			5			
A. Ann Wagner for Congress			Date of Disburseme	ent 		
Mailing Address PO Box 50			04 09	2015		
maining / toda 666 C Box 50			04 00	2010		
City	State Zip Code		Transaction ID : C	C60E0AD2D7CD6F5D3BE		
Ballwin	MO 63022		Transaction iD . C	,00E0AD2D7GD0F3D3BE		
Purpose of Disbursement 2016 Primary		011	Amount of Each Die	sbursement this Period		
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Ann Louise Wagner		Category/ Type		1000.00		
	nent For: 2016	71	,	,		
Senate	Primary General					
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State: MO District: 02						
Full Name (Last, First, Middle Initial)			Date of Disburseme	ont.		
B. Austin Scott for Congress Inc			Man / Dan	/		
Mailing Address PO Box 2530			04 23	2015		
•	State Zip Code		Transaction ID: 4	EB246C4D38B93AF135		
Tifton Purpose of Disbursement	GA 31793					
2016 Primary		011	Amount of Each Dis	sbursement this Period		
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James Austin Scott		Type	7	1000.00		
	nent For: 2016					
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C. Benishek for Congress, Inc.			Date of Disburseme	ent		
			M M / D D	/ Y Y Y Y Y		
Mailing Address PO Box 108			01 29	2015		
City	State Zip Code					
City S Gladstone	MI 49837-0108		Transaction ID: 4	9A31C91B706BB08B00		
Purpose of Disbursement						
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Daniel J. Benishek Office Sought:	nent For: 2016	Туре				
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President	Other (specify)					
State: MI District: 01	· · · · · · · · · · · · · · · · · · ·					
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SUBTOTAL of Disbursements This Page (optional)		······		4000.00		
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SCHEDULE B (FEC Form 3X)		R LINE NUMBER: PAGE 266 OF 340				
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A. Benishek for Congress, Inc.		Date of Disbursement				
Mailing Address PO Box 108			04 23 2015			
,	State Zip Code		Transaction ID: 81D24DA01DDD8FC3E3D			
Gladstone Purpose of Disbursement	MI 49837-0108					
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Daniel J. Benishek		Туре	1000.00			
Office Sought: House Disburse	nent For: 2016 Primary General Other (specify)					
State: MI District: 01						
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B. Benishek for Congress, Inc.			Date of Disbursement			
Mailing Address PO Box 108			05 19 2015			
City Gladstone	State Zip Code MI 49837-0108		Transaction ID : CAFCF0827680EC052B7			
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Full Name (Last, First, Middle Initial) C. Benishek for Congress, Inc.			Date of Disbursement			
Mailing Address PO Box 108			05 28 2015			
City	State Zip Code		Transaction ID : 76AD3220F6642892337			
Gladstone	MI 49837-0108		Transaction is . To Abollo 10042002007			
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	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	tical Action Commit	tee				
_	Full Name (Last, First, Middle Initial)						
Α.				Date of Disbursement			
	Mailing Address PO Box 3078			05 14 2015			
	Denver	State Zip Code CO 80201		Transaction ID : E5AE7712651B11710	94		
	Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Peric	od		
	Candidate Name		Category/	1000.00	П		
	Michael F. Bennet		Type	1000.00	_		
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	State: CO District:						
В.	Full Name (Last, First, Middle Initial) Bill Flores for Congress			Date of Disbursement			
	Mailing Address PO Box 6207	04 09 2015					
	Bryan	State Zip Code TX 77805		Transaction ID : F166EB7378F3D4563	57		
	Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Peric	od		
	Candidate Name William H. Flores		Category/ Type	2500.00			
		nent For: 2016 Primary General Other (specify)					
c.	Full Name (Last, First, Middle Initial) Billy Long for Congress			Date of Disbursement			
	Mailing Address 3246 E Ridgeview St			04 09 2015			
	•	State Zip Code MO 65804-4076		Transaction ID: E89B79EC099341836	BE		
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	Mailing Address 3246 E Ridgeview St						05 14 2015			
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B.	Blue Dog Political Action Committee	е			Date of	Disbursen	nent			
	Mailing Address PO Box 83142				03	25		2015	Y	
	City S Gaithersburg Purpose of Disbursement	State Zip Code MD 20883	е		Trans	action ID :	3531101C	B9AFF <i>A</i>	\2693E	
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C.	Bluegrass Committee				Date of	Disbursen	nent			
	Mailing Address 228 S. Washington St., Ste. 115				05	14		2015	Y	
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	Alexandria	VA 22314-5	404		IIalis	action iD .	FZE43AD0	00 1 Z A 1 L	Proced	
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A. Bonamici for Congress			M M / D D	/
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Bonnie Watson Coleman		Category/ Type		1000.00
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C. Brady for Congress			Date of Disburseme	
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A. Brady for Congress					Date of	f Disburseme	_		_
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C. Castor for Congress					Date of	f Disburseme			
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NAME OF COMMITTEE (In Full)			
National Emergency Medicine Poli	tical Action Comm	ittee	
Full Name (Last, First, Middle Initial)			
A. Cathy McMorris Rodgers for Cong	ress		Date of Disbursement
Mailing Address Box 137			03 04 2015
City Spokane	State Zip Code WA 99210-0137		Transaction ID: 97E701E3E6B69E4A4D5
Purpose of Disbursement	99210-0137		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Cathy McMorris Rodgers		Type	1000.00
Office Sought: House Disburser	nent For: 2016 Primary General Other (specify) ▼	I	
State: WA District: 05			
Full Name (Last, First, Middle Initial)			
B. Charles Boustany Jr. MD for Cong	ress, Inc.		Date of Disbursement
Mailing Address PO Box 80126			04 30 2015
•	State Zip Code		Transaction ID : 9E1FC2F9A291513EEAE
Lafayette Purpose of Disbursement	LA 70598-0126		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		2500.00	
Candidate Name Charles William Boustany Jr.		Category/ Type	2500.00
Charles William Boustany Jr. Office Sought: House Senate President Disburser	nent For: 2016 Primary General Other (specify)	Type	2500.00
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03	Primary General	Type	2500.00
Charles William Boustany Jr. Office Sought: House Senate President Disburser	Primary General Other (specify) ▼	Type	Date of Disbursement
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial)	Primary General Other (specify) ▼	Type	Date of Disbursement
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126	Primary General Other (specify) ress, Inc. State Zip Code	Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City Safayette	Primary ☐ General Other (specify) ▼ ress, Inc.	Type	Date of Disbursement
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City	Primary General Other (specify) ress, Inc. State Zip Code	Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City States Senate President Senate Post Senate President Senate	Primary General Other (specify) ress, Inc. State Zip Code	Type O11	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City Lafayette Purpose of Disbursement 2016 Primary Candidate Name Charles William Boustany Jr.	Primary General Other (specify) ress, Inc. State Zip Code LA 70598-0126	Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City Lafayette Purpose of Disbursement 2016 Primary Candidate Name Charles William Boustany Jr. Office Sought: House Senate	Primary General Other (specify) ress, Inc. State Zip Code LA 70598-0126 ment For: 2016 Primary General	O11 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City Lafayette Purpose of Disbursement 2016 Primary Candidate Name Charles William Boustany Jr. Office Sought: House Senate President Disburser	Primary General Other (specify) ress, Inc. State Zip Code LA 70598-0126	O11 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City Lafayette Purpose of Disbursement 2016 Primary Candidate Name Charles William Boustany Jr. Office Sought: House Senate	Primary General Other (specify) ress, Inc. State Zip Code LA 70598-0126 ment For: 2016 Primary General	O11 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Charles William Boustany Jr. Office Sought: House Senate President State: LA District: 03 Full Name (Last, First, Middle Initial) Charles Boustany Jr. MD for Cong Mailing Address PO Box 80126 City Lafayette Purpose of Disbursement 2016 Primary Candidate Name Charles William Boustany Jr. Office Sought: House Senate President Disburser	Primary General Other (specify) ▼ ress, Inc. State Zip Code LA 70598-0126 ment For: 2016 Primary General Other (specify) ▼	O11 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

	CHEDULE B (FEC Form 3X)	Llee concrete o	NE NUMBER: PAGE 273 OF 340						
IT	EMIZED DISBURSEMENTS	Use separate s for each catego Detailed Summ	ory of the	(check only 21b 27	one) 22 28a	23 28b	24 28c	25 29	26 30b
	ly information copied from such Reports and Staten for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Action (Committe	e					
<u></u>	Full Name (Last, First, Middle Initial)								
Α.	Charlie Dent for Congress				Date of	Disburser	ment		
	Mailing Address PO Box 442				03				Y
	,		Code		Trans	action ID	: 5A39CA3	1F1FF7	5929RD
	Allentown Purpose of Disbursement	PA 181	05-0442		Truito		CAUCOAU		332322
	2016 Primary			011	Amount	of Each I	Disburseme	ent this F	Period
	Candidate Name			Category/				2500	00
	Charles W. Dent	. =		Type		-	7	2500	.00
		nent For: 2016 Primary Other (specify)	General						
	State: PA District: 15								
В.	Full Name (Last, First, Middle Initial) Charlie Dent for Congress				Date of	Disburser	ment		
	Mailing Address PO Box 442				M M	/ D 14		2015	Y
	City S Allentown	•	Code 05-0442		Trans	action ID	: 81C264E	7D9342E	3B1042
	Purpose of Disbursement 2016 Primary			011	Amount	of Each I	Disburseme	ent this F	Period
	Candidate Name Charles W. Dent		"	Category/ Type				2500	0.00
	Office Sought:	nent For: 2016 Primary Other (specify)	General	.,,,,		,	,		
_	Full Name (Last, First, Middle Initial)	Na manaitta a I			Date of	Disburser	ment		
C.	Chuck Fleischmann for Congress (Jommittee, i	nc.		M M	/ D		YY	V
	Mailing Address PO Box 11091				05	19		2015	
	City S Chattanooga	State Zip (Code 01		Trans	action ID	: B4C27CE	3723CFD	C97EF4
	Purpose of Disbursement 2016 Primary								
	Candidate Name			011 Category/	Amount	of Each I	Disburseme		
	Charles J. Fleischmann			Type				1500	.00
	Office Sought: House Disburser	nent For: 2016 Primary Other (specify)	General						
	2.2 00								_
8	UBTOTAL of Disbursements This Page (optional)			·····•	<u> </u>	-	7	6500	.00
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SCHEDULE B (FEC Form 3X)	Harana and Artificial Control of the	FOR LINE NUMBER: PAGE 274 C				
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oriny	•			
	Detailed Summary Page		22 X 23 24 28a 28b 28c	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
Any information copied from such Reports and State	ements may not be sold or a					
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
$\Big angle$ National Emergency Medicine Po	litical Action Commi	ittee				
Full Name (Last, First, Middle Initial)		-				
A. Citizens for Boyle			Date of Disbursement			
			M M / D D /	Y Y Y Y Y		
Mailing Address 499 S. Capitol St. SW			05 28	2015		
Suite 422	State 7in Code					
City Washington	State Zip Code DC 20003		Transaction ID: 751A5	A846B4356337AD		
Purpose of Disbursement						
2016 Primary		011	Amount of Each Disburse	ement this Period		
Candidate Name		Category/		1000.00		
Brendan Francis Boyle Office Sought: House Disburs	ement For: 2016	Туре		1000.00		
	Primary General					
President	Other (specify)					
State: PA District: 13						
Full Name (Last, First, Middle Initial)						
B. Citizens To Elect Rick Larsen			Date of Disbursement			
Mailing Address BO Barrage			M M / D D /	2015		
Mailing Address PO Box 326		04 23	2015			
City	State Zip Code		Transaction ID : F7A74	31130007000027		
Everett	WA 98206		Hansacuon ID : F/A/4	1 1 3 UUD / 3 UD U3 /		
Purpose of Disbursement 2016 Primary		011	Amount of Each Disburse	ament this Period		
Candidate Name			Amount of Lacif Dispulse	anent tills Pellod		
Rick Larsen		Category/ Type		1000.00		
	ement For: 2016	1 77				
	Primary General					
President Pictriet: 00	Other (specify) ▼					
State: WA District: 02						
Full Name (Last, First, Middle Initial) C. Comstock for Congress			Date of Disbursement			
Comstock for Congress				Y		
Mailing Address PO Box 831			04 16	2015		
0.						
City Mc Lean	State Zip Code VA 22101		Transaction ID : 6CCC	EB395C4469861C4		
Purpose of Disbursement	V/1 ZZ1U1					
2016 Primary		011	Amount of Each Disburse	ement this Period		
Candidate Name		Category/		1000.00		
Barbara Jean Comstock		Type		1000.00		
Office Sought: House Disburs Senate	ement For: 2016 Primary General					
President	Other (specify)					
State: VA District: 10	Capoony) \					
SUBTOTAL of Disbursements This Page (optional)				3000.00		
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TOTAL This Period (last page this line number onl	y)					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 275 OF 340
TEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(oncore of my	,	
	Detailed Summary Page			24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Polit	ical Action Comm	ittee		
Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. Comstock for Congress				
Mailing Address PO Box 831			05 28	2015
,	State Zip Code		Transaction ID: 453	4B82B1D52A9BAFCF
Mc Lean Purpose of Disbursement	VA 22101			
2016 Primary		011	Amount of Each Disbu	rsement this Period
Candidate Name		Category/		
Barbara Jean Comstock		Type		1000.00
	nent For: 2016			
	Primary General			
State: VA District: 10	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Continuing America's Strength and	Security PAC		Date of Disbursement	
			M = M / D = D /	Y I Y I Y
Mailing Address PO Box 80505			04 23	2015
Cit.	State Zin Code			
City Baton Rouge	State Zip Code LA 70898		Transaction ID: 520	1A1F72E5AE6C9140
Purpose of Disbursement				
2015 Contribution		011	Amount of Each Disbu	irsement this Period
Candidate Name	0it - DAO	Category/		5000.00
Continuing America's Strength and Office Sought: House Disbursen	nent For: 2015	Туре	7	0000.00
	Primary General			
	Other (specify) ▼			
State: District:	Contributi	on		
Full Name (Last, First, Middle Initial)				
C. Courtney for Congress			Date of Disbursement	
Mailing Address DO Day 1979			M M / D D /	2015
Mailing Address PO Box 1372			00 10	2013
City	State Zip Code		Transaction ID : 025	BEA47FE9B7E8935C2
	CT 06066		Transaction ib . 925	DEA4/FE3B/E033302
Purpose of Disbursement 2016 Primary		011		
Candidate Name			Amount of Each Disbu	irsement this Period
Joseph D. Courtney		Category/ Type		2500.00
	nent For: 2016			
	Primary General			
President	Other (specify) ▼			
State: CT District: 02				
SUBTOTAL of Disbursements This Page (optional)				8500.00
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TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Lico congrato cohodula(a)		NE NUMBER: PAGE 276 OF 34		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28 28 28 28 29 30		
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NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Action Committe	ee			
Full Name (Last, First, Middle Initial)					
A. Cramer for Congress			Date of Disbursement		
Mailing Address PO Box 396			06 10 2015		
,	State Zip Code ND 58502-0396		Transaction ID : 13127A1902DC3BAE740		
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period		
Candidate Name Kevin John Cramer		Category/ Type	1000.00		
Office Sought: House Disbursem	nent For: 2016 Primary General Other (specify)	Туре			
Full Name (Last, First, Middle Initial) B. Deb Fischer for US Senate Inc			Date of Disbursement		
Mailing Address 5555 South St			06 17 2015		
Lincoln	itate Zip Code NE 68506		Transaction ID: 6922C7DDBE499CC289		
Purpose of Disbursement 2018 Primary		011	Amount of Each Disbursement this Period		
Candidate Name Debra Fischer		Category/ Type	2500.00		
X Senate	nent For: 2018 Primary General Other (specify)				
Full Name (Last, First, Middle Initial) C. Deb Fischer for US Senate Inc			Date of Disbursement		
Mailing Address 5555 South St			06 30 2015		
,	State Zip Code NE 68506		Transaction ID : 87934F0EC25F47836A6		
Purpose of Disbursement 2018 Primary		011	Amount of Each Disbursement this Period		
Candidate Name Debra Fischer		Category/ Type	-2500.00		
X Senate	nent For: 2018 Primary General Other (specify)	,,			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			1000.00		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 277 OF 340
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	INOMBETT:
TILIMIZED DIODOROLINERIO	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26
	Dotailed Guillinary 1 age	27	28a 28b 28c 29 30b
Any information copied from such Reports and State			
or for commercial purposes, other than using the nar	ne and address of any polition	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	·		
$ \; angle$ National Emergency Medicine Poli	tical Action Commit	tee	
Full Name (Last, First, Middle Initial)		I	
A. Dedicated To Establishing National 7	eamwork PAC (DEN	T PAC)	Date of Disbursement
		,	M M / D D / Y M Y M Y
Mailing Address 610 S. Boulevard			03 19 2015
City	State Zip Code		
Tampa	FL 33606		Transaction ID: 47B35988E8EADDB5953
Purpose of Disbursement			
2015 Contribution		011	Amount of Each Disbursement this Period
Candidate Name Dedicated To Establishing National Teamw	ork PAC (DENT PAC)	Category/	5000.00
	ment For: 2015	Type	
Senate	Primary General		
President	Other (specify) ▼		
State: District:	Contribution		
Full Name (Last, First, Middle Initial)			
B. DelBene for Congress			Date of Disbursement
Mailing Address PO Box 487			03 19 2015
Mailing Address PO Box 487			03 19 2015
City	State Zip Code		Transaction ID : D782A5141D595FB5BF4
Bothell	WA 98041		Transaction in . Drozadia in 1935 Febera
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispursement this Period
Suzan Kay DelBene		Category/ Type	2000.00
	ment For: 2016	21	
Senate	Primary General		
President	Other (specify)		
State: WA District: 01			
Full Name (Last, First, Middle Initial) C. Democratic Congressional Campa	ian Committoo		Date of Disbursement
Democratic Congressional Campa	igii Committee		M M / D D / Y Y Y Y
Mailing Address 430 South Capitol Street, SE			03 04 2015
2nd Floor			
City Washington	State Zip Code DC 20003		Transaction ID : D8420A77F17783BBB2D
Purpose of Disbursement	20000		
2015 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	15000.00
Democratic Congressional Campa		Туре	13000.00
Office Sought: House Disburse Senate	ment For: 2015 Primary General		
President V	Other (specify)		
State: District:	Contribution		
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SUBTOTAL of Disbursements This Page (optional)		······	22000.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 278 OF 34		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or use ne and address of any politica	d by any perso	on for the purpose of solicit contributions fr	soliciting contributions om such committee.	
