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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines Utah Medical Political Action Committee 310 East 4500 South ADDRESS (number and street) Suite 500 Check if different than previously Salt Lake City, UT 84107 4250 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS NEW **AMENDED** C00003210 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Х Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 07 0 1 2010 09 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Michelle McOmber Type or Print Name of Treasurer Michelle McOmber Electronically Filed by 10 14 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/16 FEC Form 3X (Rev. 02/2003)

F	Report Covering the Period: From:	01 2010	To: 0 9 3 0 2 0 1 0
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010^{Y} Y Y		56057.53
	(b) Cash on Hand at Begining of Reporting Period	20546.97	
	(c) Total Receipts (from Line 19)	24218.75	31912.75
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	44765.72	87970.28
7.	Total Disbursements (from Line 31)	17015.13	60219.69
3.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	27750.59	27750.59
).	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	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	e committee. (see FEC FORM 1M)	

Washington, DC 20463

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 16

Write or Type Committee Name

Utah Medical Political Action Committee

Report Covering the Period:

From: 0 7

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Y Y W Y 2010

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Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	24218.75	24218.75
	(ii) Unitemized	0.00	7694.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	24218.75	31912.75
(k	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	24218.75	31912.75
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. A	Il Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(0	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Colitical Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(k	b) Levin Funds (from Schedule H5)	0.00	0.00
(c	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	24218.75	31912.75
	otal Federal Receipts ubtract Line 18(c) from Line 19)	24218.75	31912.75

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 16

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures		
2.	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	17015.13	60219.69
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17015.13	60219.69
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	17015.13	60219.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 16

 III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) Line 11(d), page 3)	24218.75	31912.75
 Contribution Refunds Line 28(d))	0.00	0.00
ontributions (other than loans) ract Line 34 from Line 33)	24218.75	31912.75
Federal Operating Expenditures Line 21(a)(i) and Line 21(b))	0.00	0.00
ts to Operating Expenditures Line 15, page 3)	0.00	0.00
perating Expenditures ract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X)

NAME OF COMMITTEE (In F Utah Medical Political Act Full Name (Last, First, Middle Henriksen Butler Mailing Address 249 So. 4 City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify)	oull) ion Committee Initial) 00 East State UT C Occupation Aggregate Y	ot be sold or used by any persons of any political committee to see any political committee to see a s	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
A. Henriksen Butler Mailing Address 249 So. 4 City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation Aggregate Y	84111 ear-to-Date ▼	Transaction ID: SA11AI.5510 Amount of Each Receipt this Period 500.00	
City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State UT C Occupation Aggregate Y	84111 ear-to-Date ▼	Transaction ID: SA11AI.5510 Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	Occupation Aggregate Y	ear-to-Date ▼	500.00	
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Y	1 1 1 1 1 1	Fundraiser	
Primary General Other (specify) ▼	al	1 1 1 1 1 1	-	
	Initial)	0 0 0 0 0 0		
Full Name (Last, First, Middle Jordan Valley Medical Center Mailing Address 3580 W. S			Date of Receipt 0 9 2 7 2 0 1 0	
City	State	Zip Code	Transaction ID: SA11AI.5512	
W. Jordan FEC ID number of contributing federal political committee.	C	84088	Amount of Each Receipt this Period 750.00 Fundraiser	
Name of Employer Receipt For: Primary General Other (specify) ▼		ear-to-Date ▼ 750.00		
Full Name (Last, First, Middle Tanner Clinic Mailing Address 380 No. 4			Date of Receipt	
City	State	Zip Code	0 9 27 2010 Transaction ID: SA11Al.5514	
Kaysville FEC ID number of contributing federal political committee.	UT C	84037	Amount of Each Receipt this Period 1500.00	
Name of Employer	Name of Employer Occupation			
Receipt For: Primary General Other (specify)		ear-to-Date ▼ 1500.00		
SUBTOTAL of Receipts This Pa	ge (optional)		2750.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/16 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Utah Medical Political Action Com	and Statements may not be sold or used by any perso ig the name and address of any political committee to imittee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Utah medical Assoc Mailing Address 310 E. 4500 so. City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer	State Zip Code UT 84107 C Occupation	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 11604.00	
Full Name (Last, First, Middle Initial) Utah medical Assoc Mailing Address 310 E. 4500 so. City Salt Lake City FEC ID number of contributing	State Zip Code UT 84107	Date of Receipt M M
Receipt For: Primary Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 18604.00	Dues Contributions
Full Name (Last, First, Middle Initial) Utah medical Assoc Mailing Address 310 E. 4500 so. City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code UT 84107 C Occupation Aggregate Year-to-Date 21554.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	13860.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 16 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Utah Medical Political Action Commit	Statements may not be sold or used by any person e name and address of any political committee to	
Full Name (Last, First, Middle Initial) Utah medical Assoc Mailing Address 310 E. 4500 so. City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code UT 84107 C Occupation Aggregate Year-to-Date 27089.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: SA11AI.5521 Amount of Each Receipt this Period 5535.00 Dues contributions
Full Name (Last, First, Middle Initial) Utah medical Assoc Mailing Address 310 E. 4500 so. City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code UT 84107 C Occupation Aggregate Year-to-Date 27449.00	Date of Receipt M M M / D D / Y Y Y Y Y O 9
Full Name (Last, First, Middle Initial) Utah medical Assoc Mailing Address 310 E. 4500 so. City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code UT 84107 C Occupation Aggregate Year-to-Date 27662.75	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	6108.75

