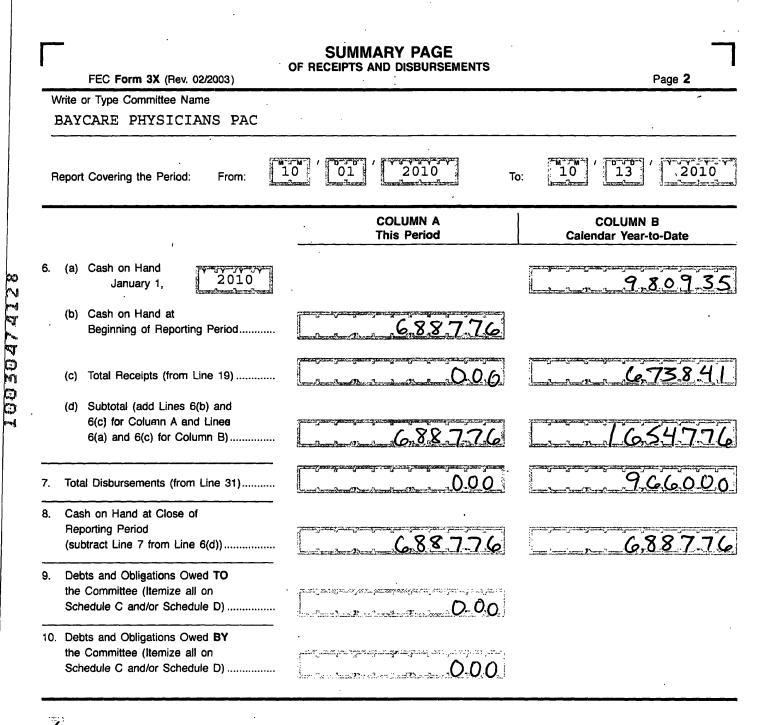
				RECEI	VED
	REPORT	OF RECEIPT	s I	2010 OCT 25	AM 11: 18
FEC FORM 3X	AND DIS	BURSEMENT	S	FEC MAIL	CENTER
	For Other Than	An Authorized Commit	tee	Office U	ise Only
1. NAME OF COMMITTEE (in fi	TYPE OR PRINT ▼	Example: If typ over the lines.	bing, type	2FE4M5	<b>7</b>
B <sub>1</sub> A <sub>1</sub> Y <sub>1</sub> C <sub>1</sub> A <sub>1</sub> R <sub>1</sub> E <sub>1</sub>	P <sub>I</sub> H <sub>I</sub> Y <sub>I</sub> S <sub>I</sub> I <sub>C</sub> I <sub>I</sub> A <sub>I</sub> N	S PAC		<u></u>	· · · · · · · · · · · · · · · · · · ·
ADDRESS (number and	street) $\begin{bmatrix} 1 & 6 & 4 & N \end{bmatrix}$	B, R, O, A, D, W, A, Y,		<u> </u>	
Check if differ than previous reported. (AC	y. JODEEN	B <sub>1</sub> A <sub>1</sub> Y <sub>1</sub>		N_I [5,4,3	0,3 <b>]</b> _[2,7,2,8]
2. FEC IDENTIFICA			ST	ATE 🛦	
C 0040770		3. IS THIS REPORT	NEW (N) <b>OR</b>	AMENDED (A)	
4. TYPE OF REP (Choose One)	DRT (b) Monthly Report   Due On:	Feb 20 (M2)	May 20 (M5) Jun 20 (M6)	Aug 20 (M8)	Nov 20 (M11) (Mon-Election Year Only) Dec 20 (M12)
(a) Quarterly Repo	irts:	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	(Non-Election Year Only)
April 15 Quarterly	Report (Q1) (C) 12-Day	innel Seerii		General (12G)	Runoff (12R)
July 15 Quarterly	Report (Q2)	ection		Special (12S)	
		2	لك · ·		
	1 Report (YE)	Election on		2010	in the State of WI
July 31 M Report (N Year Only	on-election (G) BO-Day (MY) POST-6	i maan i	0G)	Runoff (30R)	Special (30S)
Terminatio	in Report	and a state of the	/ D**- D / TY	Manana Manana Manana Manana Manana Manana Manana Manana Manana	in the State of
5. Covering Period		2010 through	10 /		
I certify that I have exactly that I have of Type or Print Name of	CHRIS AUG	e best of my knowledge and USTIAN	belief it is true,	correct and comple	ete.
Signature of Treasurer	- De Au	gÐ	Dat	e <u>10</u> ′ <u></u> č	3° ( 20) 0
	lse, arroneous, or incomplete	information may subject the pe	erson signing this		
Office Use Only					C FORM 3X Rev. 12/2004