NAME OF COMMITTEE (In Full)	To data duditodo or diriy poninod				
National Emergency Medicine Poli	tical Action Committe	ee			
Full Name (Last, First, Middle Initial)					
A. Democrats United To Change and	Hope PAC (DUTCH	PAC)	Date of Disbursement O4 30	/ Y = Y = Y	
Mailing Address 499 S. Capitol Street, SW Suite 422			04 30	2015	
	State Zip Code		Transaction ID . I	- A A A O C C F O D D A C C C Z F C A	
Washington	DC 20003		Transaction ID : I	FAAA9C650DDAC6C756A	
Purpose of Disbursement 2015 Contribution		011	Amount of Each Di	sbursement this Period	
Candidate Name Democrats United To Change and Hope PA	AC (DUTCH PAC)	Category/ Type		5000.00	
Office Sought: House Disburser	nent For: 2015 Primary General Other (specify) ▼				
State: District:	Contribution				
Full Name (Last, First, Middle Initial) B. Denham for Congress			Date of Disburseme	ent	
Mailing Address 2150 River Plaza Dr., #150			05 28	2015	
Sacramento	State Zip Code CA 95833		Transaction ID : 0	C32549929D255B9988A	
Purpose of Disbursement 2016 Primary		011	Amount of Each Di	sbursement this Period	
Candidate Name Jeffrey John Denham		Category/ Type		1000.00	
	ment For: 2016	71-		,	
President	Primary General Other (specify) ▼				
State: CA District: 10 Full Name (Last, First, Middle Initial)					
C. Diane Black for Congress			Date of Disburseme		
Mailing Address PO Box 1437			03 / 19	2015	
City Gallatin	State Zip Code TN 37066-1437		Transaction ID : I	D861D7CA47C7AAA5CB <i>A</i>	
Purpose of Disbursement 2016 Primary	9,933 1.61	011	Amount of Foots Di	alama ara ara Maia Baria d	
Candidate Name			Amount of Each Di	sbursement this Period	
Diane Lynn Black		Category/ Type		2500.00	
Senate President	nent For: 2016 Primary General Other (specify)				
State: TN District: 06					
SUBTOTAL of Disbursements This Page (optional)		·····•		8500.00	
TOTAL This Period (last page this line number only)		·····•			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 279 OF 3 (check only one)				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	check only	one) 22 X 23 24 25 26			
	Detailed Guillinary 1 age	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,					
National Emergency Medicine Polit	ical Action Committe	ее				
Full Name (Last, First, Middle Initial)			Data of Dishamous			
A. Diane Black for Congress			Date of Disbursement			
Mailing Address PO Box 1437			04 30 2015			
City	state Zip Code		Transaction ID - CEAEDO27EAEDOED6092			
Gallatin	TN 37066-1437		Transaction ID : C5AFD037EAFDCFB6C82			
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Diane Lynn Black		Type	2500.00			
Senate	nent For: 2016 Primary General Other (specify)					
State: TN District: 06	outer (opeouty)					
Full Name (Last, First, Middle Initial)						
B. Dirigo PAC			Date of Disbursement			
Mailing Address PO Box 1355			04 30 2015			
City S Alexandria	State Zip Code VA 22313		Transaction ID : AB0809003B7565ADD0A			
Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursement this Period			
Candidate Name		Category/	5000.00			
Dirigo PAC		Type	5000.00			
Senate	nent For: 2015 Primary General Other (specify)					
State: District:	Contribution					
Full Name (Last, First, Middle Initial) C. Dold for Congress			Date of Disbursement			
Mailing Address PO Box 6312			06 10 2015			
City	State Zip Code					
Libertyville	IL 60048		Transaction ID: 0D88C1ED64ACC106C94			
Purpose of Disbursement 2016 Primary		011				
Candidate Name			Amount of Each Disbursement this Period			
Robert James Dold Jr.		Category/ Type	1000.00			
	nent For: 2016 Primary General					
	Other (specify)					
State: IL District: 10	<u> </u>					
SUBTOTAL of Disbursements This Page (optional)			8500.00			
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 280 OF 34				
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 🔀 23 24 25 26			
	Detailed Summary Page	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
National Emergency Medicine Polit	ical Action Committe	ee				
Full Name (Last, First, Middle Initial)			Data of Dishumannant			
A. Donald Norcross for Congress			Date of Disbursement			
Mailing Address PO Box 160			04 23 2015			
City	State Zip Code		Transaction ID : F6DD867B8EC014D37EE			
Collingswood	NJ 08108		Transaction ID . 1 0DD007 B0EC014D37EE			
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Donald W. Norcross		Type	1000.00			
	nent For: 2016 Primary General Other (specify)					
State: NJ District: 01						
Full Name (Last, First, Middle Initial)						
B. Dr Brian Babin for Congress			Date of Disbursement			
Mailing Address PO Box 159			04 16 2015			
City S Woodville	State Zip Code TX 75979		Transaction ID : 461B56F371E6203ED4E			
Purpose of Disbursement 2016 Primary		044	Assessment of Early Dichessess and this Boston			
Candidate Name		011	Amount of Each Disbursement this Period			
Brian Babin		Category/ Type	1000.00			
Office Sought: House Disbursen	nent For: 2016 Primary General Other (specify)	71-				
Full Name (Last, First, Middle Initial)						
C. Dr Brian Babin for Congress			Date of Disbursement			
Mailing Address PO Box 159			05 14 2015			
,	State Zip Code		Transaction ID : BDC8639CA57B5D9CA41			
Woodville Purpose of Disbursement	TX 75979					
2016 Primary		011	Amount of Each Disbursement this Period			
Candidate Name		Category/	2500.00			
Brian Babin Office Sought:	nent For: 2016	Туре	2500.00			
	Primary General Other (specify) ▼					
State: TX District: 36	·					
SUBTOTAL of Disbursements This Page (optional)		·····	4500.00			
TOTAL This Period (last page this line number only)						

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 281 OF 3				
IT	EMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 🗙 23 24 25 26			
		Detailed Summary Page	27	28a 28b 28c 29 30b			
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam						
\	NAME OF COMMITTEE (In Full)	e and address of any poillic	ai committee to	Solicit contributions from such committee.			
\rangle	National Emergency Medicine Polit	ical Action Committ	ee				
_	Full Name (Last, First, Middle Initial)						
Α.	Dr. Raul Ruiz for Congress			Date of Disbursement			
	Mailing Address PO Box 3433			01 29 2015			
	,	State Zip Code CA 92261		Transaction ID: 84DD6C6AD6BE5F332A5			
	Palm Desert Purpose of Disbursement	CA 92261					
	2016 Primary		011	Amount of Each Disbursement this Period			
	Candidate Name Raul Ruiz		Category/ Type	5000.00			
	Senate	nent For: 2016 Primary General Other (specify)					
	State: CA District: 36						
R	Full Name (Last, First, Middle Initial)			Date of Disbursement			
٥.	DSCC			M M / D D / Y Y Y Y			
	Mailing Address 120 Maryland Ave NE			04 23 2015			
	,	State Zip Code DC 20002		Transaction ID : 941A5D45804D95C5E0E			
	Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursement this Period			
	Candidate Name		Category/				
	DSCC		Type	15000.00			
	Senate	nent For: 2015 Primary General Other (specify) Contribution					
	Full Name (Last, First, Middle Initial)	Contribution					
C.	Dutch Ruppersberger for Congress	Committee		Date of Disbursement			
	Mailing Address PO Box 231			03 04 2015			
	•	State Zip Code		Transaction ID: 49EA2EE848261DDDE8F			
	Lutherville Purpose of Disbursement	MD 21094					
	2016 Primary		011	Amount of Each Disbursement this Period			
	Candidate Name		Category/	2500.00			
	C.A. Dutch Ruppersberger Office Sought:	nent For: 2016	Туре				
	Senate	Primary General Other (specify)					
	State: MD District: 02						
s	SUBTOTAL of Disbursements This Page (optional)		······	22500.00			
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 28				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orlin)	check only one)			
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b		
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NAME OF COMMITTEE (In Full)						
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Full Name (Last, First, Middle Initial) A. Dutch Ruppersberger for Congress	Committee		Date of Disburseme	nt		
Dutch Nuppersberger for Congress	Committee		M M / D D	/		
Mailing Address PO Box 231			04 30	2015		
O'4.	Make 7th Code					
•	State Zip Code MD 21094		Transaction ID : E	42FFBF9BBB80F6BFFA		
Purpose of Disbursement	2.00.					
2016 Primary		011	Amount of Each Dis	bursement this Period		
Candidate Name		Category/		2500.00		
C.A. Dutch Ruppersberger Office Sought:	ant Form 2040	Туре		2000.00		
	nent For: 2016 Primary General					
	Other (specify) ▼					
State: MD District: 02						
Full Name (Last, First, Middle Initial)						
B. Eddie Bernice Johnson for Congres	SS		Date of Disburseme	nt		
Mailing Address 3102 Maple Avenue, Suite 605			05 28	2015		
Mailing Address SToz Maple Avenue, Suite 605			00 20	2010		
,	itate Zip Code		Transaction ID · A	.C58F65FBF3D437C5A5		
24.145	TX 75201		Transaction 15 . A	10001 001 01 00401 0040		
Purpose of Disbursement 2016 Primary		011	Amount of Fach Dis	bursement this Period		
Candidate Name		Category/	7 III. 0 III. 0 II. 0 II			
Eddie Bernice Johnson		Type		1500.00		
	nent For: 2016					
	Primary General					
State: TX District: 30	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C. Elect Blake Farenthold Committee			Date of Disburseme	nt		
			M M / D D	/ Y = Y = Y = Y		
Mailing Address PO Box 3369			04 09	2015		
City	state Zip Code					
Corpus Christi	TX 78463-3369		Transaction ID: 9	2E3539A6B5CEE1E1E3		
Purpose of Disbursement 2016 Primary						
Candidate Name		011	Amount of Each Dis	bursement this Period		
R. Blake Farenthold		Category/ Type		1000.00		
	nent For: 2016	Турс				
Senate	Primary General					
	Other (specify) ▼					
State: TX District: 27						
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A. Elise for Congress			Date of Disbursement
Mailing Address PO Box 500			05 14 2015
City	State Zip Code		Transaction ID : 442DA3A3C46744323D
Glens Falls Purpose of Disbursement	NY 12801		Transaction 15 : 4425A0A00401440205
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Elise M. Stefanik		Type	1000.00
Office Sought: House Disburs	ement For: 2016 Primary General Other (specify) ▼		
State: NY District: 21			
Full Name (Last, First, Middle Initial)			Data of Dishuranana
B. Elise for Congress			Date of Disbursement
Mailing Address PO Box 500			05 28 2015
City Glens Falls Purpose of Disbursement	State Zip Code NY 12801		Transaction ID : 1BAC0B7FD63E0855A
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Elise M. Stefanik		Type	1000.00
	ement For: 2016 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Elise for Congress			Date of Disbursement
Mailing Address PO Box 500			06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Glens Falls	State Zip Code NY 12801		Transaction ID : 273D15CF9513B1385B
Purpose of Disbursement	.2001		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Elise M. Stefanik Office Sought:	sement For: 2016	Туре	7
Senate President State: NY District: 21	Primary General Other (specify) ▼		
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Α.	Fattah for Congress					Date of	f Disburs		YYY	V
	Mailing Address PO Box 30743					05		28	2015	
	,	State	Zip Code			Trans	action ID	: FDA9DI	FA80976	529476B
	Philadelphia Purpose of Disbursement	PA	19104	_						
	2016 Primary			(011	Amoun	t of Each	Disburser	ment this	Period
	Chake Fottoh Sr				egory/				100	0.00
	Chaka Fattah Sr. Office Sought: House Disbursen	nent For: 2	<u> </u> 016	I	уре		7	,		
		Primary	General							
		Other (spec	ify) ▼							
_	State: PA District: 02 Full Name (Last, First, Middle Initial)									
В.	Fleming for Congress					Date of	f Disburs	ement		
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	Mailing Address PO Box 1236					06		25	2015	
	Minden	State LA	Zip Code 71058-1236			Trans	saction II): D8A0F3	34178BAI	EE4AE35
	Purpose of Disbursement 2016 Primary				011	Amoun	t of Each	Disburser	nent this	Period
	Candidate Name			Cat	egory/				050	
	John Calvin Fleming Jr.				ype		7	,	250	0.00
	Senate	nent For: 2 Primary Other (spec	General							
_	Full Name (Last, First, Middle Initial)									
C.	Friends of Chris Murphy					Date of	f Disburs	ement		
	Mailing Address PO Box 127					03	/ D	9 / Y	2015	Y
	,	State CT	Zip Code 06410			Trans	saction IE) : 0E0A51	969AC8E	000015A
	Purpose of Disbursement				-					
	2018 Primary Candidate Name			C	011	Amoun	t of Each	Disburser	ment this	Period
	Christopher Scott Murphy				egory/ ype				250	0.00
	Office Sought: House Disbursen Senate	nent For: 20 Primary Other (spec	General	<u> </u>	ypo					
	State: CT District:									
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SCHEDULE B (FEC Form 3X)	Harana and a sala adada (a)	FOR LINE	NUMBER:	PAGE 285 OF 340
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orling	*	7 🗆
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Pol	itical Action Commit	tee		
Full Name (Last, First, Middle Initial)			Date of Disburseme	unt
A. Friends of Dave Joyce				
Mailing Address 320 Kenarden Drive			03 19	2015
City	State Zip Code OH 44143-3710		Transaction ID : A	7AA18F3F88B8E1CB8A
Cleveland Purpose of Disbursement	OH 44143-3710			
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		4000.00
David Patrick Joyce		Type		1000.00
	ement For: 2016			
Senate President	Primary General Other (specify) ▼			
State: OH District: 14	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. Friends of Dave Joyce			Date of Disburseme	ent
			M = M / D = D	/
Mailing Address 320 Kenarden Drive			04 09	2015
City	State Zip Code			
Cleveland	OH 44143-3710		Transaction ID: 5	8C955A8BC54E46779E
Purpose of Disbursement 2016 Primary				
Candidate Name		011	Amount of Each Dis	sbursement this Period
David Patrick Joyce		Category/ Type		2000.00
	ement For: 2016	туре	,	
	Primary General			
President	Other (specify) ▼			
State: OH District: 14				
Full Name (Last, First, Middle Initial)			Data of Diahumaana	4
C. Friends of Dennis Ross			Date of Disburseme	
Mailing Address Post Office Box			04 09	2015
City	State Zip Code		Transaction ID: 4	20D4DDFF7519D7CA9F
Lakeland Purpose of Disbursement	FL 33807			
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/	7	
Dennis Alan Ross		Type		1000.00
	ement For: 2016			
Senate President	Primary General Other (specify)			
State: FL District: 15	□ Strict (openity) ▼			
SUBTOTAL of Disbursements This Page (optional).		·····		4000.00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE		PAGE 286 OF 340
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21h	one) 22 X 23 28a 28b	24 25 26 28c 29 30
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Full Name (Last, First, Middle Initial)				
A. Friends of Elizabeth Esty			Date of Disburseme	
Mailing Address PO Box 61			06 25	2015
•	State Zip Code		Transaction ID : F	OA790676C3C43B4FE0
Cheshire Purpose of Disbursement	CT 06410		Transaction is . I	0A70007000040B41 E0
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1000.00
Elizabeth H. Esty		Type		1000.00
	ment For: 2016 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Friends of Erik Paulsen			Date of Disburseme	ent
Mailing Address PO Box 44369 250 Prairie Center Drive			06 25	2015
City S Eden Prairie	State Zip Code MN 55344		Transaction ID : 0	E215A6C70F10EA0BA
Purpose of Disbursement 2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		4000.00
Erik Paulsen		Туре		4000.00
	nent For: 2016 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C. Friends of Jim Clyburn			Date of Disburseme	
Mailing Address Post Office Box 12567			06 / 25	2015
Columbia	State Zip Code SC 29211		Transaction ID: 9	99085784919F16D6FF
Purpose of Disbursement 2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/	, or Edon Die	
James E. Clyburn		Type		1500.00
	nent For: 2016 Primary General Other (specify)			
ciato. 30 District. 06				
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 287 OF 3	340
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NAME OF COMMITTEE (In Full)	ic and address of any point	our committee to	Solicit Contributions from Such Committee.	
