FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

COMMUNITY ONCOLOGY ALLIANCE PAC

ADDRESS (number and street) ▼ 1101 Pennsylvania Avenue SW

☐ Check if different than previously reported. (ACC)

Washington | DC | 20004 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00383976

3. IS THIS REPORT ☐ NEW (N) **OR** ☒ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Diaz

Signature of Treasurer *Michael Diaz* ***[Electronically Filed]*** Date 05 / 09 / 2016

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 Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

COMMUNITY ONCOLOGY ALLIANCE PAC

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		38283.76
(b) Cash on Hand at Beginning of Reporting Period	145130.19	
(c) Total Receipts (from Line 19)	10166.56	180418.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	155296.75	218702.60
7. Total Disbursements (from Line 31)	42884.31	106290.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	112412.44	112412.44
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

COMMUNITY ONCOLOGY ALLIANCE PAC

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	8799.90	178483.22
(ii) Unitemized	366.66	866.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	9166.56	179349.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	9166.56	179349.88
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	68.96
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	10166.56	180418.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	10166.56	180418.84

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	12492.40	25398.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	12492.40	25398.25
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	30000.00	80500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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
29. Other Disbursements	391.91	391.91
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	42884.31	106290.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	42884.31	106290.16

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	9166.56	179349.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9166.56	179349.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	12492.40	25398.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	68.96
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	12492.40	25329.29

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **F3XA**
Transaction ID :

Beginning cash balance was off at start of year due to prior year balances being off. Form 99 was filed explaining this difference. Also, amended 2nd qtr return which resulted in cash balance at end of year being off from the qtr beginning of period balance which was corrected here.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[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)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Ralph Boccia
Mailing Address: 6410 Rockledge Drive
City: Bethesda | State: MD | Zip Code: 20817-1809
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1666.64

Date of Receipt: 08 / 05 / 2015
Transaction ID : 9934633
Amount of Each Receipt this Period: 1249.98
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): Bruce Burns
Mailing Address: 1062 Forsyth Street
City: Macon | State: GA | Zip Code: 31201-8637
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1666.64

Date of Receipt: 08 / 05 / 2015
Transaction ID : 9934634
Amount of Each Receipt this Period: 1249.98
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta | State: GA | Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1400.00

Date of Receipt: 08 / 05 / 2015
Transaction ID : 9934635
Amount of Each Receipt this Period: 600.00
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 3099.96

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta | State: GA | Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1600.00
Date of Receipt: 09 / 17 / 2015
Transaction ID : 9934636
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
PayPal

B. Full Name (Last, First, Middle Initial): Mark Santos
Mailing Address: 112 Windcrest Court
City: Jersey Village | State: TX | Zip Code: 77064-3473
FEC ID number of contributing federal political committee: C
Name of Employer: ION GOP | Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 05 / 2015
Transaction ID : 9934637
Amount of Each Receipt this Period: 500.00
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Ralph Boccia
Mailing Address: 6410 Rockledge Drive
City: Bethesda | State: MD | Zip Code: 20817-1809
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2083.30
Date of Receipt: 09 / 17 / 2015
Transaction ID : 9934638
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 1116.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Bruce Burns
Mailing Address: 1062 Forsyth Street
City: Macon | State: GA | Zip Code: 31201-8637
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2083.30
Date of Receipt: 09 / 17 / 2015
Transaction ID : 9934639
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

B. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta | State: GA | Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1800.00
Date of Receipt: 10 / 08 / 2015
Transaction ID : 9934640
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta | State: GA | Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF | Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2000.00
Date of Receipt: 10 / 29 / 2015
Transaction ID : 9934641
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 816.66

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta State: GA Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2200.00
Date of Receipt: 11 / 15 / 2015
Transaction ID : 9934642
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
PayPal

B. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta State: GA Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2400.00
Date of Receipt: 11 / 29 / 2015
Transaction ID : 9934643
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta State: GA Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2600.00
Date of Receipt: 12 / 29 / 2015
Transaction ID : 9934644
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Ralph Boccia
Mailing Address: 6410 Rockledge Drive
City: Bethesda State: MD Zip Code: 20817-1809
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2499.96
Date of Receipt: 10 / 08 / 2015
Transaction ID : 9934645
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

B. Full Name (Last, First, Middle Initial): Ralph Boccia
Mailing Address: 6410 Rockledge Drive
City: Bethesda State: MD Zip Code: 20817-1809
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2916.62
Date of Receipt: 11 / 01 / 2015
Transaction ID : 9934646
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Ralph Boccia
Mailing Address: 6410 Rockledge Drive
City: Bethesda State: MD Zip Code: 20817-1809
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3333.28
Date of Receipt: 12 / 01 / 2015
Transaction ID : 9934647
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 1249.98