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)

Page 3

Write or Type	Committee	Name
---------------	-----------	------

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
11.	Contributions (other than loans) From:			
	(a) Individuals/Persons Other Than Pelitical Committees	والمنابع والاستراجية والمتعود ومعاريه والمعارية والمعارية والمعارية والمعارية والمعارية والمعارية والمعارية	ىمىرىمەر بەرىبىرى سەتھە يەرىمەرمەرمەرمەرمەرمەرمەرمەرمەرمەرمەرمەر	
	(i) Itemized (use Schsdule A)	000	3.691.75	
		and the second		
	(ii) Unitemized	0.00	3,046.66	
	(iii) TOTAL (add			
	Lines 11(a)(i) and (ii)		, 6,738.4/	
	(b) Political Party Committees	، <u>المرابعة في محمد من </u>		
	(c) Other Political Committees	ر از این میرود بیروسینی مین میراند برام میراند میراند. از این میرود بیراندینی میراند میراند برام میراند میراند میراندینی از ا	<ul> <li>Laurel and an end of the second state of the second s</li></ul>	
	(such as PACs)	<u> </u>	- Hereiter werden werden die erste Beiter auf die State - Die S	
	<ul> <li>(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry</li> </ul>	الحوال حار فاجاز ويوافعها والمناقعة المالية المالية والمالية والمالية المالية والمالية والمالية والمالية والمال	י נייניניים, בייני היישה היישה ( ייני היישה היים היישה ( היישה ( היישה היישה היישה היישה היישה היישה היישה היי	
	Totals to Line 33, page 5)	D O O	6,7.38.41	
2.	Transfers From Affiliated/Other			
	Party Committees	Lange to A Donal and Berry Brown Same Same		
~	All Longe Desciond	lan dan salar dan dan san fasar Maradinan karali ina karan prantan salar dan salar pana pana pana pana pana pana pana pa		
З.	All Loans Received	Lander of Destander Barley Contractions	- Harden Briter & market Constra	
	Loan Repayments Received	l: Liera Danathan Maanilana Kanathan Bas, ali an Su, an Land	line line in the second se	
	Offsets To Operating Expenditures	hand a straight frank and the straight of the st	<u>Une deseñva</u> 2. deseñva 2. de en en	
	(Refunds, Rebates, etc.)	بيترابيين يعجدني جيئ يتبرا الحاد الحتا النبت الدار بالالتحاد	and an an an arrest the second second second	
	(Carry Totals to Line 37, page 5)	in a start and the start of the		
6.	Refunds of Contributions Made			
	to Federal Candidates and Other	الم الارام محقول المن مقافس فالمحاركة الاستراديات الماكميسينية. الم الارام المحقول المن مقافس فالمحاركة المالية ما المالية المحقول الم	erioumierio e la esta contra de la esta e	
7	Political Committees Other Federal Receipts	na an ann an 1980. Bha na amhr an 1980 an 1980 an an an San agus ann an an an ann an ann an ann an ann an a	2 <u>Lease</u> (* 1990) * State (* 1990) 10 de - Recent de la recent de la seconda de la s Seconda de la seconda de	
	(Dividends, Interest, etc.)			
8.	Transfers from Non-Federal and Levin Funds	, et al., charffordfindfindfinationst accurd	in <u>herre</u> ten an den Senten et et en	
	(a) Non-Federal Account	, 	la nasimmationan antoine nata na paralamenti intoine sub s	
	(from Schedule H3)	i San Angel an Berg Barg Barg Barg Barg Barg Barg Barg	an den de Maria - Maria - Maria - Carller	
		Leader Contraction Contraction Contraction	الديانية بالمستخدرة من كتب تقتيم المستقصية. من يابع المستقدمة المن المن المن المستقدية المن المستقدية المستقد المستقد المستقد المستقد المستقد المستقد الم	
	(b) Levin Funds (from Schedule H5)	hereite der Storfore for Anzle alle Abs. Inc. )	- E. Bart - Mails St Martin Constant	
	(a) Total Tunnelous (and 19(a), and 19(b))	از المحمد المالية بعداليمية المحمد المحمد المحمد المامين عنها المحمد المحمد المحمد المحمد المحمد المحمد المحمد ال	<ul> <li>Prima administry of the state o</li></ul>	
	(c) Total Transfers (add 18(a) and 18(b))	handrades and the standard as the stand	Bergereiten Ber Donke March on all Mar	
9.	Total Receipts (add Lines 11(d),	ويحجنين والاراب ويبوا فيتبينا ويتجافه بيطاحيم فأنبناه المحمال حيدان بيطي	program and a second of the second	
	12, 13, 14, 15, 16, 17, and 18(c))		, 6,738.41	