A.

FOR LINE NUMBER: PAGE 9/16 **SCHEDULE A (FEC Form 3X)** Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) Utah Medical Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Utah Radiology Mailing Address 283 E. 930 So. 09 27 2010 City State Zip Code Transaction ID: SA11AI.5516 Orem UT 84058 Amount of Each Receipt this Period FEC ID number of contributing C 1500.00 federal political committee. Fundraiser Name of Employer Occupation Receipt For: Aggregate Year-to-Date Primary General 1500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	>	1500.00
TOTAL This Period (last page this line number only)	•	24218.75

Temizer Disbursement	ny Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee Full Name (Last, First, Middle Initial) American Medical Political Action Committ Mailing Address 1101 Vermont Ave., NW City Chicago, Purpose of Disbursement Comissions Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) American Medical Political Action Committ	ents may not and address eee State IL ment For: Primary Other (spec	Zip Code 20005	21b 27 d by any person for a committee to so	22 23 24 25 25 28a 28b 28c X 29 5 2 28a 28b 28c X 29 5 2 28c X 29 5 2 28c X 29 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
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City State Zip Code Chicago, Purpose of Disbursement Comissions Candidate Name Office Sought: House President Primary General Primary General Disbursement Mailing Address 1101 Vermont Ave., NW City State Zip Code Chicago, Purpose of Disbursement City State Zip Code Chicago, Purpose of Disbursement Chicago, Purpose of Disbursement Category/ Type Transaction ID: SB29.5554 Date of Disbursement Mailing Address 1101 Vermont Ave., NW City State Zip Code Chicago, Purpose of Disbursement Comissions Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Perio Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Other (specify) ▼ Other (specify) ▼	Mailing Address 1101 Vermont Ave., NW				M M / D D / V V V	
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\rangle	NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee			
<u></u>	Full Name (Last, First, Middle Initial) American Medical Political Action Commit	tee		Transaction ID: SB29.5555 Date of Disbursement
	Mailing Address 1101 Vermont Ave., NW	099 / 030 / 2010		
	City Chicago,	State Zip Code IL 20005		Amount of Each Disbursement this Perio
	Purpose of Disbursement Comissions			1970.00
	Candidate Name	ement For:	Catego Type	
	Senate President	Primary Ger Other (specify)	ieral	
	State: District: Full Name (Last, First, Middle Initial) Brad L. Dee			Transaction ID: SB29.5550 Date of Disbursement
	Mailing Address 111 W. 5600 so.		09 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Ogden	State Zip Code UT 84405		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution			500.00
	Candidate Name		Catego Type	
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Ger Other (specify) ▼	eral	
	Full Name (Last, First, Middle Initial) Brad Wilson			Transaction ID: SB29.5528 Date of Disbursement
	Mailing Address 1423 W. Whispering Me	adow Lane		088 / 017 / 2010
	City Kaysville	State Zip Code UT 84041		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution Candidate Name		Catego	300.00
	Sandad Harro		Туре	
	Office Cought: House Dishure	amant Fari		
	Office Sought: House Disburs	ement For: Primary Ger Other (specify)	eral	