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Bruce Burns
Mailing Address: 1062 Forsyth Street
City: Macon State: GA Zip Code: 31201-8637
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2499.96
Date of Receipt: 10 / 08 / 2015
Transaction ID : 9934648
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

B. Full Name (Last, First, Middle Initial): Bruce Burns
Mailing Address: 1062 Forsyth Street
City: Macon State: GA Zip Code: 31201-8637
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2916.62
Date of Receipt: 11 / 01 / 2015
Transaction ID : 9934649
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Bruce Burns
Mailing Address: 1062 Forsyth Street
City: Macon State: GA Zip Code: 31201-8637
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3333.28
Date of Receipt: 12 / 01 / 2015
Transaction ID : 9934650
Amount of Each Receipt this Period: 416.66
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 1249.98

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Nicolas Ferreyros
Mailing Address: 95 Worth Street, Apt 9C
City: New York | State: NY | Zip Code: 10013-6705
FEC ID number of contributing federal political committee: C
Name of Employer: Community Oncololy Alliance
Occupation: Director, Communications
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 / 11 / 2015
Transaction ID : 9934651
Amount of Each Receipt this Period: 500.00
[ ] Memo Item
PayPal

B. Full Name (Last, First, Middle Initial): Kathy Oubre
Mailing Address: 120 Lakeview Circle
City: Covington | State: LA | Zip Code: 70433-7512
FEC ID number of contributing federal political committee: C
Name of Employer: Pontchartrain Hematology Oncol
Occupation: Practice Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 249.99
Date of Receipt: 11 / 26 / 2015
Transaction ID : 9934654
Amount of Each Receipt this Period: 83.33
[ ] Memo Item
PayPal

C. Full Name (Last, First, Middle Initial): Kathy Oubre
Mailing Address: 120 Lakeview Circle
City: Covington | State: LA | Zip Code: 70433-7512
FEC ID number of contributing federal political committee: C
Name of Employer: Pontchartrain Hematology Oncol
Occupation: Practice Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.32
Date of Receipt: 12 / 29 / 2015
Transaction ID : 9934655
Amount of Each Receipt this Period: 83.33
[ ] Memo Item
PayPal

SUBTOTAL of Receipts This Page (optional) ▶ 666.66

TOTAL This Period (last page this line number only) ▶ 8799.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A.
Full Name (Last, First, Middle Initial): Whitfield For Congress Committee
Mailing Address: P.O. Box 391
City: Hopkinsville State: KY Zip Code: 42241
FEC ID number of contributing federal political committee: C C00289983
Name of Employer:
Occupation:
Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 07 / 2015
Transaction ID : 9938823
Amount of Each Receipt this Period: 1000.00
☐ Memo Item
Refund of Contribution - Candidate Not Running

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 1000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Community Oncology Alliance, Inc.
Mailing Address: 1101 Pennsylvania Avenue, NW
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: Stationary
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 07 / D D 01 / Y Y Y Y 2015
Transaction ID : 10612903
Amount of Each Disbursement this Period: 1740.50
[ ] Memo Item
Stationary

B. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: PayPal fees for contributions made via PayPal
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 12 / D D 29 / Y Y Y Y 2015
Transaction ID : 10613443
Amount of Each Disbursement this Period: 23.62
[ ] Memo Item
PayPal fees for contributions made via PayPal

C. Full Name (Last, First, Middle Initial): Community Oncology Alliance
Mailing Address: 1101 Pennsylvania Avenue Suite 700
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement:
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 07 / D D 01 / Y Y Y Y 2015
Transaction ID : 10613444
Amount of Each Disbursement this Period: 92.40
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1856.52

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: Fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 05 / 2015
Transaction ID : 9937526
Amount of Each Disbursement this Period: 107.38
[ ] Memo Item
Fee

B. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 17 / 2015
Transaction ID : 9937527
Amount of Each Disbursement this Period: 30.86
[ ] Memo Item
Fees

C. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 08 / 2015
Transaction ID : 9937528
Amount of Each Disbursement this Period: 33.58
[ ] Memo Item
Fees

SUBTOTAL of Disbursements This Page (optional) ▶ 171.82

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 04 / 2015
Transaction ID : 9937529
Amount of Each Disbursement this Period: 27.30
[ ] Memo Item
Fees

B. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 16 / 2015
Transaction ID : 9937530
Amount of Each Disbursement this Period: 52.06
[ ] Memo Item
Fees

C. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 / 02 / 2015
Transaction ID : 9937531
Amount of Each Disbursement this Period: 39.95
[ ] Memo Item
Fees

SUBTOTAL of Disbursements This Page (optional) ▶ 119.31

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 07 / D D 10 / Y Y Y Y 2015
Transaction ID : 9937532
Amount of Each Disbursement this Period: 10.00
[ ] Memo Item
Fees

B. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 04 / Y Y Y Y 2015
Transaction ID : 9937533
Amount of Each Disbursement this Period: 39.95
[ ] Memo Item
Fees

C. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 12 / Y Y Y Y 2015
Transaction ID : 9937534
Amount of Each Disbursement this Period: 20.00
[ ] Memo Item
Fees

SUBTOTAL of Disbursements This Page (optional) ▶ 69.95

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 02 / 2015
Transaction ID : 9937535
Amount of Each Disbursement this Period: 39.95
[ ] Memo Item
Fees

B. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 11 / 2015
Transaction ID : 9937536
Amount of Each Disbursement this Period: 20.00
[ ] Memo Item
Fees

C. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 02 / 2015
Transaction ID : 9937537
Amount of Each Disbursement this Period: 39.95
[ ] Memo Item
Bank Fees

SUBTOTAL of Disbursements This Page (optional) ▶ 99.90

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 13 / 2015
Transaction ID : 9937538
Amount of Each Disbursement this Period: 20.00
[ ] Memo Item
Bank Fees

B. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 03 / 2015
Transaction ID : 9937539
Amount of Each Disbursement this Period: 39.95
[ ] Memo Item
Bank Fees

C. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 12 / 2015
Transaction ID : 9937540
Amount of Each Disbursement this Period: 20.00
[ ] Memo Item
Bank Fees

SUBTOTAL of Disbursements This Page (optional) ▶ 79.95

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 02 / 2015
Transaction ID : 9937541
Amount of Each Disbursement this Period: 39.95
[ ] Memo Item
Bank Fees

B. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 10 / 2015
Transaction ID : 9937542
Amount of Each Disbursement this Period: 55.00
[ ] Memo Item
Bank Fees

C. Full Name (Last, First, Middle Initial): Community Oncology Alliance
Mailing Address: 1101 Pennsylvania Avenue Suite 700
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: PAC Software Reimbursement
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 21 / 2015
Transaction ID : 9937543
Amount of Each Disbursement this Period: 10000.00
[ ] Memo Item
PAC Software Reimbursement