National Emergency Medicine Political	rical Action Committ	-00		
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Full Name (Last, First, Middle Initial)				
A. Friends of Joe Heck Congress			Date of Disbursement	
Mailing Address DO Day 750444			M M / D D / Y Y Y Y	
Mailing Address PO Box 750114			03 04 2015	
City	State Zip Code		T ID 500147054770455004	
Las Vegas	NV 89136		Transaction ID: 526A479F17781FE9D1	18
Purpose of Disbursement 2016 Primary		044	Assessed of Foods Biological Main Books	a.
Candidate Name		011	Amount of Each Disbursement this Period	a
Joseph John Heck Jr.		Category/ Type	2500.00	
	nent For: 2016	Турс		
	Primary General			
President	Other (specify) ▼			
State: NV District: 03				
Full Name (Last, First, Middle Initial)			D . (D)	
B. Friends of Joe Heck Congress			Date of Disbursement	
Mailing Address PO Box 750114			06 10 2015	
TO BOX 100114				
,	State Zip Code		Transaction ID : 8E47C353D3A8BF5AE	E30
Las Vegas Purpose of Disbursement	NV 89136			
2016 Primary		011	Amount of Each Disbursement this Period	d
Candidate Name		Category/		
Joseph John Heck Jr.		Type	2500.00	
	nent For: 2016			
	Primary General			
State: NV District: 03	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				_
C. Friends of Joe Heck Congress			Date of Disbursement	
Therias of ode fleck congress			M M / D D / Y Y Y	
Mailing Address PO Box 750114			06 10 2015	
0::				
City Las Vegas	State Zip Code NV 89136		Transaction ID: 0F67D2F2A2E302FB8	D1
Purpose of Disbursement	00100			
2016 General		011	Amount of Each Disbursement this Period	d
Candidate Name		Category/	5000 00	7
Joseph John Heck Jr.		Type	5000.00	
Office Sought: House Disburser	nent For: 2016 Primary			
President	Other (specify)			
State: NV District: 03	(-1:) / ▼			
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NAME OF COMMITTEE (In Full)					
National Emergency Medicine Po	litical Action Commit	tee			
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Full Name (Last, First, Middle Initial)			Date of Disburseme	unt	
A. Friends of Joe Pitts			Man / DDD / YYYY		
Mailing Address PO Box 775			03 04 2015		
City	State Zip Code		Transaction ID : F	81BFCAC7CD788416CE	
Unionville Purpose of Disbursement	PA 19375				
2016 Primary		011	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/			
Joseph Russell Pitts		Type		2500.00	
	ement For: 2016				
Senate President	Primary General Other (specify) ▼				
State: PA District: 16	Other (specify)				
Full Name (Last, First, Middle Initial)					
B. Friends of John Boehner			Date of Disburseme	ent	
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Mailing Address 7908 Cincinnati Dayton Road			01 29	2015	
Suite I City	State Zip Code				
West Chester	OH 45069-6628		Transaction ID: 8	6607934EABFC694AA3	
Purpose of Disbursement					
2016 Primary		011	Amount of Each Dis	sbursement this Period	
Candidate Name John Andrew Boehner Catego Type				5000.00	
	ement For: 2016	Туре	,	3	
	Primary General				
President	Other (specify) ▼				
State: OH District: 08	_				
Full Name (Last, First, Middle Initial)			Data of Did	-1	
C. Friends of John Boehner			Date of Disburseme		
Mailing Address 7908 Cincinnati Dayton Road			04 16	2015	
Suite I					
City	State Zip Code		Transaction ID: 5	CF7239166E7300E4D8	
West Chester Purpose of Disbursement	OH 45069-6628				
2016 General		011	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/	Amount of Each Dis		
John Andrew Boehner		Type		5000.00	
	ement For: 2016				
Senate President	Primary General				
State: OH District: 08	Other (specify) ▼				
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		340
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NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	tical Action Committ	taa		
	iloai 7 totion Commit			
Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. Friends of Kelly Ayotte Inc			Date of Dispulsement	_
Mailing Address PO Box 937			03 04 2015	
City	State Zip Code		T	
Manchester	NH 03105-0937		Transaction ID : ACC7B3A790C3796	3/A6F
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/	Table 1 Capit Disparcement the 1 c	1100
Kelly Ann Ayotte		Type	1000.0	0
	nent For: 2016			
Senate President	Primary General Other (specify) ▼			
State: NH District:	Canon (openal)			
Full Name (Last, First, Middle Initial)				
B. Friends of Michelle			Date of Disbursement	
Mailing Address PO Box 25422			04 23 2015	7
			2010	
City S Albuquerque	State Zip Code NM 87125		Transaction ID : B81245EC1BCBB1	357AA
Purpose of Disbursement	07 123			
2016 Primary		011	Amount of Each Disbursement this Pe	riod
Candidate Name		Category/	1000.0)0
Michelle Lujan Grisham Office Sought:	nent For: 2016	Туре	, , , , ,	
	Primary General			
President	Other (specify) ▼			
State: NM District: 01				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. Friends of Rosa DeLauro			M M / D D / Y Y Y Y	-
Mailing Address 129 Church St, Ste 818			05 14 2015	
City	State Zip Code			
New Haven	CT 06510		Transaction ID: 4527F05DD7BAA10)CBA0
Purpose of Disbursement 2016 Convention Election		011		
Candidate Name			Amount of Each Disbursement this Pe	riod
Rosa L. DeLauro		Category/ Type	1000.0	0
	nent For: 2016		,	
Senate President	Other (specify) —			
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	ncy Medicine Polit	ical Acti	ion Committ	ee						
Full Name (Last, First, M										
A. Friends of Roy Bl						Date of	Disburser		YY	Y
Mailing Address PO Box	10178					03	04		2015	
City		State	Zip Code			Trans	action ID :	0904E78	4FDF50i	E88545
Columbia Purpose of Disbursement		МО	65205-4002							
2016 General				011		Amount	of Each [Disbursem	ent this	Period
Candidate Name				Catego	ry/				2500	0.00
Roy Dean Blunt				Туре		_	7	7	2300	3.00
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State: MO District	:		•							
Full Name (Last, First, Mi										
B. Friends of Roy B	unt					Date of	Disburser		YYY	V
Mailing Address PO Box	10178					03	26		2015	
City Columbia		State MO	Zip Code 65205-4002			Trans	action ID	: A1B93A	E629C6F	326F05
Purpose of Disbursement 2016 General				011		Amount	of Each [Disbursem	ent this	Period
Candidate Name				Catego	n/	-	0. 200			
Roy Dean Blunt				Type					2500	0.00
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Full Name (Last, First, Mi										
C. Friends of Schum						Date of	Disburser		YYY	V
Mailing Address 192 Lexi	ngton Avenue Suite 1001					03	04		2015	
City	S	State	Zip Code			Tranc	action ID	EC7EC00	2445000	D 4 7222
New York		NY	10016			IIalis	action ib	3073000	1143030	DA1332
Purpose of Disbursement 2016 Primary				011		Amount	of Each [Disbursem	ent this	Period
Candidate Name				Catego	ry/				4004	2.00
Charles E. Schur				Туре				7	1000	0.00
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\setminus	NAME OF COMMITTEE (In Full)								
	National Emergency Medicine Polit	tical Act	tion Committe	ee					
	Full Name (Last, First, Middle Initial)								
Α.	Friends of Schumer				Date of	Disbursem			
	Mailing Address 192 Lexington Avenue Suite 1001				03	25	/ Y	2015	Y
	City	State	Zip Code						
	New York	NY	10016		Transa	action ID : (02E878A	7AB023A	75C46
	Purpose of Disbursement 2016 Primary			011	Amount	of Each Di	ehuream	ant thic E	Period
	Candidate Name			Category/	Amount	Of Lacif Di	Spuiseiii		enou
	Charles E. Schumer			Type			,	1500	.00
		nent For:							
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	State: NY District:	Cc. (ope	, s.i., , ,						
	Full Name (Last, First, Middle Initial)								
В.	Friends of Scott Desjarlais				Date of	Disbursem	ent		
	Mailing Address PO Box 90133				03	25	/ Y	2015	Y
								20,0	
	,	State	Zip Code		Transa	action ID :	7640B2A	DBAEBD	CD726A
	Nashvilla	IN	377110						
	Purpose of Disbursement	TN	37209						
	Purpose of Disbursement 2016 Primary	IN	37209	011	Amount	of Each Di	sbursem	ent this F	eriod
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Po	litical Action Comm	ittee		
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Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. Gallego for Arizona				
Mailing Address PO Box 1710			06 10	2015
City	State Zip Code		Transaction ID : C70	C28EEDFEB58AE1CD0
Phoenix Purpose of Disbursement	AZ 85001			
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Ruben M. Gallego		Type		1000.00
	ement For: 2016			
	Primary General			
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B. Garamendi for Congress			Date of Disbursement	
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Mailing Address 1050 17th St NW Ste 590			06 25	2015
City	State Zip Code		Transaction ID · 384	1543F0441C79DE990
Washington	DC 20036		Transaction is . co-	10101011010100
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John Raymond Garamendi		Category/ Type		1000.00
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c. Gene Green Congressional Camp	naian		Date of Disbursement	
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Mailing Address PO Box 16128			05 19	2015
City	State Zip Code			
City Houston	TX 77222		Transaction ID: 390	C3C08942A38C386B1
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Senate	Primary General			
President	Other (specify)			
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	Mailing Address PO Box 97187					06		1 7	201		
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	State: NC District: 13	Other (spe	ecify) 🔻								
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В.	Graham for Congress					Date of	Disburs	ement			
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,			
National Emergency Medicine Poli	tical Action Commit	tee		
Full Name (Last, First, Middle Initial)			5	
A. Graves for Congress			Date of Disburseme	nt
Mailing Address 2345 Grand Boulevard			06 10	2015
Suite 2400			10	2010
City	State Zip Code		Transaction ID . D	438661E595ABD3C584
Kansas City	MO 64108-2642		Transaction iD . D	43000 IE393ABD3C304
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Samuel Bruce Graves Jr.		Category/ Type		2000.00
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B. Gregg Harper for Congress			M M / D D	/ Y Y Y Y
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Gregory Harper		Type	,	2500.00
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C. Guthrie for Congress			Date of Disburseme	nt
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Mailing Address PO Box 9639			05 14	2015
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Bowling Green	KY 42102-9639		Transaction ID: 8	121F1B718A9A60BC45
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S. Brett Guthrie Office Sought: House Disburse	ment For: 2016	Туре	,	2000.00
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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 contribution or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such comm NAME OF COMMITTEE (In Full) National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. Hatch Electron Committee Inc Mailing Address PO Box 3986 City Washington Dri Grant Hatch Office Sought: Full Name (Last, First, Middle Initial) Healthcare Freedom Fund Mailing Address PO Box 2485 City Senate President Full Name (Last, First, Middle Initial) B. Healthcare Freedom Fund Mailing Address PO Box 2485 City Springfield Office Sought: Full Name (Last, First, Middle Initial) Senate President Senate President Senate Primary Senate Prima	ITEMIZED DISBURSEMENTS		21b	22 🗙 23		
National Emergency Medicine Political Action Committee Full Name (Last, First, Middle Initial) A. Hatch Election Committee Inc Mailing Address PO Box 3986 City State Zip Code Washington DC 20027 Purpose of Disbursement 2015 Permany Candidate Name Orrin Grant Hatch Office Sought: House President State: UT District: Full Name (Last, First, Middle Initial) B. Healthcare Freedom Fund Mailing Address PO Box 2485 City State Zip Code YA 22152 Purpose of Disbursement United Initial) B. Healthcare Freedom Fund Office Sought: House Disbursement For: 2015 Senate President State: UT Office Sought: House Disbursement For: 2015 Senate President State: Disbursement United State Sta			sed by any perso	on for the purpose	e of soliciting contributions	
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Orrin Grant Hatch Orrin Grant Hatch Office Sought: House Senate President State: UT District: Full Name (Last, First, Middle Initial) B. Healthcare Freedom Fund Mailing Address PO Box 2485 City Springfield VA 22152 Purpose of Disbursement 2015 Contribution Candidate Name Healthcare Freedom Fund Office Sought: House President President State: District: Full Name (Last, First, Middle Initial) Candidate Name President President President State: District: Full Name (Last, First, Middle Initial) Chellerhighwater PAC Mailing Address PO Box 370672 City State Zip Code VA 22152 Primary General President Primary General President President NV 89137 Purpose of Disbursement 2015 Contribution Candidate Name Hellerhighwater PAC Mailing Address PO Box 370672 City State Zip Code NV 89137 Purpose of Disbursement 2015 Contribution Candidate Name Hellerhighwater PAC Office Sought: House Disbursement For: 2015 Senate Primary General President NV 89137 Transaction ID : 68411FFDFC43 Amount of Each Disbursement this Category/ Type 256 Transaction ID : 68411FFDFC43 Amount of Each Disbursement this Primary General President NV 89137 Transaction ID : 68411FFDFC43 Amount of Each Disbursement this Category/ Type 256 Transaction ID : 68411FFDFC43 Amount of Each Disbursement this Primary General President NV 89137 Transaction ID : 68411FFDFC43 Amount of Each Disbursement this Category/ Type 256	Purpose of Disbursement	20021	011	Amount of Fac	oh Dichurcament this Pariod	
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Healthcare Freedom Fund Office Sought: House Senate Primary General Date of Disbursement Ct. Hellerhighwater PAC City State Zip Code NV 89137 Purpose of Disbursement 2015 Contribution Candidate Name Hellerhighwater PAC Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: Contribution	·		011	Amount of Eac	ch Disbursement this Period	
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City State Zip Code Las Vegas NV 89137 Purpose of Disbursement 2015 Contribution Candidate Name Hellerhighwater PAC Office Sought: House President President President State: District: Contribution Disbursement For: 2015 Contribution O11 29 2015 Transaction ID: 6B411FFDFC43 Amount of Each Disbursement this Category/ Type 250 Other (specify) ▼ State: Contribution	,			Date of Disbur	rsement	
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Purpose of Disbursement 2015 Contribution Candidate Name Hellerhighwater PAC Office Sought: House Senate Primary General President State: District: Contribution Amount of Each Disbursement this Category/ Type 250 Contribution				Transaction	ID : 6B411FFDFC437CAA6B2	
Candidate Name Hellerhighwater PAC Office Sought: House Senate President President State: District: Category/ Type Category/ Type Category/ Type Contribution			011	Amount of Fac	ch Dishursement this Period	
Office Sought: House Disbursement For: 2015 Senate Primary General President Other (specify) Contribution				Amount of Eac	2500.00	
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 🔀 23	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
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NAME OF COMMITTEE (In Full)	tigal Agtion Committ	••		
National Emergency Medicine Poli	lical Action Commit	ee		
Full Name (Last, First, Middle Initial)			D : (B: I	
A. Hellerhighwater PAC			Date of Disbursemer	
Mailing Address PO Box 370672			03 19	2015
City	State Zip Code			
Las Vegas	NV 89137		Transaction ID : Al	D5F4EB627327452E3E
Purpose of Disbursement 2015 Contribution		011	Amount of Each Disk	oursement this Period
Candidate Name		Category/		2500.00
Hellerhighwater PAC Office Sought: House Disburser	nent For: 2015	Туре		2300.00
Senate Disburser	Primary General			
President	Other (specify) ▼			
State: District:	Contribution			
Full Name (Last, First, Middle Initial)			D . (D:)	
B. Himes for Congress			Date of Disbursemer	
Mailing Address 857 Post Road, #312			05 28	2015
Fairfield	State Zip Code CT 06824		Transaction ID : 9F	F1D308C54311043C54
Purpose of Disbursement 2016 Primary		011	Amount of Each Dish	oursement this Period
Candidate Name		Category/		
James Andrew Himes		Type		1500.00
	nent For: 2016			
Senate President	Primary General Other (specify) ▼			
State: CT District: 04	Caron (opcomy)			
Full Name (Last, First, Middle Initial)				
C. Holding Onto Oregon's Priorities			Date of Disbursemer	nt
Mailing Address PO Box 3314			04 16	2015
O.	7. 0.4			
City S Portland	State Zip Code OR 97208		Transaction ID: 77	95910DAB4156C37BE
Purpose of Disbursement 2015 Contribution				
Candidate Name		011	Amount of Each Disk	oursement this Period
Holding Onto Oregon's Priorities		Category/ Type		5000.00
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President	Other (specify) ▼			
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SCHEDULE B (FEC Form 3		FOR LINE	NUMBER:	PAGE 297 OF 340
ITEMIZED DISBURSEMENTS	Use separate sched for each category of	ule(s) (check onl	ly <u>one)</u>	
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		27	28a 28b	28c 29 30b
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NAME OF COMMITTEE (In Full)				
National Emergency Medici	ne Political Action Com	nmittee		
Full Name (Last, First, Middle Initial)			D . (D)	
A. IMPACT			Date of Disburseme	
Mailing Address 192 Lexington Ave. Suite 1001			06 10	2015
City	State Zip Code		Transaction ID . 0	4EA2E40496D31CEB69
New York	NY 10016		Transaction ib . 9	4EAZE40490D31CEB09
Purpose of Disbursement 2015 Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2222.22
IMPACT		Туре		2000.00
Office Sought: House	Disbursement For: 2015			
Senate President	Primary Gene	eral		
State: District:	Other (specify) ▼ Contrib	oution		
Full Name (Last, First, Middle Initial)				
B. IMPACT			Date of Disburseme	ent
11VII 7(01			M M / D D	/
Mailing Address 192 Lexington Ave. Suite 1001			06 25	2015
City New York	State Zip Code NY 10016		Transaction ID : 5	09AD05EDFF2EF15D60
Purpose of Disbursement	10010		-	
2015 Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		3000.00
IMPACT		Type		3000.00
Office Sought: House	Disbursement For: 2015			
Senate President	Primary Gene	eral		
State: District:	Other (specify) ▼ Contrib	oution		
Full Name (Last, First, Middle Initial)				
C. Jackie Speier for Congress			Date of Disburseme	ent
			M M / D D	/
Mailing Address PO Box 112			04 09	2015
City	State Zip Code			
Burlingame	CA 94011		Transaction ID : C	9246189EA55E37AE6D
Purpose of Disbursement			-	
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1000.00
K. Jacqueline Speier Office Sought: House	Disbursement For: 2016	Туре		7
Senate	Primary Gene	eral		
President	Other (specify)	orai		
State: CA District: 14				
SUBTOTAL of Disbursements This Page	(optional)	·····	7	6000.00
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SCHEDULE B (FEC Form 3X)	Lice concrete cohodule/s)		R LINE NUMBER: PAGE 298		
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NAME OF COMMITTEE (In Full)	ine and address of any point	ai committee to	Solicit Continbutions from Such C	committee.	
