PAGE 1 / 21

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**FEC** FORM 3X

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

For	Other Than An Auth	orized Committee		Office Use Only
1. NAME OF TYLE COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M	5
AMERICAN COLLEGE C	OF RHEUMATOLOG	GY (RHEUMPAC)		
ADDRESS (number and street)	2200 Lake Boulevard N			
Check if different				
than previously reported. (ACC)	Atlanta		GA	30319
2. FEC IDENTIFICATION NUMBER	BER ▼ CITY	<b>′</b> ▲	STATE ▲	ZIP CODE ▲
C C00432823	3. IS	THIS NEW (N) OF	4.4	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M		20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar 2	20 (M3) Jun 20 (M6	Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	Apr 2	20 (M4) Jul 20 (M7)	Oct 2	20 (M10) Jan 31 (YE)
July 15	(c) 12-Day  PRE-Election	Primary (12P)	General	(12G) Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (	12S)
Quarterly Report (Q3)  January 31  Year-End Report (YE)	Election	on	YIYIY	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	K General (30G)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Report for the:  Election	on 11 08	2022	in the State of GA
5. Covering Period 10	20 2022	through 11	M / D D /	2022
	Report and to the best of r	my knowledge and belief it is	true, correct and	d complete.
Type or Print Name of Treasurer				
Signature of Treasurer	EIN, HOWARD, , ,	[Electronically Filed]	Date 02	/ 27 / 2023
NOTE: Submission of false, erroneous	s, or incomplete information	may subject the person signing	this Report to the	ne penalties of 52 U.S.C. § 30109
Office Use Only				FEC FORM 3X Rev. 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

#### AMERICAN COLLEGE OF RHEUMATOLOGY (RHEUMPAC)

10 20 2022 11 28 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 334125.77 January 1. 2022 (b) Cash on Hand at 298512.43 Beginning of Reporting Period..... 25290.56 122024.46 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 456150.23 323802.99 6(a) and 6(c) for Column B)..... 5694.48 138041.72 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 318108.51 318108.51 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

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

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### AMERICAN COLLEGE OF RHEUMATOLOGY (RHEUMPAC)

2022 11 28 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 17520.05 102864.80 (i) Itemized (use Schedule A)..... 7608.86 18393.61 (ii) Unitemized ..... (iii) TOTAL (add 121258.41 25128.91 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 121258.41 25128.91 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 159.94 747.24 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 1.71 18.81 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (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))....... 122024.46 25290.56 20. Total Federal Receipts 25290.56 122024.46 (subtract Line 18(c) from Line 19) .......▶

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: –  (a) Allocated Federal/Non-Federal		Calculate Fatto
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	4	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	694.48	1441.72
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	694.48	1441.72
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	40000000
and Other Political Committees	5000.00	136500.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	200	4 4 4
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	7 1 7 1 7	1 1 4 1 4 1 4
Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	100.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(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	4 4	4 4 4
Entirely With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5694.48	138041.72
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	5694.48	138041.72

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

ursements Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	25128.91	121258.41
4. Total Contribution Refunds (from Line 28(d))	0.00	100.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25128.91	121158.41
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	694.48	1441.72
7. Offsets to Operating Expenditures (from Line 15, page 3)	159.94	747.24
8. Net Operating Expenditures (subtract Line 37 from Line 36)	534.54	694.48