SUBTOTAL of Disbursements This Page (optional) ▶ 10094.95

TOTAL This Period (last page this line number only) ▶ 12492.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Richard Burr Committee; The
Mailing Address: Post Office Box 5928
City: Winston-Salem State: NC Zip Code: 27113
Purpose of Disbursement:
Candidate Name: Richard Burr Committee; The
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 30 / 2015
Transaction ID : 10613438
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Tim Scott For Senate
Mailing Address: 1405 Ashley River Rd
City: Charleston State: SC Zip Code: 29407
Purpose of Disbursement:
Candidate Name: Sen. Tim Scott
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: SC District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 03 / 2015
Transaction ID : 10613439
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Collins For Congress
Mailing Address: PO Box 386
City: Clarence State: NY Zip Code: 14031
Purpose of Disbursement:
Candidate Name: Christopher Collins
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 27
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 09 / 2015
Transaction ID : 10613440
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Devin Nunes Campaign Committee
Mailing Address: PO Box 6545
City: Visalia State: CA Zip Code: 93290
Purpose of Disbursement:
Candidate Name: Devin Nunes
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 21
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 29 / 2015
Transaction ID : 9937181
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Bill Cassidy For Us Senate
Mailing Address: PO Box 80505
City: Baton Rouge State: LA Zip Code: 70898
Purpose of Disbursement:
Candidate Name: William Cassidy
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: LA District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 28 / 2015
Transaction ID : 9937511
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Guthrie For Congress
Mailing Address: PO Box 9639
City: Bowling Green State: KY Zip Code: 42102
Purpose of Disbursement:
Candidate Name: S. Brett Guthrie
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 03 / 2015
Transaction ID : 9937512
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Cathy Mcmorris Rodgers For Congress
Mailing Address: Box 137
City: Spokane State: WA Zip Code: 99210
Purpose of Disbursement:
Candidate Name: McMorris Rodgers Cathy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 10 / D D 27 / Y Y Y Y 2015
Transaction ID : 9937513
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Cathy Mcmorris Rodgers For Congress
Mailing Address: Box 137
City: Spokane State: WA Zip Code: 99210
Purpose of Disbursement:
Candidate Name: McMorris Rodgers Cathy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 05
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 12 / D D 22 / Y Y Y Y 2015
Transaction ID : 9937514
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Chuck Fleischmann For Congress Committee, Inc.
Mailing Address: P.O. Box 11091
City: Chattanooga State: TN Zip Code: 37401
Purpose of Disbursement:
Candidate Name: Charles Fleischmann
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 07 / D D 29 / Y Y Y Y 2015
Transaction ID : 9937515
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Whitfield For Congress Committee
Mailing Address: P.O. Box 391
City: Hopkinsville State: KY Zip Code: 42241
Purpose of Disbursement:
Candidate Name: Edward Whitfield
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 01
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 29 / 2015
Transaction ID : 9937516
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Bilirakis For Congress
Mailing Address: PO Box 606
City: Tarpon Springs State: FL Zip Code: 34688
Purpose of Disbursement:
Candidate Name: Gus Bilirakis
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 09
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 30 / 2015
Transaction ID : 9937517
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Kevin Mccarthy For Congress
Mailing Address: PO Box 12667
City: Bakersfield State: CA Zip Code: 93389
Purpose of Disbursement:
Candidate Name: Kevin McCarthy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 22
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2015
Transaction ID : 9937518
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Pat Meehan For Congress
Mailing Address: 50 S Providence Road
City: Media State: PA Zip Code: 19063
Purpose of Disbursement:
Candidate Name: Patrick Meehan
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 07
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 21 / 2015
Transaction ID : 9937519
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Pompeo For Congress, Inc.
Mailing Address: PO Box 780146
City: Wichita State: KS Zip Code: 67278
Purpose of Disbursement:
Candidate Name: Michael Pompeo
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 04
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 22 / 2015
Transaction ID : 9937520
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Renee Ellmers For Congress Committee
Mailing Address: PO Box 99567
City: Raleigh State: NC Zip Code: 27624
Purpose of Disbursement:
Candidate Name: Renee Ellmers
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 01 / 2015
Transaction ID : 9937521
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Steve Israel For Congress Committee
Mailing Address: P.O. Box 1400
City: Melville State: NY Zip Code: 11747
Purpose of Disbursement:
Candidate Name: Steve Israel
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 03 / 2015
Transaction ID : 9937522
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Friends Of Pat Toomey
Mailing Address: 228 S. Washington St., Suite 115
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement:
Candidate Name: Patrick Toomey
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: PA District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 02 / 2015
Transaction ID : 9937523
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Vern Buchanan For Congress
Mailing Address: P. O. Box 48928
City: Sarasota State: FL Zip Code: 34230
Purpose of Disbursement:
Candidate Name: Vernon Buchanan
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 13
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2015
Transaction ID : 9937525
Amount of Each Disbursement this Period: 2000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Collins For Congress
Mailing Address: PO Box 386
City: Clarence State: NY Zip Code: 14031
Purpose of Disbursement:
Candidate Name: Christopher Collins
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 27
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 30 / 2015
Transaction ID : 9937544
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): ISRAEL HUFFMAN VICTORY FUND
Mailing Address: 700 13TH STREET, NW SUITE 600
City: WASHINGTON State: DC Zip Code: 20005
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 28 / 2015
Transaction ID : 9937545
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Tim Murphy For Congress
Mailing Address: PO Box 24551
City: Pttsburgh State: PA Zip Code: 15234
Purpose of Disbursement:
Candidate Name: Tim Murphy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 18
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 12 / 2015
Transaction ID : 9937546
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A.
Full Name (Last, First, Middle Initial): Tim Murphy For Congress
Mailing Address: PO Box 24551
City: Pttsburgh State: PA Zip Code: 15234
Purpose of Disbursement:
Candidate Name: Tim Murphy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 18
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 18 / 2015
Transaction ID : 9937547
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 30000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A.
Full Name (Last, First, Middle Initial): Community Oncology Alliance
Mailing Address: 1101 Pennsylvania Avenue, Suite 700
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: Lodging
Candidate Name:
Category/Type: 002
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 13 / 2015
Transaction ID : 10612493
Amount of Each Disbursement this Period: 140.61
☐ Memo Item
Lodging

B.
Full Name (Last, First, Middle Initial): Ted Okon
Mailing Address: 30 Wintergreen Drive
City: Monroe State: CT Zip Code: 06468
Purpose of Disbursement: Mileage and Meals
Candidate Name:
Category/Type: 002
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 12 / 2015
Transaction ID : 10612852
Amount of Each Disbursement this Period: 251.30
☐ Memo Item
Mileage and Meals

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 391.91

TOTAL This Period (last page this line number only) ▶ 391.91