20. Total Federal Receipts (subtract Line 18(c) from Line 19) ......▶

FE6AN026

6,738.41

# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

#### **II. Disbursements**

#### COLUMN A **Total This Period**

COLUMN B

Page 4

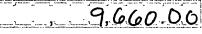
# Calendar Year-to-Date

21.	Operating Expenditures:	
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	
	(i) Federal Share	0.00
	(ii) Non-Federal Share	
	(b) Other Federal Operating	
	Expenditures	
	(c) Totat Operating Expenditures	Land and the second
	(add 21(a)(i), (a)(ii), and (b))▶	
22.	Transfers to Affiliated/Other Party	and and a second se
	Committees	
23.	Contributions to	<u> </u>
	Federal Candidates/Committees and Other Political Committees	006
24.	Independent Expenditures	
~	(use Schedule E)	
25.	Coordinated Party Expenditures	
	(2 U.S.C. §441a(d)) (use Schedule F)	
26.	Loan Repayments Made	
		<u> </u>
27.	Loans Made	
	Refunds of Contributions To:	
	(a) Individuals/Persons Other Than Political Committees	
		<u> </u>
	(b) Political Party Committees	
	(c) Other Political Committees	
	(such as PACs)	
	(	<u> </u>
	(d) Total Contribution Refunds	
	(add Lines 28(a), (b), and (c)) ►	
		- <u>An Anna Anna Anna Anna Anna Anna Anna </u>
29.	Other Disbursements	
		- der Panika Alta de Mandler Sander Alterikan
30.	Federal Election Activity (2 U.S.C. §431(20))	
	(a) Allocated Federal Election Activity	
	(from Schedule H6)	ر داشتان زداده این ماده و انتشار <mark>مکنده کرد</mark> های <b>رستند و مدان در درد در درد</b> کار کنا اس
	(i) Federal Share	س به منه المور الم
	(ii) "Levin" Share	
	(b) Federal Election Activity Paid Entirely	الماري مايك المحلي من منظل ماكن موجود ومحل المحلي المحلي المحلي المحلي المحلي المحلي المحلي المحلي المحلي المح والمحلول مادين مادين مادين مادين محلول مادين محلول
	With Federal Funds	
	(c) Total Federal Election Activity (add	لى مەركىيى 1997 - بىر قىمىر 2004 يىلىرى 1997 - 1990 - يەركىيە 1997 - يار. يېرىكى يېلىكى مەركى قىسىر كىسىر كىلىكى يىلىكى مىلىكى مىلىكى مەركى بىل
	Lines 30(a)(i), 30(a)(ii) and 30(b)) >	
		have been to a strengthere there there have been been the
31.	Total Disbursements (add Lines 21(c), 22,	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	$\neg 0 $
32.	Total Federal Disbursements	
	(subtract Line 21(a)(il) and Line 30(a)(ii)	ן הנוא ברב כך יות המתחיר במשלעות ביום לפשורים לאמינים ליומים ביו היות היות היות היות היות היות אין י
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# DETAILED SUMMARY PAGE

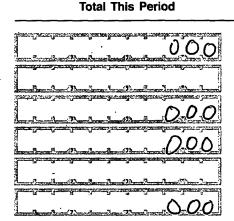
COLUMN A

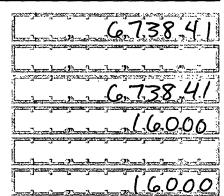
of Disbursements

# III. Net Contributions/Operating Expenditures

FEC Form 3X (Rev. 02/2003)

- (subtract Line 34 from Line 33) ......
  36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .......▶
- (subtract Line 37 from Line 36) ......