					MBER	:	PAGE		6	OF		21
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			person for the purpose of soliciting contributions ee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RE	HEUMATOLO	DGY (RHEUMPAC)			
Full Name of Individual (Last, First, Middle Abeles, Aryeh, , ,  Mailing Address 26 Winding Brook Ln	Initial) or Full Orga	nization Name	Date of Receipt		
014	04-4-	Zin Onda	11 18 2022		
City Wallingford	State	Zip Code 06492	Transaction ID : 2200343		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period  250.00		
Name of Employer (for Individual) Micha Abeles MD	Occupa MD	ation (for Individual)	Memo Item		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00			
Full Name of Individual (Last, First, Middle  Abelson, Abby, , ,  Mailing Address 9500 Euclid Ave	Initial) or Full Orga	nization Name	Date of Receipt		
City	State	Zip Code	11 11 2022		
Cleveland	OH	44195	Transaction ID : 2200344  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	FEC ID number of contributing				
Name of Employer (for Individual) Cleveland Clinic		ation (for Individual) tion Program Director	Memo Item		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 300.00			
Full Name of Individual (Last, First, Middle Busch, Howard, , ,	Initial) or Full Orga	nization Name	Date of Receipt		
Mailing Address 217 E Lake Worth Ave			11 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Lantana	State FL	Zip Code 33462	Transaction ID: 2200342		
FEC ID number of contributing federal political committee.	C	33402	Amount of Each Receipt this Period  500.00		
Name of Employer (for Individual) Family Arthritis Center/AARA	Occupa MD	ation (for Individual)	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional).			1050.00		
TOTAL This Period (last page this line number	er only)				

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(0	che	ck only	or	ne)						
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Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF R	HEUMATOLO	GY (RHEUMPAC)	
Full Name of Individual (Last, First, Middle Bass, Anne, , ,  Mailing Address 254 W 82nd St	Initial) or Full Organ	ization Name	Date of Receipt  11 18 2022
6A City	State	Zip Code	
New York	NY	10024	Transaction ID : 2200346
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period  250.00
Name of Employer (for Individual)  Hospital for Special Surgery/Weill Cor  Receipt For:		on (for Individual) or of Clinical Medicine	Memo Item
Primary General  Other (specify) ▼	Aggregate Year	-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Berhanu, Adey, , ,  Mailing Address 5454 Wisconsin Ave	Initial) or Full Organ	ization Name	Date of Receipt
City Chevy Chase	State MD	Zip Code 20815	Transaction ID : 2200347  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual) Arthritis & Rheumatism Associates	Occupati MD	on (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Bolster, Marcy, , ,	Initial) or Full Organ	ization Name	Date of Receipt
Mailing Address 343 Holden Wood Rd			11 14 2022
City Concord	State MA	Zip Code 01742	Transaction ID: 2200348
	IVIA	01742	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) Massachusetts General Hospital	Occupation MD	on (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year	-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		•	750.00
TOTAL This Period (last page this line numb	ner only)		

Receipt For:

Primary

Other (specify)

General

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

F	OR	LINE	NU	MBER	:	PAGE	8	OF	21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RHEUMATOLOGY (RHEUMPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Brittan, Kaitlyn, , , Date of Receipt Mailing Address 18670 N Hws Cleveland Blvd 2022 City Zip Code State Transaction ID: 2200349 NE Elkhorn 68022 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UNMC** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bryant, Gary, , , Date of Receipt Mailing Address 412 John Vineyards Lane 2022 City State Zip Code Transaction ID: 2200350 **New Castle** DE 19720 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) AstraZeneca Senior Medical Director Immunology Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Edgerton, Colin, , , Date of Receipt Mailing Address 2008 Central Ave 14 2022 City Zip Code State Transaction ID: 2200351 SC Sullivans Island 29482 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Articularis Healthcare Rheumatologist

												_
SUBTOTAL of Receipts This Page (optional)	•			,			,		275	0.00	)	
TOTAL This Period (last page this line number only)	<u> </u>		_	7	_	_	7	_	_	<u>.</u>		
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2000.00