West Valley City Purpose of Disbursement Contribution Candidate Name Category/ Type Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Dan Liljenquest Mailing Address 553 S. Davis Blvd Transaction ID: SB29.5536 Date of Disbursement M M M M M M M M M M M M M M M M M M M		Use separate sched	ule(s) (chock or	E NUMBER: PAGE 12 / 16
NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Villah Medical Political Action Committee Full Name (Last, First, Middie Initial) Brent H. Goodfellow Malling Address 3620 S. 6000 W City Vest Valley City Vest Valley City Very State UT 84128 Purpose of Disbursement Contribution Candidate Name Office Sought: Full Name (Last, First, Middie Initial) Dan Liljenquest Malling Address 553 S. Davis Blvd City State UT 84100 City Senate President Disbursement For: Senate President Other (specify) ▼ Transaction ID: SB29,5536 Date of Disbursement this Peri Amount of Each Disbursement this Peri Transaction ID: SB29,5536 Date of Disbursement Office Sought: Full Name (Last, First, Middie Initial) Dan Liljenquest Malling Address 553 S. Davis Blvd City Bountiful Caregory/ Type Office Sought: Full Name (Last, First, Middie Initial) Dean Sanpei Office Sought: Full Name (Last, First, Middie Initial) Dean Sanpei Malling Address 2145 N, 1450 E. City State: Disbursement For: Senate President Other (specify) ▼ Transaction ID: SB29,5536 Date of Disbursement this Peri Amount of Each Disbursement this Peri Transaction ID: SB29,5536 Date of Disbursement Office Sought: Transaction ID: SB29,5536 Date of Disbursement this Peri Transaction ID: SB29,5536 Date of Disbursement this Peri Amount of Each Disbursement this Peri Amount of Each Disbursement this Peri 300.00 Office Sought: House Office Sought: House Disbursement For: Senate President Other (specify) ▼ Office Sought: House Disbursement For: Senate President Other (specify) ▼ Transaction ID: SB29,5536 Date of Disbursement this Peri Amount of Each Disbursement this Peri Senate Other (specify) ▼		Detailed Summary F	Page 21b	22 23 24 25 28 28a 28b 28c X 29
Brent H. Goodfellow Mailing Address 3620 S. 6000 W City State Zip Code West Valley City UT 84128 Purpose of Disbursement Contribution Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City Senate Primary General Other (specify) ▼ Category/ Type Office Sought: House Disbursement For: Primary General Other (specify) ▼ City Senate Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Disbursement For: Primary General Other (specify) ▼ City State: Disbursement For: Disbursement	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ame and address of any p		
Brent H. Goodfellow Mailing Address 3620 S. 6000 W	/			Transaction ID: SR29 5540
City West Valley City UT 84128 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President UT 84010 City Burntful UT 84010 Cartifoction Candidate Name City State Zip Code Burntful UT 84010 Cartifoction Candidate Name Office Sought: House Senate President UT 84010 City Burntful UT 84010 Category/ Type Office Sought: House Senate President UT 84010 City Burntful UT 84010 Category/ Type Office Sought: House President Other (specify) ▼ Transaction ID: SB29.5536 Date of Disbursement this Peri Manual President Other (specify) ▼ Amount of Each Disbursement this Peri Viva Viva Viva Viva Viva Viva Viva Viv		Date of Disbursement		
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Office Sought:	Contribution			350.00
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City Bountiful State Zip Code Bountiful Boundiful Bound				Date of Disbursement
Bountiful UT 84010 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Dean Sanpei Mailing Address 2145 N. 1450 E. City State Zip Code Provo UT 84604 Purpose of Disbursement Contribution Candidate Name Office Sought: House Disbursement For: Sanate Primary General Other (specify) ▼ Amount of Each Disbursement this Perion 300.00 Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Office Sought: Primary General Other (specify) ▼	Mailing Address 553 S. Davis Blvd	0 9 1 2 2 7 2 0 1 0		
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City State Zip Code Provo UT 84604 Purpose of Disbursement contribution Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify)	Dean Sanpei			Date of Disbursement
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Office Sought: Disbursement For: Senate Primary Other (specify)	contribution			300.00
Senate Primary General President Other (specify) ▼	Candidate Name			
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	NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee					
	Full Name (Last, First, Middle Initial) Friends of Jim Nielson			Date	saction ID: SE of Disbursemen	