COLUMN B

**Calendar Year-to-Date** 

Page 5

FE6AN026

S	CHEDULE A (FEC Form 3X)	FOR LINE NUMBER: PAGE / OF 3		
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	
	y information copied from such Reports and S for commercial purposes, other than using the	rson for the purpose of soliciting contributions to solicit contributions from such committee.		
$\mathbb{N}$	NAME OF COMMITTEE (In Full)			
Z	BAYCARE PHYSICIANS PAC	· · ·		
Α.	Full Name (Last, First, Middle Initial) ANDERAS, PER			Date of Receipt
	Mailing Address 2824 MT. CAROL DR.	01-1-	7. 0.4	
	City GREEN BAY	State WI	Zip Code 54311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	CQC	407760	0.0.0
	Name of Employer BAYCARE CLINIC	Occupation PHYSICI		
	Receipt For:		Year-to-Date ▼	
	Primary ✓ General Other (specify) ▼		1,000.00	
в.	Full Name (Last, First, Middle Initial) GUO, DANZHU			Date of Receipt
	Mailing Address 2521 MEADOW BREEZE CT.	<u> </u>		
	City GREEN BAY	State WI	Zip Code 54311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	COC	407700	0.00
	Brimony C. Conorol			
			Year-to-Date ▼	1
			3.75.03	
с.	Full Name (Last, First, Middle Initial) HARRISON, RICHARD	· · · · · · · · · · · · · · · · · · ·		Date of Receipt
	Mailing Address 984 HIGHLAND SPRINGS CT.			M M / D D / Y Y Y Y
	City ONEIDA	State WI	Zip Code 54155	Amount of Each Receipt this Period
			0467700	
Primary V. General			Year-to-Date ▼	
	Other (specify)	:: <u>::::::::::::::::::::::::::::::::::</u>	, ,463.21	
s	UBTOTAL of Receipts This Page (optional)			
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SCHEDULE A (FEC Form 3						
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)			
		Detailed Summary Page				
			erson for the purpose of soliciting contributions a to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
BAYCARE PHYSICIANS PA	AC					
Full Name (Last, First, Middle Initial) A. HENNIGAN, SHAWN			Date of Receipt			
1994 PAINT HORSE TRAIL						
	State WI	Zip Code 54115	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	CDC	40.7.7.0.0	0.00			
Name of Employer BAYCARE CLINIC	Occupation PHYSICI/					
Receipt For:	,	Year-to-Date ▼				
Other (specify)		501.34				
Full Name (Last, First, Middle Initial) B. HODGDON, SCOTT						
Mailing Address 3010 GREAT OAK LN.		Zip Code				
City GREEN BAY	State WI	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		54311 ) <u>407700</u>				
Name of Employer BAYCARE CLINIC	Occupation PHYSICIA					
Receipt For:	Aggregate	Year-to-Date ▼	-			
Other (specify) ▼		, ,219.72				
Full Name (Last, First, Middle Initial) C. HODGSON, JOSEPH						
Mailing Address 1809 SUNKIST CIR.			M M / D D / Y Y Y Y			
City DE PERE		Zip Code 54115	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	COC	407700	0.00			
Name of Employer BAYCARE CLINIC	Occupation PHYSICIA					
Receipt For: Primary ✓ General Other (specify) ▼		Year-to-Date ▼ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
SUBTOTAL of Receipts This Page (option		· · · · · ·				
TOTAL This Period (last page this line nu						
			<ul> <li>Harrison and the state of the s</li></ul>			

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:       PAGE 3 OF 3         (check only one)       11a         11a       11b         13       14         15       16         16       17
Any information copied from such Reports and S or for commercial purposes, other than using the	erson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) BAYCARE PHYSICIANS PAC			· .
Full Name (Last, First, Middle InItial) A. MENDOZA, RAUL Mailing Address 1122 PLEASANT VALLEY DR. City ONEIDA FEC ID number of contributing (detail collisied committee		Zip Code 54155	Date of Receipt
Name of Employer BAYCARE CLINIC Receipt For: Primary ✓ General Other (specify) ▼	BAYCARE CLINIC     PHYSICIA       Receipt For:     Aggregate       □ Primary     ✓ General		
Full Name (Last, First, Middle Initial) B. OTS, MAX E. Mailing Address 2455 SHIRLEY DR. City DE PERE	State WI	Zip Code 54115	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer BAYCARE CLINIC Receipt For: Primary ✓ General Other (specify) ▼			
Full Name (Last, First, Middle Initial)         C. WEINSHEL, STEVEN S.         Mailing Address         1746 MARTINWOOD CT.         City         DE PERE         FEC ID number of contributing federal political committee.         Name of Employer         BAYCARE CLINIC         Receipt For:         Primary       ✓ General         Other (specify) ▼	COO Occupation PHYSICIA Aggregate	Zip Code 54115 9 4 0 7.700	Date of Receipt         M       M         Amount of Each Receipt this Period         0.000
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			

FEC Schedule A (Form 3X) Rev. 02/2003

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMI The FEC added this page to the end of this filing to indica	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation <sup>™</sup> or Signature Cor	nfirmation <sup>™</sup> Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	·
Overnight Delivery Service (Specify):	Shipping Date
Next Busin	ness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of Other (Specify):	of Receipt or Postmarked
EL	10/25/10
PREPARER           (3/2005)	DATE PREPARED

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