Aggregate Year-to-Date ▼

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	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RHI	EUMATOLOGY (RHEUMPAC)	
Full Name of Individual (Last, First, Middle In Epstein, Alan, , ,  Mailing Address 822 Pine St	itial) or Full Organization Name	Date of Receipt
City	State Zip Code PA 19107	11 10 2022 Transaction ID : 2200352
Philadelphia  FEC ID number of contributing federal political committee.	PA 19107	Amount of Each Receipt this Period 250.00
Name of Employer (for Individual)  Pennsylvania Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation (for Individual) Clinical Professor of Medicine  Aggregate Year-to-Date ▼  250.00	Memo Item
Full Name of Individual (Last, First, Middle Ini  Evangelisto, Amy, , ,  Mailing Address 528 Bartram Rd	itial) or Full Organization Name	Date of Receipt  11 10 2022
City Moorestown  FEC ID number of contributing federal political committee.	State Zip Code 08057-1871	Transaction ID : 2200353 Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Arthritis, Rheumatic and Bone Disease  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation (for Individual) MD  Aggregate Year-to-Date ▼  500.00	Memo Item
Full Name of Individual (Last, First, Middle In Fahey, Sean, , ,  Mailing Address 128 Medical Park Rd  101  City  mooresville  FEC ID number of contributing	State Zip Code NC 28117	Date of Receipt  11 11 2022  Transaction ID: 2200354  Amount of Each Receipt this Period  50.05
Name of Employer (for Individual) Piedmont HealthCare Receipt For: Primary General Other (specify)	Occupation (for Individual) Rheumatologist  Aggregate Year-to-Date ▼  455.15	Memo Item
SUBTOTAL of Receipts This Page (optional)		800.05
TOTAL This Period (last page this line number	only)	

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RH	EUMATOLOGY (RHEUMPAC)	
Full Name of Individual (Last, First, Middle Ir Feldman, madelaine, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 801 Amethyst St	Ctata Zin Coda	11 13 2022
City New Orleans	State Zip Code LA 70124	Transaction ID : 2200355  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) The Rheumatology Group LLC	Occupation (for Individual)  President managing partner	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle In Gelfand, Gilbert, , ,  Mailing Address 2723 Manning Ave	litial) or Full Organization Name	Date of Receipt
City Los Angeles	State Zip Code CA 90064	11 12 2022  Transaction ID : 2200356  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer (for Individual) Amicus Arthritis and Osteoporosis	Occupation (for Individual) MD	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name of Individual (Last, First, Middle Ir Gupta, Sandeepkumar, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 517 Finnbar Dr		11 23 2022
City Cary	State Zip Code NC 27519	Transaction ID : 2200357  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Empowered Arthritis and Rheumatology C	Occupation (for Individual) M.D. Physician	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	only)	

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	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RH	EUMATOLOGY (RHEUMPAC)	
Full Name of Individual (Last, First, Middle In Hamburger, Max, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 6 Micole Ct		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code NY 11746	Transaction ID : 2200358
Dix Hills	NY 11746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Rheum Assoc of Long Island	Managing Partner	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1600.00	
Full Name of Individual (Last, First, Middle In HUMPHREY, MARY BETH, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 3741 Redmont Trce		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2200345
EDMOND	OK 73034	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) University of Oklahoma Health Sciences	Occupation (for Individual) Professor	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name of Individual (Last, First, Middle In Kalish, Robert, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 177 Valentine St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2200359
Newton	MA 02465	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Tufts Medical Center	Occupation (for Individual) Physician	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	only)	

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	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RHE	EUMATOL	OGY (RHEUMPAC)	
Α.		ial) or Full Org	anization Name	Date of Receipt
	Mailing Address 644 Georgetown Dr NW	To: .		11 11 2022
	City Concord	State NC	Zip Code 28027	Transaction ID : 2200360
	FEC ID number of contributing federal political committee.	C	20021	Amount of Each Receipt this Period 500.00
	Name of Employer (for Individual) Rowan Diagnostic Clinic	Occup: MD	ation (for Individual)	Memo Item
	Receipt For:  Primary General  Other (specify) ▼			
В.	Full Name of Individual (Last, First, Middle Init Kenney, Howard, , ,	ial) or Full Org	anization Name	Date of Receipt
	Mailing Address 105 W 8th Ave #6080 City	State	Zip Code	11 06 2022
	Spokane	Transaction ID : 2200361  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	500.00		
	Name of Employer (for Individual) Arthritis Northwest	Occup MD	ation (for Individual)	Memo Item
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	
<del>С</del> .	Full Name of Individual (Last, First, Middle Init Levin, Robert, , ,	ial) or Full Org	anization Name	Date of Receipt
	Mailing Address 3037 Tall Pine Dr			11 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Safety Harbor	State FL	Zip Code 34695	Transaction ID : 2200362  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer (for Individual) Robert W Levin MD PA		ation (for Individual) natologist	Memo Item
	Receipt For: Primary General Other (specify)			
H	SUBTOTAL of Receipts This Page (optional)			2000.00