National Emergency Medicine Po	itical Action Committ	ee			
Full Name (Last, First, Middle Initial)					
A. Jason Smith for Congress			Date of Disbursement		
Mailing Address PO Box 1324				2015	
City	State Zip Code		Transaction ID - F2C24A0F	CDOCCOOFFAF	
Cape Girardeau Purpose of Disbursement	MO 63702-1324		Transaction ID : F3C24A0F	CDUCZZUSSAS	
2016 Primary		011	Amount of Each Disbursemer	nt this Period	
Candidate Name		Category/		1000.00	
Jason Thomas Smith		Type		1000.00	
Office Sought: House Disburse Senate President	ement For: 2016 Primary General Other (specify)				
State: MO District: 08					
Full Name (Last, First, Middle Initial)			5 . (5)		
B. Jeff Duncan for Congress			Date of Disbursement		
Mailing Address PO Box 845				2015	
City Laurens	State Zip Code SC 29360		Transaction ID : BB01F3A0	CD2D493111CD	
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursemer	nt this Period	
Candidate Name		Category/		2500.00	
Jeffrey D. Duncan		Type	7	2500.00	
	ement For: 2016 Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. Jenkins for Congress			Date of Disbursement		
Mailing Address PO Box 727				2015	
City	State Zip Code		Transaction ID : ABDA6CE	8C69DDDD5D1	
Huntington Purpose of Disbursement	WV 25711				
2016 Primary		011	Amount of Each Disbursemer	nt this Period	
Candidate Name		Category/	THINGS OF EACH PRODUCTION		
Evan H. Jenkins		Type		1000.00	
Office Sought: House Disburse Senate President State: WV District: 03	ement For: 2016 Primary General Other (specify)				
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		4500.00	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 299 O		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
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NAME OF COMMITTEE (In Full)	V 1				
National Emergency Medicine Po	litical Action Committe	ee			
Full Name (Last, First, Middle Initial)			5		
A. Jenkins for Congress			Date of Disburseme	nt	
Mailing Address PO Box 727			06 25	2015	
City	State Zip Code		Transaction ID : 2	4B54F962A28236EFD0	
Huntington Purpose of Disbursement	WV 25711				
2016 Primary		011	Amount of Each Dis	bursement this Period	
Candidate Name		Category/		1000.00	
Evan H. Jenkins		Type		1000.00	
Office Sought: House Disburs Senate President	ement For: 2016 Primary General Other (specify)				
State: WV District: 03					
Full Name (Last, First, Middle Initial)			Data of Dialousana		
B. Jenkins for Congress			Date of Disburseme		
Mailing Address PO Box 727			06 30	2015	
City Huntington	State Zip Code WV 25711		Transaction ID : E	19FC7DB20EE04BA58E	
Purpose of Disbursement 2016 Primary		011	Amount of Each Dis	bursement this Period	
Candidate Name		Category/		4000.00	
Evan H. Jenkins		Type		-1000.00	
	ement For: 2016 Primary General Other (specify)				
Full Name (Last, First, Middle Initial) C. JET PAC			Date of Disburseme	nt	
Mailing Address PO Box 2385			06 25	2015	
City Ottawa	State Zip Code IL 61350		Transaction ID: 8	743FB6826647EDE006	
Purpose of Disbursement 2015 Contribution		044			
Candidate Name		011	Amount of Each Dis	bursement this Period	
JET PAC		Category/ Type		2500.00	
	ement For: 2015 Primary General Other (specify)	- 7,1-2			
State. District.	Contribution				
SUBTOTAL of Disbursements This Page (optional)				2500.00	
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 300 OF 340
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orliny	•	7 —
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,			
National Emergency Medicine Polit	tical Action Commit	tee		
/ Mational Emergency Medicine Folia				
Full Name (Last, First, Middle Initial)				
A. Jobs, Opportunities and Education	PAC (JOE-PAC)		Date of Disburseme	ent
Mailing Address 700 13th Street, NW			04 16	2015
Suite 600			04 10	2013
	State Zip Code		Transaction ID - 7	0.4647005400045600
Washington	DC 20005		ransaction iD: 7	0461723E402291F682
Purpose of Disbursement 2015 Contribution		044	Assessment of Foods Die	diamental delle Desired
Candidate Name		011	Amount of Each Dis	sbursement this Period
Jobs, Opportunities and Education	PAC (JOE-PAC)	Category/ Type		2500.00
	nent For: 2015	Турс		
Senate	Primary General			
President	Other (specify) ▼			
State: District:	Contribution			
Full Name (Last, First, Middle Initial)			D . (D).	
B. Johnson for Congress			Date of Disburseme	
Mailing Address PO Box 906			05 28	2015
maming / tautiess 1 O Box 300			30 30	20,0
City	State Zip Code		Transaction ID : 0	1CDA344E56592F294C
Marietta	OH 45750			
Purpose of Disbursement 2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name			76	
William L. Johnson		Category/ Type		2500.00
Office Sought: House Disbursen	nent For: 2016			
	Primary General			
President State: OH District: 06	Other (specify) ▼			
State: OH District: 06 Full Name (Last, First, Middle Initial)				
C. Julia Brownley for Congress			Date of Disburseme	ent
of Julia Brownley for Congress			M M / D D	/
Mailing Address PO Box 2018			04 30	2015
-				
,	State Zip Code CA 91358		Transaction ID: 0	DBA4482501AD713543
Purpose of Disbursement	31000			
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2500.00
Julia Brownley		Туре		2500.00
	nent For: 2016			
Senate X	Primary General Other (specify)			
State: CA District: 26	Carol (opooliy)			
SUBTOTAL of Disbursements This Page (optional)				7500.00
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full) National Emergency Medicine Poli	tical Action Committe	ee		
Full Name (Last, First, Middle Initial)				
A. Julia Brownley for Congress			Date of Disbursem	_
Mailing Address PO Box 2018			05 14	2015
,	State Zip Code		Transaction ID :	02015B36F9D849FF6A4
Thousand Oaks Purpose of Disbursement	CA 91358		Transaction is:	02010B0010B040110A4
2016 Primary		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		1000.00
Julia Brownley		Type		1000.00
Senate President	nent For: 2016 Primary General Other (specify) ▼			
State: CA District: 26				
Full Name (Last, First, Middle Initial) B. Kathleen Rice for Congress			Date of Disbursem	
Mailing Address PO Box 744	ailing Address PO Box 744			
Mineola	State Zip Code NY 11501		Transaction ID :	4DFE41A0CA62DE25CB9
Purpose of Disbursement 2016 Primary		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		1000.00
Kathleen Maura Rice		Туре		1000.00
	nent For: 2016 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Kevin McCarthy for Congress			Date of Disbursem	
Mailing Address PO Box 12667			03 19	2015
Bakersfield	State Zip Code CA 93389-2667		Transaction ID :	11CF4C4253D36722839
Purpose of Disbursement 2016 Primary		011		
Candidate Name			Amount of Each D	isbursement this Period
Kevin Owen McCarthy		Category/ Type		2500.00
Office Sought: House Disburser Senate President	nent For: 2016 Primary General Other (specify)	J		
State: CA District: 23				
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	7	4500.00
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		Detailed	Summary Page			27	28a		28b	28c	29	30	
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\rangle	National Emergency Medicine Polit	tical Act	tion Committ	tee									
	Full Name (Last, First, Middle Initial)												_
	Kevin McCarthy for Congress						Date o	f Disb	D [1 Y 1 Y	■ Y	
	Mailing Address PO Box 12667						05		28		2015		
	•	State	Zip Code				Trans	sactio	n ID :	29E51E)2AE11	36E34F9	
	Bakersfield Purpose of Disbursement	CA	93389-2667										
	2016 Primary				011		Amoun	t of E	ach D	Disbursem	ent this	Period	
	Candidate Name				tegor	ry/					250	0.00	
	Kevin Owen McCarthy				Гуре					7	250	0.00	
	Senate	nent For: Primary Other (spe	General										
	State: CA District: 23												
В.	Full Name (Last, First, Middle Initial) Kinzinger for Congress						Date o	f Disb	oursen	nent			
							M = M	/	D [Y Y	■ Y	
	Mailing Address PO Box 2365						03		04		2015		
	Ottawa	State IL	Zip Code 61350-6965				Trans	sactio	n ID :	FCCB80	3569248	39B9283	
	Purpose of Disbursement 2016 Primary			Г	011		Amoun	t of E	ach E	Disbursem	ent this	Period	
	Candidate Name			Ca	tegor	v/					400	00.00	
	Adam Daniel Kinzinger				Гуре	,		7		7	100	00.00	
	Senate	nent For: Primary Other (spe	General										
	Full Name (Last, First, Middle Initial)												_
C.	Kinzinger for Congress						Date o	f Disb	oursen		- Y - Y	V	
	Mailing Address PO Box 2365						04	J I	16		2015		
	City	State	Zip Code				Trans	sactio	n ID ·	6563F90	7RF46	1388CBL	_
	Ottawa	IL	61350-6965				man	Juotio		00001 00) Di Au	J0000B	
	Purpose of Disbursement 2016 Primary				011		Amoun	t of E	ach E	Disbursem	ent this	Period	
	Candidate Name			Ca	tegor	y/		_	-		150	0.00	
	Adam Daniel Kinzinger				Гуре						130	0.00	
	Senate	nent For: Primary Other (spe	General										
	State: IL District: 16												
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Poli-	tical Action Commi	ittee		
/ Full Name (Last, First, Middle Initial)				
A. Kinzinger for Congress			Date of Disburseme	ent
- Carlot Congress			M M / D D	/
Mailing Address PO Box 2365			06 17	2015
City	State Zip Code			
Ottawa	IL 61350-6965		Transaction ID: 3	9CC93F79ED7045892B
Purpose of Disbursement				
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1000.00
Adam Daniel Kinzinger Office Sought: House Disburser	ment For: 2016	Туре		
	Primary General			
President	Other (specify) ▼			
State: IL District: 16				
Full Name (Last, First, Middle Initial)			Data of Dishamana	
B. Kirk for Senate			Date of Disburseme	
Mailing Address PO Box 2594			03 19	2015
,	State Zip Code		Transaction ID : E	7CBE8AA72F9B585C7C
Chicago Purpose of Disbursement	IL 60690			
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		4000.00
Mark Steven Kirk		Type	7	1000.00
	ment For: 2016			
President	Primary General Other (specify) ▼			
State: IL District:	(apasiny) V			
Full Name (Last, First, Middle Initial)				
C. Kirk for Senate			Date of Disburseme	ent
Mailing Address DO Day 2504			03 19	2015
Mailing Address PO Box 2594			03 19	2013
City	State Zip Code		Transaction ID : 5	F2919FFF6ACA7F8F34
Chicago Purpose of Disbursement	IL 60690		Transaction ib . c	1 2010111 OAOATI 01 04
2016 General		011	Amount of Each Dir	sbursement this Period
Candidate Name		Category/	Amount of Lacif Dis	
Mark Steven Kirk		Type		1500.00
	ment For: 2016			
Senate President	Primary			
State: IL District:	outer (specify) ▼			
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SUBTOTAL of Disbursements This Page (optional)				3500.00
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SCHEDULE B (FEC Form 3X)	Line concrete ashedula/a\		NE NUMBER: PAGE 304				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	27	28a 28b	24 25 26 28c 29 30b			
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NAME OF COMMITTEE (In Full)	tigal Agtion Committe	20					
National Emergency Medicine Politication	lical Action Committe	e e					
Full Name (Last, First, Middle Initial)							
A. Kirk for Senate			Date of Disburseme	_			
Mailing Address PO Box 2594			04 30	2015			
City	State Zip Code		Transaction ID :	7D244 A A 2E A 740D0D0E2			
Chicago	IL 60690		Transaction ID:	7D311AA2FA749D8B8E2			
Purpose of Disbursement 2016 General		011	Amount of Each Di	sbursement this Period			
Candidate Name		Category/		0500.00			
Mark Steven Kirk		Type		3500.00			
	nent For: 2016						
Senate President	Primary General Other (specify)						
State: IL District:	Carlot (opcony)						
Full Name (Last, First, Middle Initial)							
B. Kristi for Congress			Date of Disburseme	ent			
Mailing Address PO Box 852			06 / 25	2015			
Sioux Falls	State Zip Code SD 57101		Transaction ID :	B32325279E832D726BC			
Purpose of Disbursement 2016 Primary		011	Amount of Each Di	sbursement this Period			
Candidate Name			Amount of Lacif bi	Soursement this i chou			
Kristi Lynn Noem		Category/ Type		1500.00			
	nent For: 2016						
	Primary General						
President State: SD District: 01	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C. Kurt Schrader for Congress			Date of Disburseme	ent			
Mailing Address DOD 2004			M M / D D	/ Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO Box 3314			06 17	2015			
,	State Zip Code		Transaction ID : I	B3A1C5B6D65B2D19477			
Oregon City Purpose of Disbursement	OR 97045						
2016 Primary		011	Amount of Each Di	sbursement this Period			
Candidate Name		Category/	I Carr or Laon bi				
Kurt Schrader		Туре		1000.00			
Senate President	nent For: 2016 Primary General Other (specify)						
State: OR District: 05							
SUBTOTAL of Disbursements This Page (optional)		·····•		6000.00			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	NOMBELL.	340
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Poli	tical Action Committe	e		
Full Name (Last, First, Middle Initial)			Data of Bishamanan	
A. Kurt Schrader for Congress			Date of Disbursement	
Mailing Address PO Box 3314			06 25 2015	
City	State Zip Code		Transaction ID : E52F823147A62F5F6D	
Oregon City	OR 97045		Transaction ib . E32F023147 A02F3F0b	'A
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period	d
Candidate Name		Category/		т.
Kurt Schrader		Type	1000.00	_
	nent For: 2016 Primary General Other (specify)			
State: OR District: 05	(1			
Full Name (Last, First, Middle Initial)				
B. Kyrsten Sinema for Congress			Date of Disbursement	
Mailing Address PO Box 25879			06 25 2015	
Tempe	State Zip Code AZ 85285		Transaction ID: 5399029BA5F6E98BA	A2
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period	d
Candidate Name		Category/		٦
Kyrsten Sinema		Type	1000.00	_
Senate President	nent For: 2016 Primary General Other (specify)			
State: AZ District: 09				
Full Name (Last, First, Middle Initial) C. LaHood for Congress			Date of Disbursement	
Mailing Address PO Box 10735			06 25 2015	
City	State Zip Code		Towns at law ID 45004DD 4 D005540D	
Peoria	IL 61612		Transaction ID: 1F881BDAD90E54CBA	15A
Purpose of Disbursement 2015 Special		011	Amount of Each Disbursement this Period	٨
Candidate Name	I	Category/	Amount of Each disbursement this Period	ر -
Darin M. LaHood		Type	1000.00	
	nent For: 2015		,	
Senate	Primary General			
State: IL District: 18	Other (specify) ▼ Special			
otato. IL Biotiot. 10	Special			_
SUBTOTAL of Disbursements This Page (optional)				
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SCHEDULE B (FEC F	, l	Jse separat	e schedule(s)			JMBER:		PAG	iE 306 (OF 340
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NAME OF COMMITTEE (In Ful			<i>y</i> 0. a							
National Emergency	•	al Actior	n Committe	ee						
Full Name (Last, First, Middle II	nitial)					5	5			
A. Lance for Congress						Date of	Disburser		YYY	V
Mailing Address PO Box 225						06	10		2015	
City	Stat		ip Code			Trans	action ID	5278253	89C A4C	CC48F1
Colonia	N	J C	7067			mans	action ib	. 3276233	JOCATO	30401 1
Purpose of Disbursement 2016 Primary				011	71	Amount	of Each I	Disbursem	ent this	Period
Candidate Name				Category	v/	-				
Leonard Lance				Type	,.		-	7	1000	0.00
Office Sought: House Senate Presider		t For: 201 mary [ner (specify	General							
State: NJ District: 0			, ,							
Full Name (Last, First, Middle II	nitial)									
B. Langevin for Congres	S					Date of	Disburser		Y	V
Mailing Address 181A Knight S	treet					03	04		2015	
City Warwick	Stat RI		ip Code 02886			Trans	action ID	: 7CDBA4	19636F3	45EFCB
Purpose of Disbursement 2016 Primary				011		Amount	of Each I	Disbursem	ent this	Period
Candidate Name				Category	_	-		-		
James R. Langevin				Type	y'		,	,	1000	0.00
Office Sought: Senate Presider State: RI District: 0			General							
State: RI District: 0. Full Name (Last, First, Middle II										
C. Langevin for Congres							Disburser			
Mailing Address 181A Knight St	reet					03	19		2015	Y
City	Stat	e Z	ip Code			Tronc	action ID	. EE42020	DEC101	E2DEE
Warwick	RI	C)2886			Halls	action ib	. EE42028	BECIUI	LODEED
Purpose of Disbursement 2016 Primary				011		Amount	of Each I	Dishursem	ent this	Period
Candidate Name				Category			0. 200			
James R. Langevin				Type				7	1000	0.00
Office Sought: House Senate Presider		t For: 201 mary [ner (specify	General							
State: RI District: 02		(55)	, ▼							
SUBTOTAL of Disbursements Thi	s Page (optional)				•			1 40	3000	0.00
TOTAL This Period (last page this	s line number only)				_					

	CHEDULE B (FEC Form 3X)	llee sen	arate schedule(s)		IE NUMB	ER:		PAC	GE 307	OF 340
IT	EMIZED DISBURSEMENTS	for each	category of the	(check o		2 X	23	24	25	□ 26
		Detailed	Summary Page	27		- / Ba	28b	28c	29	30b
	ny information copied from such Reports and Statem									
or	for commercial purposes, other than using the name	e and add	lress of any politica	al committee	to solicit	contri	butions	from suc	n commi	ttee.