	Mailing Address 331 E. 1900 So.	0 8	^M / ^D 2 6	Ž O Ĭ O Š		
	City Bountiful	State Zip Code UT 84010		Amoi	unt of Each Disb	oursement this Per
	Purpose of Disbursement contribution					250.00
	Candidate Name		Categor Type	ry/		
	Senate President	rsement For: Primary Gene Other (specify)	eral			
	State: District: Full Name (Last, First, Middle Initial)			Trans	saction ID: SE	220 5549
	Gage Froerer			Date	of Disbursemen	t
	Mailing Address P.O. Box 379			0 9	M / D 2 2	^Y 2010 ^Y
	City Huntsville	State Zip Code UT 84317		Amor	unt of Each Disb	oursement this Per
	Purpose of Disbursement Contribution					250.00
	Candidate Name		Categor Type	ry/		
	Office Sought: House Disbu Senate President State: District:	rsement For: Primary Gene Other (specify) ▼	eral			
	Full Name (Last, First, Middle Initial) Gene Davis			Date	saction ID: SE of Disbursemen	t
	Mailing Address 865 Parkway Ave.			0 9	M / D 2 2	^y 2010 ^y
	City Salt Lake City	State Zip Code UT 84106		Amoi	unt of Each Disb	oursement this Per
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NAME OF COMMITTEE (In Full) Utah Medical Political Action Commi	ttee		
Full Name (Last, First, Middle Initial) House Democrats			Transaction ID: SB29.5522 Date of Disbursement
Mailing Address 310 E.4500 So.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City SLC	State Zip Code UT 84107		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			250.00
Candidate Name Office Sought: House Di	sbursement For:	Category/ Type	_
Senate President	Primary Gene Other (specify) ▼	ral	
State: District:			
Full Name (Last, First, Middle Initial) Jerry Stevenson			Transaction ID: SB29.5544 Date of Disbursement
Mailing Address 466 S. 1700 W			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Layton	State Zip Code UT 84041		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			600.00
Candidate Name		Category/ Type	
Senate President	sbursement For: Primary Gene Other (specify)	ral	
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: SB29.5534
Jim Dunnigan Mailing Address 3105 W. 5400 So.	Sto 6		Date of Disbursement O 8 3 1 2 0 1 0
City	State Zip Code		Amount of Each Disbursement this Period
Taylorsville Purpose of Disbursement	UT 84118		300.00
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Senate	sbursement For: Primary Gene Other (specify)	Type	
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\rangle	NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee					
	Full Name (Last, First, Middle Initial) Keith Grover				Transaction ID: SB: Date of Disbursement	29.5526
	Mailing Address 1374 W. 1940 N				08 / 17 /	^Y 2010 Y
	City Provo	State Zip Code UT 84604	_		Amount of Each Disbu	
	Purpose of Disbursement Campaign Contribution					500.00
	Candidate Name			ategory/ Type		
	Senate President	ement For: Primary General Other (specify)				
	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: SB	29.5546
	Margaret Dayton				Date of Disbursement 0 9 2 2	^Y ^Y ^Y ^Y ^Y ^Y ^Y ^Y
	Mailing Address 97 West Westview Drl				09 22	2010
	City Orem	State Zip Code UT 84058			Amount of Each Disbu	
	Purpose of Disbursement Contribution					1000.00
	Candidate Name			itegory/ Type		
	Office Sought: Senate President State: Disburs Disburs	ement For: Primary General Other (specify)				
	Full Name (Last, First, Middle Initial) Patricia Jones				Transaction ID: SB: Date of Disbursement	
	Mailing Address 4571 Sycamore Dr.				09 4 22 7	^Y 2010 ^Y
	City Salt Lake City	State Zip Code TN 84117			Amount of Each Disbu	
	Purpose of Disbursement Contribution Candidate Name			* * *		600.00
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President District:

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NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee					
Full Name (Last, First, Middle Initial) Utah Medical Association Mailing Address 310 E. 4500 So. Ste 500		Transaction ID: SB29.5525 Date of Disbursement O 9 M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
SLC	State Zip Code UT 84107	Amount of Each Disbursement this Period			
Purpose of Disbursement PAC Lunch for Annual House of Delegates Meeting Candidate Name	Category/				
Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)				
Full Name (Last, First, Middle Initial) Utah Senate Republican Campaign Comm	ittee	Transaction ID: SB29.5524 Date of Disbursement 0 9			
Mailing Address 1220 Harrison Ave		09 29 2010			
	State Zip Code UT 84105	Amount of Each Disbursement this Period			
Purpose of Disbursement Contribution Candidate Name	Category/	1350.00			
Office Sought: House Disburse Senate President	Туре				

SUBTOTAL of Disbursements This Page (optional)	•	4827.63
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