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	ny information copied from such Reports and St for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RHE	UMAT	OLC	OGY (RHEUMPAC)			
Α.	Full Name of Individual (Last, First, Middle Initiality, Sam, , ,	al) or Full	Orga	nization Name	Date of Receipt		
	Mailing Address 49 Jesse Hill Jr Dr SE				11 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Atlanta	State		Zip Code 30303	Transaction ID : 2200363		
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period		
	Name of Employer (for Individual) Emory University		•	tion (for Individual) or of Medicine and Epidemiolog	Memo Item		
	Receipt For:  Primary General  Other (specify) ▼						
В.	Full Name of Individual (Last, First, Middle Initi Malone, Daniel, , , Mailing Address 3437 Edge Hill Pkwy	nization Name	Date of Receipt				
		State		Zip Code	11 14 2022		
	City Madison	Transaction ID : 2200364					
	FEC ID number of contributing federal political committee.	C		53705-1450	Amount of Each Receipt this Period  1000.00		
	Name of Employer (for Individual) Rheumatology			tion (for Individual) MSK, FACR	Memo Item		
	Receipt For:  Primary General  Other (specify) ▼	Aggrega	te Yea	ar-to-Date ▼ 2000.00			
<del></del>	Full Name of Individual (Last, First, Middle Initi	al) or Full	Orga	nization Name	Date of Receipt		
	Mailing Address 2730 University Blvd W				11 18 2022		
	City Wheaton	State MD		Zip Code 20902	Transaction ID : 2200365  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С			250.00		
	Name of Employer (for Individual) Arthritis & Rheumatism Associates			tion (for Individual) atologist	Memo Item		
	Receipt For: Primary General Other (specify)	mary General Aggregate Teal-to-Date V					
H	SUBTOTAL of Receipts This Page (optional)				1400.00		

		LINE	PAGE	 14	OF	21				
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		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RI	HEUMATOLOGY (RHEUMP	PAC)
Full Name of Individual (Last, First, Middle Menzies, Victoria, , ,  Mailing Address 12538 NW 159th Way	Initial) or Full Organization Name	Date of Receipt  11 22 2022
City	State Zip Code	Transaction ID : 2200366
Alachua	FL 32615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	170.00
Name of Employer (for Individual) University of Florida/College of Nursi	Memo Item	
Receipt For:  Primary General  Other (specify) ▼	.00	
Full Name of Individual (Last, First, Middle  3. Moeller, Garland, , ,  Mailing Address 4503 Gloucester Dr	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 18 2022
Trent Woods	NC 28562	Transaction ID : 2200367  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer (for Individual) CarolinaEast Internal Medicine	Occupation (for Individual) President, NCRA	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250	.00
Full Name of Individual (Last, First, Middle <b>Douglas</b> , , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 63 Maplewood Dr		11 14 2022
City	State Zip Code NY 11803	Transaction ID: 2200368
Plainview	NY 11803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer (for Individual) Optum Healthcare	Occupation (for Individual) MD	Memo Item
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary General Other (specify)	750	.00
SUBTOTAL of Receipts This Page (optional).		1170.00
TOTAL This Period (last page this line number	er only)	