/	NAME OF COMMITTEE (In Full)									
/	National Emergency Medicine Polit	ical Act	tion Committe	ee						
	Full Name (Last, First, Middle Initial)									
Α.	Langevin for Congress				Dat	e of D	isburser	nent		
	Mailing Address 181A Knight Street					об Об	28		2015	Y
			7: 0 !							
	City S Warwick	State RI	Zip Code 02886		Tr	ansac	tion ID	597A5A	7BD4F4	269379F
	Purpose of Disbursement		02000		_					
	2016 Primary			011	Amo	ount of	Each I	Disbursen	nent this	Period
	Candidate Name			Category/					300	0.00
	James R. Langevin			Туре			7	7	300	0.00
	Office Sought: House Disbursem	nent For: Primary	2016 General							
		Other (spe								
	State: RI District: 02		•							
	Full Name (Last, First, Middle Initial)									
В.	Levin for Congress				Dat	e of D	isburser	nent		
	Mailing Address PO Box 37					04	16		2015	- Y
	Walling Address FO Box 37					V-T	I.C		2013	_
	City	State	Zip Code		_		tion ID	CCUDSE	C1443D	7021250
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	Roseville Purpose of Disbursement	MI	48066		Tr	ansac		. 000021	.002	7021320
	Roseville			011	-			Disbursen		
	Roseville Purpose of Disbursement 2016 Primary Candidate Name			011 Category/	-				nent this	Period
	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin	MI	48066		-				nent this	
	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Disbursem	MI nent For:	2016	Category/	-				nent this	Period
	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate Disbursem	MI	2016 General	Category/	-				nent this	Period
	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Disbursem Senate Disbursem Senate Disbursem Senate Disbursem Disb	ment For:	2016 General	Category/	-				nent this	Period
	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial)	ment For:	2016 General	Category/	Ame	ount of	f Each I	Disbursen	nent this	Period
с.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09	ment For:	2016 General	Category/	Amo	e of D	f Each I	Disbursen	nent this	Period 00.00
<u> </u>	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress	ment For:	2016 General	Category/	Amo	ount of	f Each I	Disbursen ment	nent this	Period 00.00
c .	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial)	ment For:	2016 General	Category/	Amo	e of D	isburser	Disbursen ment	nent this	Period 00.00
С.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37	ment For: Primary Other (spe	48066 2016 General ecify) Zip Code	Category/	Dat	e of D	isburser	Disbursen ment	100 100 7 2015	Period 00.00
c.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City Roseville	MI nent For: Primary Other (spe	48066 2016	Category/	Dat	e of D	isburser	Disbursen ment	100 100 7 2015	Period 00.00
c.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37	ment For: Primary Other (spe	48066 2016 General ecify) Zip Code	Category/	Dat	e of D	isburser	Disbursen ment	100 100 2015	Period 00.00
c.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City S Roseville Purpose of Disbursement 2016 Primary Candidate Name	ment For: Primary Other (spe	48066 2016 General ecify) Zip Code	Category/ Type	Dat	e of D	isburser	ment Y	100 Y 2015 02665Denent this	Period O.00 C7F937A Period
С.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City Senate Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin	ment For: Primary Other (spe	2016	Category/ Type	Dat	e of D	isburser	ment Y	100 Y 2015 02665Denent this	Period 00.00
c.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Disbursement	ment For: Primary Other (spe	2016 General ecify) ▼ Zip Code 48066	Category/ Type 011 Category/	Dat	e of D	isburser	ment Y	100 Y 2015 02665Denent this	Period O.00 C7F937A Period
C.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate Disbursem Disbursement	ment For: Primary Other (spe	2016 General ecify) ▼ Zip Code 48066 2016 General	Category/ Type 011 Category/	Dat	e of D	isburser	ment Y	100 Y 2015 02665Denent this	Period O.00 C7F937A Period
c.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate Disbursem Disbursement	ment For: Primary Other (spe	2016 General ecify) ▼ Zip Code 48066 2016 General	Category/ Type 011 Category/	Dat	e of D	isburser	ment Y	100 Y 2015 02665Denent this	Period O.00 C7F937A Period
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C.	Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President State: MI District: 09 Full Name (Last, First, Middle Initial) Levin for Congress Mailing Address PO Box 37 City Roseville Purpose of Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President Disbursement 2016 Primary Candidate Name Sander M. Levin Office Sought: House Senate President	ment For: Primary Other (spe	2016 General ecify) ▼ Zip Code 48066 2016 General ecify) ▼	Category/ Type 011 Category/ Type	Dat	e of D	isburser	ment Y	2015 02665D0 nent this	Period O.00 C7F937A Period

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\rangle	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit				
Α.	Full Name (Last, First, Middle Initial) Lincoln PAC			Date of Disbursement	
	Mailing Address PO Box A3968			04 30 2015	
	Chicago	State Zip Code IL 60690		Transaction ID : 6BC621B54A31CBF5B	34
	Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursement this Period	l
	Candidate Name Lincoln PAC		Category/ Type	5000.00]
	Senate	nent For: 2015 Primary General Other (specify) ▼			
	State: District: Full Name (Last, First, Middle Initial)	Contribution			
В.	Lone Star Leadership PAC Mailing Address PO Box 30844			Date of Disbursement 03 04 2015	
	•	State Zip Code MD 20824-0844		Transaction ID : BA3EA8E7DDDE79610)3B
	Purpose of Disbursement 2015 Contribution Candidate Name Lone Star Leadership PAC		011 Category/ Type	Amount of Each Disbursement this Period 5000.00	7
	Office Sought: House Disbursem	nent For: 2015 Primary General Other (specify) Contribution			_
C.	Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress			Date of Disbursement	
	Mailing Address PO Box 1441			01 29 2015	
	Topeka Purpose of Disbursement	State Zip Code KS 66601-1441		Transaction ID : 5D7463FB7BB4408524	6
	2016 Primary Candidate Name Lynn Michelle Jenkins		011 Category/ Type	Amount of Each Disbursement this Period 2500.00	7
	Office Sought: House Disbursem	nent For: 2016 Primary General Other (specify)	7,50		
s	UBTOTAL of Disbursements This Page (optional)			12500.00	7
	OTAL This Period (last page this line number only).				ī

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		27	28a 28b	28c 29 30b		
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NAME OF COMMITTEE (In Full)	, ,					
National Emergency Medicine P	olitical Action Commit	tee				
Full Name (Last, First, Middle Initial)			Date of Disbursem			
A. Maggie's List	Maggie's List					
Mailing Address 6675 Weeping Willow Way			05 28			
City	State Zip Code		Transaction ID :	C988AFC331BEDAB36C0		
Tallahassee Purpose of Disbursement	FL 32311		Transaction 12 1	0000711 00012227120000		
2015 Contribution		011	Amount of Each D	Disbursement this Period		
Candidate Name		Category/		2500.00		
Maggie's List		Type	7	2500.00		
Office Sought: House Disbut	sement For: 2015 Primary General		ı			
President	✓ Other (specify) ▼		1			
State: District:	Contribution					
Full Name (Last, First, Middle Initial)						
B. Majority Committee PACMc PA	AC .		Date of Disbursem			
Mailing Address PO Box 10134	03 04					
City Bakersfield Purpose of Disbursement	State Zip Code CA 93389		Transaction ID :	472E66764E499DFF479		
2015 Contribution		011	Amount of Each D	Disbursement this Period		
Candidate Name		Category/		0500.00		
Majority Committee PACMc PA		Туре		2500.00		
Senate	sement For: 2015 Primary General Other (specify) ▼ Contribution					
Full Name (Last, First, Middle Initial)						
C. Making America Prosperous PA	2		Date of Disburser	nent		
Mailing Address PO Box 2485						
City	State Zip Code		Transaction ID :	928FA428E5B49636447		
Springfield	VA 22152-0485		mansaction ib .	920FA420LJB49030447		
Purpose of Disbursement 2015 Contribution		011	Amount of Fools F	Disbursement this Period		
Candidate Name	Candidate Name					
Making America Prosperous PA	C	Category/ Type		2500.00		
	sement For: 2015		,	,		
Senate President	Primary General		1			
State: District:	Other (specify) ▼ Contribution		1			
	Contribution					
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
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NAME OF COMMITTEE (In Full)	and dadress of any points		
National Emergency Medicine Poli	tical Action Committe	ee	
Full Name (Last, First, Middle Initial)			B . (B)
A. Mark Pocan for Congress			Date of Disbursement
Mailing Address PO Box 327			06 10 2015
City	State Zip Code		Transaction ID: E3B598E7D970DF72B43
Madison	WI 53701		Transaction ID . E3B336E7B376B172B43
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
Mark Pocan		Туре	500.00
Office Sought: House Disburser	nent For: 2016 Primary General Other (specify)		
State: WI District: 02			
Full Name (Last, First, Middle Initial)			Data of Dishamous
^{B.} Marsha Blackburn for Congress, Ir	ic.		Date of Disbursement
Mailing Address PO Box 3750			03 04 2015
	State Zip Code		Transaction ID : 264E9FBA1EF9DD3A943
Brentwood Purpose of Disbursement	TN 37024-3750		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
Marsha Wedgeworth Blackburn Office Sought: House Disburser	ment For: 2016	Туре	, , , , ,
Senate President	Primary General Other (specify)		
State: TN District: 07			
Full Name (Last, First, Middle Initial) C. Marsha Blackburn for Congress, Ir	ıc.		Date of Disbursement
Mailing Address PO Box 3750			04 16 2015
City	State Zip Code		Transaction ID : 19664A7831D0626EAC2
Brentwood Purpose of Disbursement	TN 37024-3750		Transaction is . 10004A7007B0020EA02
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Marsha Wedgeworth Blackburn		Type	3500.00
Office Sought: House Disburser Senate President	nent For: 2016 Primary General Other (specify)		
State: TN District: 07			
SUBTOTAL of Disbursements This Page (optional)		·····	5500.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
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NAME OF COMMITTEE (In Full)	To and address of any pointed		
National Emergency Medicine Poli	tical Action Committe	ee	
Full Name (Last, First, Middle Initial)			B . (B)
A. McKinley for Congress			Date of Disbursement
Mailing Address PO Box 642			04 16 2015
City	State Zip Code		Transaction ID : 2A39B644287DB0DCE1E
Morgantown	WV 26507		Transaction ID . 2A39D044207DD0DCETE
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
David B. McKinley		Туре	5000.00
	nent For: 2016 Primary General Other (specify)		
State: WV District: 01			
Full Name (Last, First, Middle Initial)			
B. Michael Burgess for Congress			Date of Disbursement
Mailing Address PO Box 2334			01 29 2015
City Senton	State Zip Code TX 76202-2334		Transaction ID: 18FB0D194934B56ACEB
Purpose of Disbursement			
2016 Primary Candidate Name		011	Amount of Each Disbursement this Period
Michael Clifton Burgess		Category/ Type	2500.00
	nent For: 2016	Туре	
	Primary General		
President	Other (specify) ▼		
State: TX District: 26 Full Name (Last, First, Middle Initial)			
C. Michael Burgess for Congress			Date of Disbursement
Mailing Address PO Box 2334			03 25 2015
City	State Zip Code		
Denton	TX 76202-2334		Transaction ID : C08D8E105D6904B4810
Purpose of Disbursement 2016 Primary		011	
Candidate Name			Amount of Each Disbursement this Period
Michael Clifton Burgess		Category/ Type	2500.00
Office Sought: House Disburser	nent For: 2016		
Senate	Other (anality) — General		
State: TX District: 26	Other (specify) ▼		
20			
SUBTOTAL of Disbursements This Page (optional)			10000.00

SCHEDULE B (FEC Form 3X)	Llee congrete cohedule/e\	FOR LINE I	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 28 28 28 29
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NAME OF COMMITTEE (In Full) National Emergency Medicine Pol	tical Action Committe	ee	
Full Name (Last, First, Middle Initial)			
A. Mike Bishop for Congress			Date of Disbursement
Mailing Address PO Box 1148			03 19 2015
City	State Zip Code		Transaction ID : 0158E3BC210460A13A
Brighton Purpose of Disbursement	MI 48116-2748		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Michael D. Bishop		Туре	1000.00
Office Sought: House Disburse Senate President	ment For: 2016 Primary General Other (specify) ▼		
State: MI District: 08			
Full Name (Last, First, Middle Initial)			
B. Mike Kelly for Congress			Date of Disbursement
Mailing Address PO Box 476			03 25 2015
City Lyndora	State Zip Code PA 16045		Transaction ID: 893EB1F26AEAF3F40
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name G. Mike J. Kelly		Category/	1000.00
•	ment For: 2016	Туре	
	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Mike Kelly for Congress			Date of Disbursement
Mailing Address PO Box 476			05 28 2015
City Lyndora	State Zip Code PA 16045		Transaction ID: 5812A6DE2C0660771E
Purpose of Disbursement 2016 Primary			
Candidate Name		011	Amount of Each Disbursement this Period
G. Mike J. Kelly		Category/ Type	1000.00
	ment For: 2016 Primary General Other (specify)	1,1,00	
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SUBTOTAL of Disbursements This Page (optional).		······	3000.00
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\ NAME	OF COMMITTEE (In Full)														
Natio	onal Emergency Medic	cine Politic	cal Ac	tion Commit	tee										
Full Na	ame (Last, First, Middle Initial)														_
A. Moo	oney for Congress							Date of	_	ursen		Y Y	V	V	
Mailing	g Address PO Box 1863							05	T.	14		_20			
City	City State Zip Code					T	4!	ID .	E004D	DODE	`0EDE	-52400	_		
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	ander X. Mooney	_				ype			7		7		2500.	00	
Office	Sought: House Senate President		rimary	2016 General											
State:	WV District: 02		о. (ор	Joney, 4											
Full Na	ame (Last, First, Middle Initial)														_
B. Mor	an for Kansas							Date of	f Disb	ursen		Y Y	V	V	
Mailing	Mailing Address PO Box 1151							04]	23		20			
City Hays		Sta K		Zip Code 67601-1151				Trans	sactio	n ID :	F16DA	0C8D	7D56E	E95FCI	3
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Hays Purpos 2016 Candid	Primary				Cate	011 egory	1/							eriod	В
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Hays Purpos 2016 Candid Jerry Office	Primary date Name y W. Moran Sought: House Senate President KS District:	Disburseme	nt For:	2016 General	Cate	egory							this P	eriod	В
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22	25 26 29 30b	
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NAME OF COMMITTEE (In Full) National Emergency Medicine Pol	itical Action Committe	ee			
Full Name (Last, First, Middle Initial)					
A. Moran for Kansas			Date of Disbursement		
Mailing Address PO Box 1151				2015	
City State Zip Code			Transaction ID: 75C59ED6	3869572C517	
Hays Purpose of Disbursement	KS 67601-1151		Transaction is . 10005E50	00000120011	
2016 Primary		011	Amount of Each Disbursemer	nt this Period	
Candidate Name		Category/		2500.00	
Jerry W. Moran		Туре		2500.00	
Senate President	ment For: 2016 Primary General Other (specify)				
State: KS District:					
Full Name (Last, First, Middle Initial) Morgan Griffith for Congress			Date of Disbursement	V V	
Mailing Address PO Box 361				2015	
City Christiansburg Purpose of Disbursement	State Zip Code VA 24068		Transaction ID: 014699D6	7E9266C4FAA	
2016 Primary		011	Amount of Each Disbursemer	nt this Period	
Candidate Name		Category/		2500.00	
H. Morgan Griffith		Туре		2300.00	
	ment For: 2016 Primary General Other (specify)				
Full Name (Last, First, Middle Initial) C. MURPHPAC			Date of Disbursement		
Mailing Address 410 1st St SE, FI 3				2015	
City Washington	State Zip Code DC 20003		Transaction ID : D02560637	77557BE3235	
Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursemer	nt this Period	
Candidate Name MURPHPAC		Category/		5000.00	
	ment For: 2015	Туре			
Senate President	Primary General Other (specify) ▼				
State: District:	Contribution				
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l \	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Action C	committe	e					
	Full Name (Last, First, Middle Initial)								
	Nancy Pelosi for Congress				M = M	Disburse	D / Y	YYY	Υ
	Mailing Address 700 13th Street, NW Suite 600				05	2	8	2015	
,	Washington	state Zip C DC 2000			Trans	action ID	: EC7A7D	E052619	552051
	Purpose of Disbursement 2016 Primary		I	011	Amount	of Each	Disbursen	nent this	Period
	Candidate Name Nancy Pelosi			Category/ Type		,		250	0.00
	Senate President	nent For: 2016 Primary Other (specify)	General						
	State: CA District: 12 Full Name (Last, First, Middle Initial)								
	New Democrat Coalition PAC				Date of	Disburse		N Y N Y	V
	Mailing Address 700 13th Street, NW Suite 600				03		4	2015	
	Washington	State Zip C DC 2000			Trans	action ID	: C339BA	94BEEE	EEDF003
	Purpose of Disbursement 2015 Contribution			011	Amount	of Each	Disbursen	nent this	Period
	Candidate Name New Democrat Coalition PAC			Category/ Type		-,	,	500	0.00
	Senate	Other (specify)	General , ontribution						
_	Full Name (Last, First, Middle Initial) New Pioneers PAC				Date of	Disburse		Y Y	
	Mailing Address 228 S Washington St Ste 115				04	1	6	2015	
	,	State Zip C			Trans	action ID	: 60B2B4	1F853C8	1183C2
	Purpose of Disbursement 2015 Contribution Candidate Name		[011	Amount	of Each	Disbursen	nent this	Period
	New Pioneers PAC			Category/ Type		,	,	500	0.00
	Senate	Other (specify)	General , ontribution						
SI	JBTOTAL of Disbursements This Page (optional)			·····•	Ë		1 7	12500	0.00

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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check	only or 21b 27	ne) 22 28a	X 23 28b	24 28c	25 29	26 30b
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	NAME OF COMMITTEE (In Full)								
	National Emergency Medicine Polit	ical Action Commit	tee						
_	Full Name (Last, First, Middle Initial)				D-1(Distance			
Α.	New York Jobs PAC				Date of Disbursement				
	Mailing Address PO Box 708				04	/ D	30	2015	Y
	•	State Zip Code			Trans	action IF) : E4D75	3100040	000E1D0
	Melville	NY 11747			IIalis	action it) . L4D13.	JICOUAU	0002100
	Purpose of Disbursement 2015 Contribution		011	٦١.	Amount	of Each	Disburse	ment this	Period
	Candidate Name		Category	v/				400	20.00
	New York Jobs PAC		Type			-		100	00.00
	Senate	nent For: 2015 Primary General Other (specify)							
	State: District:	Contribution	ı						
	Full Name (Last, First, Middle Initial)								
В.	NRCC				Date of	Disburs		Y	Y
	Mailing Address 320 First Street SE				01		29	2015	
	Washington	State Zip Code DC 20003			Trans	action II	D : D9E87	FF29251I	BFFCF44
	Purpose of Disbursement 2015 Contribution		011	٦.	Amount	of Each	Disburse	ment this	Period
	Candidate Name NRCC		Category/ Type					150	00.00
		nent For: 2015	71				,		
		Primary General							
	President State: District:	Other (specify) ▼ Contribution	1						
_	Full Name (Last, First, Middle Initial)								
C.	NRSC				Date of	Disburs			
	Mailing Address 425 2nd Street NE				01	/ D	29	2015	Y
	,	State Zip Code DC 20002			Trans	action IE) : C3B53	F34786F	E41EA3E
	Washington Purpose of Disbursement	20002							
	2015 Contribution		011		Amount	of Each	Disburse	ment this	Period
	Candidate Name		Category	y/				1500	20.00
	NRSC	_	Type					1500	00.00
	Senate	nent For: 2015 Primary General Other (specify)							
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or	for commercial purposes, other than using the nam	e and add	ress of any politica	al committee to	solicit contri	butions fror	n such d	ommitte	e.
	NAME OF COMMITTEE (In Full)								
	National Emergency Medicine Polit	ical Act	ion Committe	ee					
/_	,								
_	Full Name (Last, First, Middle Initial)								
Α.	Nutmeg PAC				Date of D	isbursemen	t		
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	Mailing Address C/O Cacace Tusch & Santagata				05	14	2	2015	_
	777 Summer St, Suite 103 City S	Zip Code							
	-	tate CT	06903		Transac	tion ID : 8F	4B86C8	7CE2AE	247E6
	Purpose of Disbursement								
	2015 Contribution			011	Amount of	f Each Disb	ursemer	nt this P	eriod
	Candidate Name			Category/				-	-
	Nutmeg PAC			Type		7	7	2500.	00
	Office Sought: House Disbursem	ent For:	2015						
	Senate	Primary	General						
	President	Other (spe	cify) ▼						
	State: District:		Contribution						
	Full Name (Last, First, Middle Initial)								
В.	Ocean State Political Action Comm	ittee (C	SPAC)		Date of D	isbursemen	t		
					M = M	/ D D	/ Y	Y	Y
	Mailing Address 26 Hilton Road				06	25		2015	
	City State Zin Code								
	City	tate	Zip Code		Transac	tion ID : 20	B27FFC	02541A	08851
	Warwick	RI	U3880 ⁻ 303U						
	Warwick Purpose of Disbursement	RI	02889-2930						
	Warwick Purpose of Disbursement 2015 Contribution	RI	02889-2930	011	Amount of	f Each Disb	ursemer	nt this P	eriod
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	Purpose of Disbursement 2015 Contribution	ittee (O	SPAC)	Category/	Amount of	f Each Disb	oursemer		
	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Disbursem	ittee (O	SPAC)	Category/	Amount of	f Each Disb	ursemer		
	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Disbursem Senate	ittee (O	OSPAC) 2015 General	Category/	Amount or	f Each Disb	oursemer		
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	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Senate President President	ittee (O	PSPAC) 2015 General cify) ▼	Category/		7	7		
C.	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Senate President State: District:	ittee (O	PSPAC) 2015 General cify) ▼	Category/		f Each Disb	7		
C.	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Olson for Congress Committee	ittee (O	PSPAC) 2015 General cify) ▼	Category/	Date of D	isbursemen	t	5000.	00
— С.	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	ittee (O	PSPAC) 2015 General cify) ▼	Category/	Date of D	isbursemen	t	5000.	00
<u> </u>	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Olson for Congress Committee Mailing Address PO Box 16381	ittee (O lent For: Primary Other (spe	PSPAC) 2015 General cify) Contribution	Category/	Date of D	isbursemen	t	5000.	00
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C.	Purpose of Disbursement 2015 Contribution Candidate Name Ocean State Political Action Comm Office Sought: House Senate President State: Full Name (Last, First, Middle Initial) Olson for Congress Committee Mailing Address PO Box 16381 City Sugar Land Purpose of Disbursement 2016 Primary Candidate Name Peter Graham Olson Office Sought: House Senate President Disbursement 2016 Primary Candidate Name Peter Graham Olson Office Sought: House Senate President	ittee (Onent For: Primary Other (spent For: TX The sent For: Type (spent	PSPAC) 2015	Category/ Type 011 Category/ Type	Date of D	isbursemen 04 tion ID : C9	t / Y 2	5000.	DF4FE0 eriod
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National Emergency Medicine Polit	tical Action Committ	tee		
Full Name (Last, First, Middle Initial)			5	
A. Pallone for Congress			Date of Disburseme	ent
Mailing Address PO Box 3176			01 29	2015
Maining Address 1 C Box 3170			01 20	2010
City	State Zip Code		Transaction ID : C	08A4FB47A970CD294D
Long Branch	NJ 07740		Transaction iD . C	,00A4FB47A970CD294D
Purpose of Disbursement 2016 Primary		011	Amount of Each Die	sbursement this Period
Candidate Name			Amount of Each Dis	spursement this Penou
Frank Pallone Jr.		Category/ Type		2500.00
	nent For: 2016	71	,	,
Senate	Primary General			
President	Other (specify) ▼			
State: NJ District: 06				
Full Name (Last, First, Middle Initial)			Date of Disburseme	unt
B. Pat Meehan for Congress			Man / Dan	/ Y Y Y Y
Mailing Address 50 S Providence Road			05 14	2015
,	State Zip Code		Transaction ID: 2	E90FA510780A508033
Media Purpose of Disbursement	PA 19063-3531			
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		
Patrick L. Meehan		Type	7	2500.00
	nent For: 2016			
Senate X	Primary General			
State: PA District: 07	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Paul Gosar for Congress			Date of Disburseme	ent
			M M / D D	/ Y Y Y Y
Mailing Address PO Box 2967			04 09	2015
City	State Zip Code			
City S Prescott	AZ 86302		Transaction ID : E	588AAA307A8AF4EAB7
Purpose of Disbursement				
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2000.00
Paul Anthony Gosar Office Sought: House Disburser	nent For: 2016	Туре		200.00
	Primary General			
President	Other (specify)			
State: AZ District: 04	• • • •			
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\angle	G ,				
Α.	Full Name (Last, First, Middle Initial) People for Derek Kilmer			Date of Disbursement	
				M M / D D /	Y Y Y Y Y
	Mailing Address PO Box 1381			03 19	2015
	City	State Zip Code			
	Tacoma	WA 98402		Transaction ID : A2D6C	F852E3044E4335
	Purpose of Disbursement 2016 Primary		011	Amount of Each Disburse	ement this Period
	Candidate Name		Category/	7 6.7 2.0.1. 2.00.1.00	
	Derek Kilmer		Type		1000.00
		nent For: 2016 Primary General			
	President	Other (specify) ▼			
	State: WA District: 06				
R	Full Name (Last, First, Middle Initial)			Date of Disbursement	
٠.	People for Derek Kilmer				YYYY
	Mailing Address PO Box 1381			06 25	2015
	Tacoma	State Zip Code WA 98402		Transaction ID : 4657B	F6D97836656EE9
	Purpose of Disbursement 2016 Primary		011	Amount of Each Disburse	ement this Period
	Candidate Name		Category/		4000.00
	Derek Kilmer		Type		1000.00
		nent For: 2016 Primary General			
	President	Other (specify) ▼			
_	State: WA District: 06				
C.	Full Name (Last, First, Middle Initial) People for Patty Murray			Date of Disbursement	
•					Y
	Mailing Address PO Box 3662			05 14	2015
		State Zip Code WA 98124		Transaction ID : D614A	F149248DA1F774
	Purpose of Disbursement	VVA 96124			
	2016 Primary		011	Amount of Each Disburse	ement this Period
	Candidate Name Patricia Lynn Murray		Category/ Type		2500.00
		nent For: 2016	Туре		
	X Senate	Primary General			
	State: WA District:	Other (specify) ▼			
	State. WA DISTIRCT.				
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NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	tical Action Committ	ee	
Full Name (Last, First, Middle Initial)			
A. Perlmutter for Congress			Date of Disbursement
Mailing Address 3440 Youngfield Street #264			05 19 2015
Wheat Ridge	State Zip Code CO 80033		Transaction ID: ABE130C456CD916C154
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name Edwin George Perlmutter		Category/ Type	1000.00
Office Sought: House Disburser	nent For: 2016 Primary General Other (specify) ▼		
State: CO District: 07			
Full Name (Last, First, Middle Initial) B. Perlmutter for Congress			Date of Disbursement
Mailing Address 3440 Youngfield Street #264			06 25 2015
Wheat Ridge	State Zip Code CO 80033		Transaction ID: 4E3F2AF2710F2A4A63C
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name Edwin George Perlmutter	Ca		2500.00
	nent For: 2016 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Pete Aguilar for Congress			Date of Disbursement
Mailing Address PO Box 10954			05 19 2015
,	State Zip Code CA 92423		Transaction ID : 152EB39A928F1AB0195
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name Peter Ray Aguilar		Category/ Type	1000.00
	nent For: 2016 Primary General Other (specify)	,,	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			4500.00

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NAME OF COMMITTEE (In Full)			
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Full Name (Last, First, Middle Initial)			
A. Pete Aguilar for Congress			Date of Disbursement
rete Aguilai foi Congress			M M / D D / Y Y Y Y
Mailing Address PO Box 10954			05 28 2015
0''			
City San Bernardino	State Zip Code CA 92423		Transaction ID: 43D44116F1AA8D737B2
Purpose of Disbursement	32423		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Peter Ray Aguilar		Type	1000.00
	sement For: 2016		
Senate President	Primary General Other (specify) ▼		
State: CA District: 31	Curici (opeony)		
Full Name (Last, First, Middle Initial)			
B. Pete Sessions for Congress		Date of Disbursement	
			M = M / D = D / Y = Y = Y
Mailing Address PO Box 823047			03 04 2015
City	State Zip Code		Transaction ID : E75272BAF9C9DECEBB
Dallas Purpose of Disbursement	TX 75382-3047		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Peter Anderson Sessions		Type	2500.00
	sement For: 2016		
	Primary General		
State: TX District: 32	Other (specify) ▼		
State: TX District: 32 Full Name (Last, First, Middle Initial)			
C. Pioneer Political Action Committee	ee.		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 701 8th Street, NW			03 25 2015
Suite 500	Otata Zin Oada		
City Washington	State Zip Code DC 20001		Transaction ID: 4C73D2C3C7380D28D87
Purpose of Disbursement			
2015 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Pioneer Political Action Committee		Туре	2300.00
Office Sought: House Disburs Senate	sement For: 2015 Primary General		
President	Other (specify)		
State: District:	Contribution	on	
SUBTOTAL of Disbursements This Page (optional)		6000.00
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SCHEDULE B (FEC Form 3X)	11	, FOR LINE		PAGE 322 OF 340	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	(check only one)		
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NAME OF COMMITTEE (In Full)	and dad oo or any pon		22.00. 20.00.00.00	300 00	
National Emergency Medicine Pol	itical Action Commi	ttee			
Additional Emergency Medicine Fol	indai / tolion domini				
Full Name (Last, First, Middle Initial)					
A. Pioneer Political Action Committed	Э		Date of Disbursement		
Mailing Address 701 8th Street, NW			06 25	2015	
Suite 500			00 25	2010	
City	State Zip Code		Troposeties ID C	EE2D00720000000000	
Washington	DC 20001		Transaction ID: 8	EE3D8872008928D061	
Purpose of Disbursement 2015 Contribution		011	Amount of Each Di	phuroomont this Davie I	
Candidate Name		011	Amount of Each Dis	sbursement this Period	
Pioneer Political Action Committee	ž	Category/ Type		2500.00	
	ement For: 2015	Турс	7	7	
Senate	Primary General				
President	Other (specify) ▼				
State: District:	Contributio	n			
Full Name (Last, First, Middle Initial)			D		
B. Plaster for Congress			Date of Disburseme		
Mailing Address PO Box 348			06 25	2015	
Maining Address PO BOX 348	Walling Address PO Box 346			2010	
City	State Zip Code		Transaction ID : 0	DE50E666C067C3B3932	
Annapolis	MD 21404		Transaction iD : 0	/LJVE000C00/C3D3932	
Purpose of Disbursement 2016 Primary		011	Amount of Each Die	sbursement this Period	
Candidate Name			Amount of Each Dis	Spursement this Peni00	
Mark Leroy Plaster		Category/ Type		2500.00	
	ement For: 2016	.,,,,		,	
	Primary General				
President	Other (specify) ▼				
State: MD District: 03					
Full Name (Last, First, Middle Initial)			Date of District		
C. Portman for Senate Committee			Date of Disburseme		
Mailing Address 9856 Archer Lane			05 28	2015	
g 3000 Alono Lane					
City	State Zip Code		Transaction ID · 7	4644C7904D1C6B979F	
Dublin	OH 43017-8914		Transaction ID . I	.5776100101013131	
Purpose of Disbursement 2016 Primary		011	, , , , - ,		
Candidate Name			Amount of Each Dis	sbursement this Period	
Rob J. Portman		Category/ Type		2500.00	
	ement For: 2016	71		7	
X Senate	Primary General				
President	Other (specify) ▼				
State: OH District:					
				7500.00	
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ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	21b	22 🗙 23	24 25 26
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NAME OF COMMITTEE (In Full)	• •			
National Emergency Medicine Polit	ical Action Commit	ttee		
Full Name (Last, First, Middle Initial)				
A. Price for Congress			Date of Disburseme	ent
Mailing Address PO Box 425			04 / 23	2015
City	State Zip Code			
	GA 30077		Transaction ID : D	99034459B68C3C3428A
Purpose of Disbursement 2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2500.00
Thomas E. Price M.D. Office Sought: House Disbursem	nent For: 2016	Туре	7	7
Senate	Primary General Other (specify) ▼			
State: GA District: 06				
Full Name (Last, First, Middle Initial)				
B. Price for Congress			Date of Disburseme	ent
Mailing Address PO Box 425			05 / 28	2015
City	State Zip Code		Transaction ID . 6	A3A8401EF3B02A0A8
	GA 30077		Transaction ID . 0	ASA04UTEF3BUZAUA0
Purpose of Disbursement 2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2500.00
Thomas E. Price M.D.		Type		2500.00
Senate	nent For: 2016 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Promoting Our Republican Team P	AC		Date of Disburseme	ent
Mailing Address 8331 Little Harbor Drive			03 19	2015
,	State Zip Code		Transaction ID: 0	B79392B34DF5AE4137
Cincinnati Purpose of Disbursement	OH 45244-2768			
2015 Contribution		011	Amount of Each Die	sbursement this Period
Candidate Name		Category/	Amount of Each Dis	soursement this renot
Promoting Our Republican Team P	PAC	Type		5000.00
Senate	nent For: 2015 Primary General Other (specify) Contribution		,	,
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\	NAME OF COMMITTEE (In Full)	o and address of any pointed		Conditional Participation Continues.		