F	OR	LINE	PAGE	 15	OF	21			
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	I	<u> </u>
	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RE	HEUMATOLOGY (RHEUMPAC)	
Full Name of Individual (Last, First, Middle I Nyers, Amanda, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 514 Gregory Ave		11 27 2022
City Wilmette	State Zip Code IL 60091	Transaction ID : 2200369  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer (for Individual)  NorthShore University HealthSystem	Occupation (for Individual)  MD	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	
Full Name of Individual (Last, First, Middle I  Pick, Michael, , ,  Mailing Address 800 N 1st St	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 23 2022 Transaction ID : 2200370
Springfield  FEC ID number of contributing federal political committee.	C 62702	Amount of Each Receipt this Period  350.00
Name of Employer (for Individual) Springfield Clinic	Occupation (for Individual) MD	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name of Individual (Last, First, Middle I C. Ravenell, Roneka, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 329 Wooldridge Ave		11 14 2022
City Pewee Valley	State Zip Code KY 40056	Transaction ID : 2200371  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer (for Individual) Lake Cumberland Rheumatology	Occupation (for Individual) MD	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		650.00
TOTAL This Period (last page this line number	er only)	

l	F	OR	LINE	PAGE	 16	OF	21			
l	(0	he	ck only							
l		X	11a		11b		11c	12		
l	13 14				15	16	;	17		

				n for the purpose of soliciting contributions solicit contributions from such committee.				
\	COMMITTEE (In Full) ICAN COLLEGE OF RHEU	JMATOLC	OGY (RHEUMPAC)					
Singer,		nization Name	Date of Receipt					
Mailing Ac	ddress 9 Pepper Creek Dr			11 13 2022				
City		State	Zip Code	Transaction ID : 2200372				
Pepper Pi	IKE	ОН	44124	Amount of Each Receipt this Period				
	umber of contributing slitical committee.	С		100.00				
The Metro	Employer (for Individual) Health System, Case Western R	Occupat MD	tion (for Individual)	Memo Item				
Receipt For Prim		ur-to-Date ▼ 300.00						
3. Stamat	e of Individual (Last, First, Middle Initial ios, Christine, , , ddress 512 Harbor Rd	nization Name	Date of Receipt					
-	312 Halbul Ku		11 07 2022					
Cold Sprin	ag Harbor	State	Zip Code	Transaction ID : 2200373				
Cold Sprir		Amount of Each Receipt this Period						
	umber of contributing slitical committee.		100.00					
Northwell I	Employer (for Individual) Health, Division of Rheumato		tion (for Individual) Practitioner	Memo Item				
Receipt For		Aggregate Yea	ur-to-Date ▼					
	er (specify) $\blacktriangledown$	4	450.00					
	e of Individual (Last, First, Middle Initial)	) or Full Orgai	nization Name	Date of Receipt				
	ddress 12456 Washington Blvd			11 14 2022				
City Whittier		State CA	Zip Code 90602	Transaction ID : 2200374				
	umber of contributing	C	33302	Amount of Each Receipt this Period				
	umber of contributing solitical committee.		2500.00					
Amicus Ar	Employer (for Individual) rthritis & Osteoporosis Center	tion (for Individual)	Memo Item					
Receipt For		Aggregate Yea	ır-to-Date ▼					
	er (specify)		2500.00					
SUBTOTAL	of Receipts This Page (optional)			2700.00				
TOTAL This	Period (last page this line number onl	y)						

FOR LINE NUMBER:					PAGE	1	7 OI	= 21
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l		13	14	□ 1	15		16	17

Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions eto solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF R	HEUMATOLO	GY (RHEUMPAC)					
Full Name of Individual (Last, First, Middle Tuetken, Rebecca, , ,  Mailing Address 1303 5th St	Initial) or Full Organ	nization Name	Date of Receipt				
	City.						
City Coralville	State	Zip Code 52241	Transaction ID : 2200375				
	""	VLLTI	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		250.00				
Name of Employer (for Individual) University of Iowa Hospitals and Clini	Occupati MD	ion (for Individual)	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	r-to-Date ▼ 250.00						
Full Name of Individual (Last, First, Middle Weinstein, Arthur, , ,  Mailing Address 2173 Edinboro Ave	Initial) or Full Organ	nization Name	Date of Receipt				
		I	11 09 2022				
Clarement	State	Zip Code 91711	Transaction ID : 2200376				
Claremont	Amount of Each Receipt this Period						
federal political committee.	FEC ID number of contributing ederal political committee.						
Name of Employer (for Individual) Retired		ion (for Individual) or Emeritus	Memo Item				
Receipt For:	Aggregate Yea	r-to-Date ▼					
Primary General Other (specify) ▼	4	250.00					
Full Name of Individual (Last, First, Middle Yonker, Richard, , ,	Initial) or Full Organ	nization Name	Date of Receipt				
Mailing Address 1945 Versailles St			11 16 2022				
City	State	Zip Code	Transaction ID: 2200377				
Sarasota	FL	34239	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		500.00				
Name of Employer (for Individual) Tenet Health	Occupati Vice Pre	ion (for Individual) sident	Memo Item				
Receipt For:	Aggregate Yea						
Primary General Other (specify)		500.00					
SUBTOTAL of Receipts This Page (optional)			1000.00				
TOTAL This Period (last page this line numb	per only)						

FEC ID number of contributing

Name of Employer (for Individual)

University of Rochester Medical Center

federal political committee.

Receipt For:

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

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

FOR LINE NUMBER:					PAGE		18	OF	- 2	21		
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		X	11a		11b		11c		12			
			13		14		15		16			17

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF RHEUMATOLOGY (RHEUMPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name busch, stacey, , , Date of Receipt Mailing Address 217 E Lake Worth Ave 2022 10 City State Zip Code Transaction ID: 2200378 FL Lantana 33462 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Family Arthritis Center/AARA Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** ritchlin, christopher, , , Date of Receipt Mailing Address 4459 Middle Cheshire Rd 2022 Box 695 City State Zip Code Transaction ID: 2200379 NY canandaigua 14424 Amount of Each Receipt this Period

Primary General Other (specify) ▼		500.00			
Full Name of Individual (Last, First, Middle Schweitz, michael, , ,  Mailing Address 7721 Pine Tree Ln	Initial) or Full Or	ganization Name	Date of Receipt  11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City west palm beach FEC ID number of contributing	State FL	Zip Code 33406	Transaction ID : 2200380  Amount of Each Receipt this Period  500.00		
Name of Employer (for Individual) N/A		pation (for Individual)	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 1000.00			
CURTOTAL of Passints This Pass (autisms)			1500.00		

Occupation (for Individual)

Professor

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

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

Aggregate Year-to-Date ▼

17520.05

500.00

Memo Item

В.

C.

Other (specify)

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

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

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CHEDULE A (FEC Form 3X EMIZED RECEIPTS	(	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 OF 21 (check only one)  11a 11b 11c 12 13 14 X 15 16 17					
y information copied from such Reports an	d Statements ma the name and a	y not be sold or used by any p	person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) AMERICAN COLLEGE OF R								
Full Name of Individual (Last, First, Middle American College Of Rheumatology	Initial) or Full Or	rganization Name	Date of Receipt					
Mailing Address 2200 Lake Boulevard NE			11 02 / Y Y Y Y Y					
City	State	Zip Code	Transaction ID : 2200381					
Atlanta	GA	30319	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		159.94					
Name of Employer (for Individual)	Осси	Memo Item  Refund of Pre-General Election Period Credit Ca						
Receipt For:  Primary General  Other (specify) ▼	Primary General Aggregate Teal-to-Date V							
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address			M M / D D / Y Y Y Y					
City	State	Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	Amount of Each necespt this Feriod							
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	]					
Full Name of Individual (Last, First, Middle	Initial) or Full Or	rganization Name	Date of Receipt					
Mailing Address	M = M / D = D / Y = Y = Y							
City	State	Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	Amount of Lacif Neceipt this Period							
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item					
Receipt For:    Primary   General	-							