\rangle	National Emergency Medicine Polit	ical Action Committe	ee			
_	Full Name (Last, First, Middle Initial)			D . (D)		
Α.	Rely on Your Beliefs Fund			Date of Disbursement		
	Mailing Address 209 Pennsylvania Avenue, SE		03 26 2015			
	City		Transaction ID: 955C3A1DE317C2BA5E8			
	· · · · · · · · · · · · · · · · · · ·	DC 20003		Transaction ID . 33303ATDE31702DA3E0		
	Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursement this Period		
	Candidate Name		Category/	5000.00		
	Rely on Your Beliefs Fund		Type	5000.00		
	Senate	nent For: 2015 Primary General Other (specify)				
	State: District:	Contribution				
	Full Name (Last, First, Middle Initial)					
В.	Republican Mainstreet Partnership	PAC		Date of Disbursement		
	Mailing Address C/O G & W 2201 Wisconsin Ave., N Suite 320			01 29 2015		
	Washington	tate Zip Code DC 20007		Transaction ID : F17CDE4647B5E4AA7F2		
	Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursement this Period		
	Candidate Name		Category/			
	Republican Mainstreet Partnership	PAC	Type	5000.00		
	Office Sought: House Disbursem	20.0				
		Primary General				
	State: District:	Other (specify) ▼ Contribution				
	Full Name (Last, First, Middle Initial)					
C.	Republicans Inspiring Success & Empowerr	nent Project (RISE PROJ	ECT)	Date of Disbursement		
	Mailing Address PO Box 2485			05 19 2015		
	City	state Zip Code		Transaction ID : 6937376C7A6898FC537		
		VA 22152		Transaction iD . 093/3/00/A0090FC33/		
	Purpose of Disbursement 2015 Contribution		011	Amount of Each Disbursement this Period		
	Candidate Name Republicans Inspiring Success & Empowerment Pro	ject (RISE PROJECT)	Category/ Type	2500.00		
	Office Sought: House Disbursem	nent For: 2015				
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Α.	Richard Hanna for Congress Comn	nittee					Disburs				
	Mailing Address PO Box 118					05		4	2015		
	City	State	Zip Code								
		NY	13503-0118			Transa	action II): 8C0E9	C02C28	12238BE	D
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	Richard L. Hanna			Category/ Type					1:	500.00	
	Office Sought: House Disbursem		2016								
		Primary	General								
	State: NY District: 22	Other (spe	ecity) 🔻								
	Full Name (Last, First, Middle Initial)										
В.	Rob Wittman for Congress					Date of	Disburs	ement			
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	Mailing Address PO Box 999					03		04	2018		
	City	State	Zip Code			Trans	action II) · 125F6	462278E	C16BCB	BΑ
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_	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial)	nent For: Primary	2016 General	Category/	<u>'</u>	Amount	of Each	Disburs	ement th	is Period	
С.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01	nent For: Primary	2016 General	Category/	<u>'</u>	Amount Date of	of Each	Disburse	ement th	is Period	
— С.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial)	nent For: Primary	2016 General	Category/	<u>'</u>	Amount	of Each	Disburs	ement th	is Period	
c .	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871	nent For: Primary Other (spe	2016 General ecify)	Category/	<u>'</u>	Date of	of Each	Disburso	ement th	is Period	
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С.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City S Lawrenceville Purpose of Disbursement	nent For: Primary Other (spe	2016 General ecify) ▼ Zip Code	Category/ Type	'	Date of 03	Disburs	Disburso	2015	is Period	BF
<u> </u>	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City State: Va Disbursement 2016 Primary	nent For: Primary Other (spe	2016 General ecify) ▼ Zip Code	Category/ Type	- -]	Date of 03	Disburs	Disburso	2015	is Period	BF
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C.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City State: Va Disbursement 2016 Primary Candidate Name Robert Woodall	nent For: Primary Other (spe	Zip Code 30046-1871	Category/ Type	- -]	Date of 03	Disburs	Disburso	y y 2015 70DCD8	is Period 000.00 FB63BCI	BF
C.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City Stawrenceville Purpose of Disbursement 2016 Primary Candidate Name Robert Woodall Office Sought: House Senate Senate	nent For: Primary Other (spe State GA	2016 General ecify) ▼ Zip Code 30046-1871 2016 General	Category/ Type 011 Category/	- -]	Date of 03	Disburs	Disburso	y y 2015 70DCD8	is Period 000.00 FB63BCI	BF
C.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City State: Va Disbursement 2016 Primary Candidate Name Robert Woodall Office Sought: House Senate President Senate President Disbursement Disbursem	nent For: Primary Other (spe	2016 General ecify) ▼ Zip Code 30046-1871 2016 General	Category/ Type 011 Category/	- -]	Date of 03	Disburs	Disburso	y y 2015 70DCD8	is Period 000.00 FB63BCI	BF
C.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City Stawrenceville Purpose of Disbursement 2016 Primary Candidate Name Robert Woodall Office Sought: House Senate Senate	nent For: Primary Other (spe State GA	2016 General ecify) ▼ Zip Code 30046-1871 2016 General	Category/ Type 011 Category/	- -]	Date of 03	Disburs	Disburso	y y 2015 70DCD8	is Period 000.00 FB63BCI	BF
C.	Montross Purpose of Disbursement 2016 Primary Candidate Name Robert Joseph Wittman Office Sought: House Senate President State: VA District: 01 Full Name (Last, First, Middle Initial) Rob Woodall for Congress Mailing Address Post Office Box 1871 City State: Va Disbursement 2016 Primary Candidate Name Robert Woodall Office Sought: House Senate President Senate President Disbursement Disbursem	nent For: Primary Other (spe	Zip Code 30046-1871 Zip Code General	Category/ Type 011 Category/ Type	- -]	Date of 03	Disburs	Disburso	y y 2015 70DCD8	is Period 000.00 FB63BCI	BF
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\rangle	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit	ical Action C	Committe	e					
	Full Name (Last, First, Middle Initial)								
Α.	Rodney for Congress				Date of	Disburse		Y	Υ
	Mailing Address PO Box 344				03	19	9	2015	
	City S Taylorville	State Zip (Code 68-0344		Trans	action ID	: A8A6905	3C5114D	AD7F6
	Purpose of Disbursement 2016 Primary			011	Amount	of Each	Disburseme	ent this F	Period
	Candidate Name Rodney Lee Davis		"	Category/ Type				1000	.00
	Office Sought: House Disbursen	nent For: 2016 Primary Other (specify)	General	,,		,	·		
_	Full Name (Last, First, Middle Initial)								
В.	Rodney for Congress				Date of	Disburse		YYY	Y
	Mailing Address PO Box 344				04	23		2015	
	Taylorville	State Zip (IL 6256	Code 68-0344		Trans	action ID	: EA17F9E	C410313	BEEE6A
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C.	Full Name (Last, First, Middle Initial) Rodney for Congress					Disburse			
	Mailing Address PO Box 344				05	28		2015	Y
	City S Taylorville	State Zip (Code 68-0344		Trans	action ID	: 11CF222	B075886	41706
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	Candidate Name Rodney Lee Davis			Category/ Type	, tinodin	or Each	Diobardonie	3000	
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	NAME OF COMMITTEE (In Full)										
$ \rangle$	National Emergency Medicine Poli	tical Action Commi	ttee								
\angle	Full Name (Last, First, Middle Initial)										
A.	Roskam for Congress Committee				Date	of Dis	sburse	ment			
					M	M /	D	D /	Υ	YY	Υ
	Mailing Address PO Box 713				0	6	10)	2	2015	
	City	State Zip Code									
	Wheaton	IL 60187			Tra	nsacti	ion ID	: E9D4	8BC6	CD44[AC2709
	Purpose of Disbursement		_								
	2016 Primary			011	Amo	unt of	Each	Disbur	semer	nt this	Period
	Candidate Name			egory/			-			1000	0.00
	Peter James Roskam	want Fam. 00:5	Т	ype	_	-	7			1000	
		ment For: 2016 Primary General									
	President	Other (specify)									
	State: IL District: 06	(- /)									
	Full Name (Last, First, Middle Initial)										
В.	Roskam for Congress Committee				Date	of Dis	sburse	ment			
						M /	D			Y	Υ
	Mailing Address PO Box 713				0	6	2	5	2	2015	
	City	State Zip Code									
	Wheaton	IL 60187			Tra	nsact	ion ID	: 7581	81FD4	407DE	E8EBCC
	Purpose of Disbursement 2016 Primary			-	Π.						
	Candidate Name			011	Amo	unt of	Each	Disbur	semer	nt this	Period
	Peter James Roskam			egory/ ype						1500	0.00
		ment For: 2016	'	ype			,				
		Primary General									
	President	Other (specify) ▼									
	State: IL District: 06										
_	Full Name (Last, First, Middle Initial)					,					
C.	Rothfus for Congress						sburse	_			
	Mailing Address PO Box 435				O		2			2015	Y
	maining reactors 1 0 Box 400						-	-		.0.0	
	City	State Zip Code			Tra	nsact	ion ID	· 0F24	D67F	67F96	C3D6D6
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	Candidate Name				Amo	unt of	Eacn	Disbur	semer	it this	Period
	Keith James Rothfus			egory/ ype						1000	0.00
	Office Sought: House Disburser	ment For: 2016					,				
	Senate	Primary General									
	President	Other (specify) ▼									
_	State: PA District: 12										
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\setminus	NAME OF COMMITTEE (In Full)		71								
$ \rangle$	National Emergency Medicine Polit	ical Act	ion Commit	tee							
_	Full Name (Last, First, Middle Initial)					_					
A.	Ryan Costello for Congress						f Disburs	sement	V	Y	V
	Mailing Address PO Box 3154					05		28		015	Y
		State	Zip Code			Trans	action I	D : 351F	4AFF1	797374	4FEAA
	West Chester Purpose of Disbursement	PA	19381-3154								
	2016 Primary			Г	011	Amoun	t of Eac	h Disbur	semen	t this F	Period
	Candidate Name			Ca	tegory/				-	1000	00
	Ryan A. Costello				Туре		7		7	1000	.00
		nent For: Primary Other (spe	General								
	State: PA District: 06										
	Full Name (Last, First, Middle Initial)										
В.	Ryan for Congress, Inc.					Date of	f Disburs		V	Y	V
	Mailing Address PO Box 1488					03		04		015	Y
	Janesville	State WI	Zip Code 53547-1488			Trans	action I	D : 3CB	8DF5E	271750)273E9
	Purpose of Disbursement 2016 Primary			Г	011	Amoun	t of Eac	h Disbur	semen	t this F	Period
	Candidate Name			Ca	tegory/					1500	.00
	Paul Davis Ryan Jr.				Туре		7		7	1500	.00
		nent For: Primary Other (spe	General								
	Full Name (Last, First, Middle Initial)										
C.	Scalise for Congress					Date of	Disbur	sement			
	Mailing Address PO Box 23219					04	/ D	16		015	Y
	City S Jefferson	State LA	Zip Code 70183-3219			Trans	action I	D : B741	042D8	E503F	2F022
	Purpose of Disbursement		70100 0210								
	2016 Primary			L.	011	Amoun	t of Eac	h Disbur	semen	t this F	Period
	Candidate Name				tegory/				-	2500	00
	Stephen Joseph Scalise Office Sought:	F			Туре		- 7		,	2000	.00
	Office Sought: House Disbursen	nent For: Primary Other (spe	General								
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s	SUBTOTAL of Disbursements This Page (optional)				······ >	H	7		,	5000.	.00
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\rangle	NAME OF COMMITTEE (In Full) National Emergency Medicine Polit						_
Α.	Full Name (Last, First, Middle Initial) Shore PAC				Date of Dis	sbursement	
	Mailing Address PO Box 3157				06	10 2015	
	Long Branch		Cip Code 07740		Transacti	on ID : FAA8338BCBA415455CC	;
	Purpose of Disbursement 2015 Contribution			011	Amount of	Each Disbursement this Period	
	Candidate Name Shore PAC			Category/ Type		1000.00	
	Office Sought: House Disbursen Senate	nent For: 201 Primary Other (specify	General	.,,,,			
	State: District: Full Name (Last, First, Middle Initial)		Contribution				_
В.	Simpson for Congress				Date of Dis	D D / Y Y Y Y	
	Mailing Address 1487 Parkway Drive				06	10 2015	
			ip Code 33221		Transacti	on ID: 34B292CB28BC153776C	
	Blackfoot	וט עו	53221				
	Purpose of Disbursement 2016 Primary	י טו	53221	011	Amount of	Each Disbursement this Period	
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с.	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: House Senate President Disbursen	nent For: 201 Primary	6 General	Category/	Amount of	1000.00	
— С.	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: House Senate President State: ID District: 02 Full Name (Last, First, Middle Initial)	nent For: 201 Primary	6 General	Category/		1000.00	
c .	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: Senate President State: ID District: 02 Full Name (Last, First, Middle Initial) Stabenow for US Senate Mailing Address PO Box 4945 City East Lansing	nent For: 201 Primary [Other (specify	6 General	Category/	Date of Dis	abursement	_
c.	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: House Senate President State: ID District: 02 Full Name (Last, First, Middle Initial) Stabenow for US Senate Mailing Address PO Box 4945 City East Lansing Purpose of Disbursement 2018 Primary	nent For: 201 Primary [Other (specify	General ip Code	Category/ Type	Date of Dis	1000.00 sbursement 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	_
C .	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: Senate President State: ID District: 02 Full Name (Last, First, Middle Initial) Stabenow for US Senate Mailing Address PO Box 4945 City East Lansing Purpose of Disbursement 2018 Primary Candidate Name Deborah Stabenow	nent For: 201 Primary [Other (specify	General Tip Code 48826	Category/ Type	Date of Dis	1000.00 sbursement 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
c.	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: State: ID District: 02 Full Name (Last, First, Middle Initial) Stabenow for US Senate Mailing Address PO Box 4945 City East Lansing Purpose of Disbursement 2018 Primary Candidate Name Deborah Stabenow Office Sought: House Disbursement	nent For: 201 Primary [Other (specify	General General General General General	Category/ Type 011 Category/	Date of Dis	sbursement 25 2015 on ID: D681130D1E5811AD800 Each Disbursement this Period	
C.	Purpose of Disbursement 2016 Primary Candidate Name Michael Keith Simpson Office Sought: State: ID District: 02 Full Name (Last, First, Middle Initial) Stabenow for US Senate Mailing Address PO Box 4945 City East Lansing Purpose of Disbursement 2018 Primary Candidate Name Deborah Stabenow Office Sought: House Senate President State: MI District:	nent For: 201 Primary [Other (specify State Z MI 4 ment For: 201 Primary [Other (specify	General ip Code 18826 General General	Category/ Type 011 Category/ Type	Date of Dis	sbursement 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
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\setminus	NAME OF COMMITTEE (In Full)										
	National Emergency Medicine Polit	ical Act	ion Committe	ee							
_	Full Name (Last, First, Middle Initial)										
Α.	Stabenow for US Senate					Date of	Disbur	sement			
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В.	Stand Tall America PAC (STAPAC)				Date of	Disbur	sement			
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<u> </u>	Purpose of Disbursement 2015 Contribution Candidate Name Stand Tall America PAC (STAPAC) Office Sought: House Senate President State: Full Name (Last, First, Middle Initial) Steve Israel for Congress Committee Mailing Address PO Box 1400	ent For: j Primary Other (spec	2015 General	Category	y/	Date of	f Disburs	sement	Y	1000 Y Y 2015	Period 0.00
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or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
National Emergency Medicine Political National Natio	ical Action Commi	ttee	
Full Name (Last, First, Middle Initial)			
A. Steve Israel for Congress Committee	ee		Date of Disbursement
Mailing Address PO Box 1400			06 10 2015
Walling Address FO Box 1400			00 10 2013
,	State Zip Code		Transaction ID : 2AA21F3A2D491639CAD
Melville Purpose of Disbursement	NY 11747		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Steven Jay Israel		Type	2000.00
	nent For: 2016 Primary General		
President	Other (specify)		
State: NY District: 03			
Full Name (Last, First, Middle Initial)			D
B. Stivers for Congress			Date of Disbursement
Mailing Address 4679 Winterset Drive			03 25 2015
City S Columbus	State Zip Code OH 43220-8113		Transaction ID: 25FA90FF652F3CA4831
Purpose of Disbursement			
2016 Primary Candidate Name		011	Amount of Each Disbursement this Period
Steve Stivers		Category/ Type	5000.00
	nent For: 2016	Туре	
	Primary General		
President	Other (specify) ▼		
State: OH District: 15			
Full Name (Last, First, Middle Initial) C. Ted Lieu for Congress			Date of Disbursement
rea Elea for Congress			M M / D D / Y Y Y Y
Mailing Address 6380 Wilshire Blvd #1612			03 26 2015
	State Zip Code		03 26 2015
City S Los Angeles	State Zip Code CA 90048		
City		011	03 26 2015 Transaction ID : 0B9804D38A6EA3FD5F5
City S Los Angeles Purpose of Disbursement		011	03 26 2015
City Los Angeles Purpose of Disbursement 2016 Primary Candidate Name Ted W. Lieu	CA 90048	011 Category/ Type	03 26 2015 Transaction ID : 0B9804D38A6EA3FD5F5
City Los Angeles Purpose of Disbursement 2016 Primary Candidate Name Ted W. Lieu Office Sought: House Disburser	CA 90048 nent For: 2016	Category/	03 26 2015 Transaction ID: 0B9804D38A6EA3FD5F5 Amount of Each Disbursement this Period