159.94

159.94

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 20 OF 21						
ITEMIZED DISBURSEMENTS		rate schedule(s)	(check only	AL NOMBLIT.					
		Category of the Summary Page	<b>X</b> 21b	22 23 26 27					
			28a	28b 28c 29 30b					
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NAME OF COMMITTEE (In Full)	unu auun	oos or arry politi	oar oomminttee to	constructions from such committee.					
AMERICAN COLLEGE OF RHEU	MATOI C	GY (RHFI	JMPAC)						
/			····· / (O)						
Full Name (Last, First, Middle Initial)				Date of Disbursement					
A. Stripe	Surpe								
Mailing Address 185 Berry St	11 28 2022								
#550		ı							
•	State CA	Zip Code		FEC Identification Number					
San Francisco Purpose of Disbursement	- CA	94107		С					
October/November (Post-General Period) Credit Ca	ard Processir	ng Fees	001						
Candidate Name			Category/	Transaction ID: 30331199  Amount of Each Disbursement this Period					
Office Cought			Type	604.40					
Office Sought: House Disburser Senate	ment For: Primary	General		694.48					
President	Other (spec								
State: District:				Memo Item					
Full Name (Last, First, Middle Initial)									
В.				Date of Disbursement					
Mailing Address	Mailing Addrage								
Maining Addition									
City	State	Zip Code		FEC Identification Number					
Purpose of Disbursement				C					
F				U					
Candidate Name	Category/	Amount of Each Disbursement this Period							
Office Cought		Туре							
Office Sought: House Disburser Senate	ment For: Primary	General							
President		п.,							
State: District:	Other (spec			Memo Item					
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)								
C.				Date of Disbursement					
Mailing Address				M M / D D / Y Y Y Y					
City	City State Zip Code								
Purpose of Disbursement	Purpose of Disbursement								
Candidate Name	Candidate Name Category/								
Office Sought: House Disburser	Type								
Senate Disburser	Primary	General		7					
President	Other (spec			Memo Item					
State: District:				Womo Rem					
				604.40					
SUBTOTAL of Disbursements This Page (optional)	•••••		·····•	694.48					
TOTAL This Period (last nage this line number only)				694.48					

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SCHEDULE B (FEC Form 3X)			FOR LINE	IE NUMBER: PAGE 21 OF 21			
ITEMIZED DISBURSEMENTS		Llos concreto cohodulo(a)		only one)			
<del> </del>		Summary Page	21b				
			28a	28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)							
angle AMERICAN COLLEGE OF RHEU	MATOLO	GY (RHEU	IMPAC)				
Full Name (Last, First, Middle Initial)							
A. MAGGIE FOR NH		Date of Disbursement					
				11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO BOX 298							
City	State	Zip Code		FEC Identification Number			
CONCORD Purpose of Disbursement	NH	03302					
2022 General Election Contribution			011	C C00588772			
Candidate Name			Category/	Transaction ID: 30331200  Amount of Each Disbursement this Period			
Hassan, Maggie, , Sen.,			Type				
	ement For: 2			5000.00			
Senate President	Primary Other (spec	General		п., .			
State: NH District:	J 0 (0 p 0 c	,, •		Memo Item			
Full Name (Last, First, Middle Initial)							
В.				Date of Disbursement			
Mailing Address		M = M / D = D / Y = Y = Y					
Mailing Address	Induling Address						
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement	Purnose of Dishursement						
•		C					
Candidate Name	Category/	Amount of Each Disbursement this Period					
Office Sought: House Disburse	Type						
Senate	ement For: Primary	General		4 4			
President	Other (spec			Momo Itom			
State: District:	1			Memo Item			
Full Name (Last, First, Middle Initial)  C.				Date of Disbursement			
<b>c</b> .				M M / D D / Y Y Y Y			
Mailing Address							
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement							
Turpose of Bissursement				C			
Candidate Name		Category/	Amount of Each Disbursement this Period				
Office Occupits							
Office Sought: House Disburse Senate		1 4 4 4					
Senate Primary General  President Other (specify) ▼				Memo Item			
State: District:	]			Memo item			
				5000.00			
SUBTOTAL of Disbursements This Page (optional).			<u> </u>	3000.00			
TOTAL This Period (last page this line number only	·)			5000.00			