City Los Angeles Purpose of Disbursement 2016 Primary Candidate Name Ted W. Lieu Office Sought: House Senate Disburser	nent For: 2016 Primary General	Category/	03 26 2015 Transaction ID: 0B9804D38A6EA3FD5F5 Amount of Each Disbursement this Period
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City Los Angeles Purpose of Disbursement 2016 Primary Candidate Name Ted W. Lieu Office Sought: House Senate President Disburser	nent For: 2016 Primary General	Category/	Transaction ID: 0B9804D38A6EA3FD5F5 Amount of Each Disbursement this Period 1000.00
City Los Angeles Purpose of Disbursement 2016 Primary Candidate Name Ted W. Lieu Office Sought: House Senate President Disburser	nent For: 2016 Primary General Other (specify)	Category/ Type	03 26 2015 Transaction ID: 0B9804D38A6EA3FD5F5 Amount of Each Disbursement this Period

SCHEDULE B (FEC Form 3X)	Usa come to the	۷۰۱ - ایرام	FOR LINE I	NUMBER:		PAGE	332 O	F 340
ITEMIZED DISBURSEMENTS	Use separate sch for each category		f the					
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NAME OF COMMITTEE (In Full)								
National Emergency Medicine Polit	ical Action Co	ommitte	е					
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Full Name (Last, First, Middle Initial) A. Ted Lieu for Congress				Date of	Disburser	ment		
Ted Lied for Congress				M M	/ D		YY	Υ
Mailing Address 6380 Wilshire Blvd #1612				06	10		2015	
City	State 7:- 0-	, do						
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2016 Primary			011	Amount	of Each I	Disburseme	ent this P	eriod
Candidate Name			Category/				1000.	00
Ted W. Lieu	ant Fair SS:5		Туре		-	7	1000.	00
	nent For: 2016 Primary G	ieneral						
President	Other (specify)	ion ion di						
State: CA District: 33	(
Full Name (Last, First, Middle Initial)								
B. Tenn Political Action Committee In-	c (TENN PAC	()		Date of	Disburser	ment		
				M = M	/ D		Y	Υ
Mailing Address 228 S Washington Street Suite 115	5			04	30)	2015	
City	State Zip Co	ode				4050 (5.1		
Alexandria	VA 22314			Trans	action ID	: 12534D4I	DEBC38	SAE7C
Purpose of Disbursement 2015 Contribution			044	Δ	-4 F	Dialares		naute d
Candidate Name		L	011	Amount	ot Each I	Disburseme	ent this P	eriod
Tenn Political Action Committee Inc	: (TENN PAC	:)	Category/ Type				2500	.00
	nent For: 2015	//	Турс		,	, , ,		
		ieneral						
President	Other (specify) ▼							
State: District:		ntribution						
Full Name (Last, First, Middle Initial)	•			D-4 (Diah	mant		
C. The Eye of the Tiger Political Action	n Committee				Disburser			
Mailing Address PO Box 2485				03	04		2015	Y
,	State Zip Co			Trans	action ID	: 88A0428E	32452901	DBD49
Springfield Purpose of Disbursement	VA 22152	2-0485						
2015 Contribution			011	\max	of Each !	Disburseme	ont this D	Orio-d
Candidate Name			Category/	AIIIOUNI	oi ⊑acii l	אוואפועפוע אווטטפוע	ant unis P	enou
The Eye of the Tiger Political Actio			Type			4	2500.	00
	nent For: 2015	·				,		
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 333 OF 340
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
National Emergency Medicine Pol	tical Action Committe	ee		
Full Name (Last, First, Middle Initial)				
A. The Eye of the Tiger Political Action	on Committee		Date of Disbursem	ent
Mailing Address PO Box 2485			04 16	2015
City	State Zip Code		Transaction ID : :	2AE231B4381D25D3C4F
Springfield Purpose of Disbursement	VA 22152-0485		Transaction 12 17	
2015 Contribution		011	Amount of Each Di	sbursement this Period
Candidate Name		Category/		2500.00
The Eye of the Tiger Political Action Office Sought: House Disburse	ment For: 2015	Туре		2000.00
Senate President	Primary General Other (specify)			
State: District:	Contribution			
Full Name (Last, First, Middle Initial)				
B. The Freedom Project			Date of Disbursem	ent
Mailing Address 320 1st Street SE			01 29	2015
City Washington	State Zip Code DC 20003		Transaction ID :	D9BF866F0711145925A
Purpose of Disbursement 2015 Contribution		011	Amount of Each Di	sbursement this Period
Candidate Name		Category/		5000.00
The Freedom Project Office Sought: House Disburse	ment For: 2015	Туре		
Senate	Primary General Other (specify) ▼			
State: District:	Contribution			
Full Name (Last, First, Middle Initial) C. The Reed Committee			Date of Disbursem	ent
Mailing Address PO Box 8628			03 / 19	2015
City Cranston	State Zip Code RI 02920		Transaction ID :	7E56C16DC5A93A603A5
Purpose of Disbursement	02020			
2020 Primary		011	Amount of Each Di	sbursement this Period
Candidate Name Jack Francis Reed		Category/		1000.00
	ment For: 2020	Туре		
Senate President	Primary General Other (specify) ▼			
State: RI District:				
SUBTOTAL of Disbursements This Page (optional).		·····•		8500.00
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<u>\</u>	NAME OF COMMITTEE (In Full)	and address of any points		
		tiaal Aatian Cammitt		
	National Emergency Medicine Polit	lical Action Committ	ee	
	Full Name (Last, First, Middle Initial)			
Α.	The Richard Burr Committee			Date of Disbursement
	Mailing Address Post Office Box 5928			03 04 2015
	City	State Zip Code		
	Winston-Salem	NC 27113		Transaction ID: 69F965AF3A313877634
	Purpose of Disbursement	-		
	2016 Primary		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	1000.00
	Richard M. Burr		Type	1000.00
		nent For: 2016		
	∑ Senate ∑	Primary General		
	President	Other (specify) ▼		
	State: NC District:			
	Full Name (Last, First, Middle Initial)			
В.	Tiberi for Congress			Date of Disbursement
				M = M / D = D / Y = Y = Y
	Mailing Address 2931 E Dublin Granville Road Suite 190			05 14 2015
		State Zip Code		T (ID AEDOCODOS (504 (504 (404 (404 (404 (404 (404 (404
	Columbus	OH 43231-2098		Transaction ID : AED8902B25224705194
	Purpose of Disbursement			
	2016 Primary		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	2500.00
	Patrick Joseph Tiberi		Type	2500.00
	Office Sought: House Disbursen	nent For: 2016		
		Primary General		
	President	Other (specify) ▼		
	State: OH District: 12			
	Full Name (Last, First, Middle Initial)			
C.	Tim Murphy for Congress			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address PO Box 24551			03 04 2015
	0.1	7. 6 .		
	•	State Zip Code PA 15234		Transaction ID: 55A4B299BD13B0501FD
	Purpose of Disbursement	TA 10234		
	2016 Primary		011	Amount of Fook Dishuraneset this Device
	Candidate Name			Amount of Each Disbursement this Period
	Timothy Francis Murphy		Category/ Type	2500.00
		nent For: 2016	- 7 2 2	
		Primary General		
	President	Other (specify) ▼		
	State: PA District: 18			
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 335 OF 340
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon oriny		7 🗆
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Polit	ical Action Commit	tee		
Full Name (Last, First, Middle Initial) A. Tim Murphy for Congress			Date of Disburseme	unt
A. Tim Murphy for Congress			M M / D D	/
Mailing Address PO Box 24551			03 19	2015
,	State Zip Code PA 15234		Transaction ID: 2	95AB5DA3224BFA73A6
Pttsburgh Purpose of Disbursement	PA 15234			
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2222.22
Timothy Francis Murphy		Type		2000.00
	nent For: 2016			
Senate X	Primary General Other (specify) ▼			
State: PA District: 18	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. Tim Scott for Senate			Date of Disburseme	ent
			M M / D D	/ Y Y Y Y Y
Mailing Address 1405 Ashley River Road			01 29	2015
City	State Zip Code			
Charleston	SC 29407-5305		Transaction ID : 0	2DF87770637C07116F
Purpose of Disbursement				
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1000.00
Timothy Eugene Scott Office Sought: House Disbursen	nent For: 2016	Type		
	Primary General			
President	Other (specify) ▼			
State: SC District:				
Full Name (Last, First, Middle Initial)				
C. Tuesday Group Political Action Cor	mmittee		Date of Disburseme	
Mailing Address 209 Pennsylvania Avenue, SE			01 29	2015
Maining Address 2091 emisylvania Avenue, SE			0.1	20.0
,	State Zip Code		Transaction ID · F	C7B5445472C7D95464
Washington Purpose of Disbursement	DC 20003		Transaction is . I	010041041201000404
2015 Contribution		011	Assessment of Foods Die	de marcha de la Desta d
Candidate Name			Amount of Each Dis	sbursement this Period
Tuesday Group Political Action Co	mmittee	Category/ Type		5000.00
Office Sought: House Disbursen	nent For: 2015			
	Primary General			
	Other (specify) Contribution			
State: District:	Contribution			
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SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE I	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) National Emergency Medicine Polit			COLON COMMISSION WOLLD COMMISSION
Full Name (Last, First, Middle Initial)			B (B)
A. Upton for All of Us			Date of Disbursement
Mailing Address PO Box 490			03 04 2015
City	State Zip Code		Transaction ID : 9B97951E904BBDE6DCB
St. Joseph	MI 49085		Transaction ID . 9597931E904BBDE0DCB
Purpose of Disbursement 2016 Primary	1	011	Amount of Each Disbursement this Period
Candidate Name	l	Category/	
Fredrick Stephen Upton		Type	2500.00
	nent For: 2016 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
B. Vern Buchanan for Congress			Date of Disbursement
Mailing Address PO Box 48928			03 04 2015
Sarasota	State Zip Code FL 34230		Transaction ID: 99D4E4A33DA96876C7E
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name	l	Category/	
Vernon Gale Buchanan		Type	1000.00
	nent For: 2016 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
C. Vern Buchanan for Congress			Date of Disbursement
Mailing Address PO Box 48928			03 25 2015
,	State Zip Code		Transaction ID: 47BA1A239144A527315
Sarasota Purpose of Disbursement	FL 34230		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
Vernon Gale Buchanan Office Sought: House Disburser	nent For: 2016	Туре	
Senate President	Primary General Other (specify) ▼		
State: FL District: 16	(-Ir 3) ▼		
SUBTOTAL of Disbursements This Page (optional)			5000.00

SCHEDULE B (FEC Form 3X)		FOR LINE I		PAGE 337 OF 340
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orlin)		¬ ¬
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
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NAME OF COMMITTEE (In Full)				
National Emergency Medicine Polit	tical Action Committ	tee		
Full Name (Last, First, Middle Initial)			5	
A. Vern Buchanan for Congress			Date of Disburseme	•nt
Mailing Address PO Box 48928			05 28	2015
ag / taa			20	20.0
City	State Zip Code		Transaction ID . 5	B7D46DD9537B8A243C
Sarasota	FL 34230		Transaction iD . 5	B/ D40DD955/ B0A245C
Purpose of Disbursement 2016 Primary		011	Amount of Each Die	sbursement this Period
Candidate Name			Amount of Each Dis	spursement this Penou
Vernon Gale Buchanan		Category/ Type		1000.00
	nent For: 2016	NI	,	,
	Primary General			
	Other (specify) ▼			
State: FL District: 16				
Full Name (Last, First, Middle Initial)	(\		Date of Disburseme	ont
B. Victory in November Election PAC	(VINEPAC)		Man / Dan	/
Mailing Address 700 13th Street, NW Suite 600			04 23	2015
,	State Zip Code		Transaction ID: 3	8089C147CC90593BC70
Washington Purpose of Disbursement	DC 20005			
2015 Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		
Victory in November Election PAC		Type		2500.00
	nent For: 2015			
	Primary General			
State: President State:	Other (specify) ▼ Contribution			
Full Name (Last, First, Middle Initial)	Contribution			
C. Voice for Freedom			Date of Disburseme	ent
V 0100 101 1 100d0111			M = M / D = D	/
Mailing Address 2700 Cumberland Parkway, Suite 1	150		03 04	2015
O:4	24-4- 7:- O4-			
•	State Zip Code GA 30339		Transaction ID : A	A18972A52937210518D
Purpose of Disbursement				
2015 Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2500.00
Voice for Freedom		Туре		2500.00
	nent For: 2015 Primary General			
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NAME OF COMMITTEE (In Full) National Emergency Medicine Po	olitical Action Committe	ee	
Full Name (Last, First, Middle Initial)			
A. Volunteers for Shimkus			Date of Disbursement
Mailing Address PO Box 661			04 16 2015
City Collinsville	State Zip Code IL 62234-0661		Transaction ID : D0D2AB7302D97BBA593
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name John M. Shimkus		Category/ Type	2500.00
	sement For: 2016 ✓ Primary General Other (specify) ▼	.,,,,,,	
Full Name (Last, First, Middle Initial) B. Walberg for Congress			Date of Disbursement
Mailing Address PO Box 1362			05 28 2015
City Jackson	State Zip Code MI 49204-1362		Transaction ID: 3C77E7DF7C61142D668
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name Timothy L. Walberg		Category/ Type	1000.00
Office Sought: House Disbur	sement For: 2016 ✓ Primary General Other (specify) ▼	,,,,,,	
Full Name (Last, First, Middle Initial) C. Walberg for Congress			Date of Disbursement
Mailing Address PO Box 1362			06 25 2015
City Jackson	State Zip Code MI 49204-1362		Transaction ID : C5ADD185CB8E3C75E2A
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name Timothy L. Walberg		Category/ Type	1500.00
Office Sought: Senate President State: MI District: 07	sement For: 2016 ✓ Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)	······	5000.00
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SCHEDULE B (FEC Form 3X)		E NUMBER: PAGE 339 OF 340		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b	one) 22 🔀 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c 29 30b	
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National Emergency Medicine Polit	ical Action Committ	tee		
Full Name (Last, First, Middle Initial)			Data of Diskumannant	
A. Walden for Congress			Date of Disbursement	
Mailing Address PO Box 1091			03 04 2015	
City	State Zip Code		Transaction ID : 4DE214C39FCBDEE747A	
Hood River	OR 97031-0037		Transaction ib . 4DL214C391 CDDLL747A	
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Gregory Paul Walden		Type	2500.00	
Senate	nent For: 2016 Primary General Other (specify)			
State: OR District: 02	Cirior (opcomy)			
Full Name (Last, First, Middle Initial)				
B. Walters for Congress			Date of Disbursement	
Mailing Address C/O 8001 Irvine Center Drive, #400)		05 14 2015	
Irvine	State Zip Code CA 92618		Transaction ID: 8788D1F0923652C3639	
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Mimi K. Walters		Type	2500.00	
Senate	nent For: 2016 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Wenstrup for Congress			Date of Disbursement	
Mailing Address PO Box 9551			06 17 2015	
•	State Zip Code		Transaction ID : 97168B58EC5D747F3E1	
Cincinnati Purpose of Disbursement	OH 45209-0551			
2016 Primary		011	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Brad R. Wenstrup		Type	1000.00	
Senate	nent For: 2016 Primary General Other (specify)			
State: OH District: 02	Canon (opcomy)			
SUBTOTAL of Disbursements This Page (optional)			6000.00	
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SCHEDULE B (FEC Form 3X)		. FOR LINE	NUMBER:	PAGE 340 OF 340		
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	s) (check only	(check only one)			
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NAME OF COMMITTEE (In Full)	ic and address of any pon	ilicai committee to	Solicit Contributions in	on such committee.		
	tical Action Comm	ittoo				
National Emergency Medicine Polit	lical Action Commi	illee				
Full Name (Last, First, Middle Initial)						
A. Wild and Wonderful PAC			Date of Disburseme	ent		
Mailing Address 000 W.L., II.			M M / D D	/ Y Y Y Y Y		
Mailing Address 332 W Lee Hwy # 303			04 16	2015		
	State Zip Code					
Warrenton	VA 20186		Transaction ID : A	AFFF3527761464B856A		
Purpose of Disbursement						
2015 Contribution		011	Amount of Each Dis	sbursement this Period		
Candidate Name		Category/		5000.00		
Wild and Wonderful PAC		Type		3000.00		
	ment For: 2015					
Senate	Primary General					
State: President State:	Other (specify) ▼ Contribution	nn l				
	Contributio) i				
Full Name (Last, First, Middle Initial)			Date of Disburseme	ant		
B. Wyden for Senate						
Mailing Address 232 NE 9th Avenue			04 30	2015		
ZOZ IVE SUIT / WORLD						
City	State Zip Code		Transaction ID : 1	1E2BFAB5CC24DDA02		
Portland	OR 97232		Transaction ib . I	TEZBI ABJOOZ-DDA0Z		
Purpose of Disbursement 2016 General		044	American of Feels Di	de la constanta de la Constanta		
Candidate Name		011	Amount of Each Dis	sbursement this Period		
Ron L. Wyden		Category/		5000.00		
	ment For: 2016	Туре		,		
	Primary General					
	Other (specify)					
State: OR District:	, , , , , , , , , , , , , , , , , , ,					
Full Name (Last, First, Middle Initial)						
C.			Date of Disburseme	ent		
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Mailing Address						
City	State Zip Code					
Oity	Jiale Zip Oode					
Purpose of Disbursement						
			Amount of Each Dis	sbursement this Period		
Candidate Name		Category/				
		Type				
Office Sought: House Disburser	nent For:		,	,		
	Primary General					
President	Other (specify) ▼					
State: District:						
				10000.00		
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