10/13/2010 18:29

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDE-RAL(PAC) 915 WILSHIRE BLVD SUITE 1620 ADDRESS (number and street) Check if different than previously LOS ANGELES CA 90017 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00461756 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Х Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2010 09 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Donald H. Crane Type or Print Name of Treasurer Electronically Filed by Donald H. Crane 10 13 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/21

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC)

F	Report Covering the Period: From:	01 2010	To: 0 9 3 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010 Y Y Y		67848.99
	(b) Cash on Hand at Begining of Reporting Period	38060.22	
	(c) Total Receipts (from Line 19)	15280.02	21491.25
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	53340.24	89340.24
7.	Total Disbursements (from Line 31)	29800.00	65800.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23540.24	23540.24
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	

X 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) 3 / 21

Write or Type Committee Name

CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC)

Report Covering the Period:

From:

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2010

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м м 0 9 ^D 3 0

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	13800.00	19100.00
	(ii) Unitemized	1475.00	2375.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	15275.00	21475.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15275.00	21475.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	5.02	16.25
3.	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15280.02	21491.25
).	Total Federal Receipts (subtract Line 18(c) from Line 19)	15280.02	21491.25

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 21

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	5.50	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	200.00	202.00
Expenditures	300.00	300.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	300.00	300.00
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	29500.00	65500.00
Independent Expenditure		
(use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
(use scriedule F)		
. Loan Repayments Made	0.00	0.00
. Loans Made	0.00	0.00
8. Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
(add Lines 20(a), (b), and (c))		
O. Other Disbursements	0.00	0.00
). Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
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
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	29800.00	65800.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	29800.00	65800.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 21

	butions/Operating ditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions from Line 11(d), page	(other than loans)	15275.00	21475.00
4. Total Contribution F (from Line 28(d))	efunds	0.00	0.00
Net Contributions (o (subtract Line 34 from the following)	ther than loans) om Line 33)	15275.00	21475.00
6. Total Federal Opera (add Line 21(a)(i) ar	ting Expenditures and Line 21(b))	300.00	300.00
7. Offsets to Operating (from Line 15, page	g Expenditures 3)	0.00	0.00
8. Net Operating Experise (subtract Line 37 from	nditures om Line 36)	300.00	300.00

FE6AN026

SCHEDULE A (FEC I ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 21 (check only one) X
Any information copied from such or for commercial purposes, other	n Reports and Statements ma or than using the name and a	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In I CA ASSOCIATION OF P RAL PAC)	•	EDERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Nazli Ahmed, MD	Initial)		Date of Receipt
Mailing Address 29 Decer	ite		0 7 1 3 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.4908
Irvine	CA	92614-7308	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C		300.00
Name of Employer Greater Newport Physicians	Occupati Physicia		Check
Receipt For:		te Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
Full Name (Last, First, Middle Stan Arnold, MD	Initial)		Date of Receipt
	annen Drive		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: SA11AI.4909
Santa Ana	CA	92705	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C		500.00
Name of Employer Edinger Medical Group	Occupati Physicia		Check
Receipt For: Primary Gene Other (specify) ▼		te Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Matthew Boone, MD	Initial)		Date of Receipt
Mailing Address 9900 Tall	pert, Suite 302		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: SA11AI.4910
Fountain Valley	CA	92708	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C		500.00
Name of Employer Edinger Medical Group	Occupati Physicia		Check
Receipt For: Primary General Other (specify)	Aggrega	te Year-to-Date ▼ 500.00	

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 21 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEI	DERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
۱.	Full Name (Last, First, Middle Initial) Valery Brouwer, MD			Date of Receipt
	Mailing Address 28361 Silverton Dr.			07 06 2010
	City	State	Zip Code	Transaction ID: SA11AI.4911
	Laguna Niguel FEC ID number of contributing federal political committee.	CA	92677	Amount of Each Receipt this Period 500.00
	Name of Employer Greater Newport Physicians	Occupatio Physicial		Check
	Receipt For: Primary General Other (specify)	, ' 	Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Catherine Campion-Ritz, MD			Date of Receipt
	Mailing Address 29 Sweet Bay	07 01 7 2010		
	City	State	Zip Code	Transaction ID: SA11AI.4936
	Irvine	CA	92603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00 Check
	Name of Employer Greater Newport Physicians	Occupatio Physicial		Olleck
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Shelley Chacon, MD	1		Date of Receipt
	Mailing Address 5952 Littlefield Dr			0 7 0 6 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.4913
	Huntington Beach	CA	92648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Edinger Medical Group	Occupatio Physicia		Check
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			2000.00

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 21 (check only one) X
4	any information copied from such Reports and S r for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEI	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
۸.	Full Name (Last, First, Middle Initial) Weston Chandler, MD			Date of Receipt
	Mailing Address 510 Superior Ave, Suit	te 290		07 / 13 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4937
	Newport Beach	CA	92663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Greater Newport Physicians	Occupatio Physicia		Check
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
_ 3.	Full Name (Last, First, Middle Initial) Karen Don, MD	1		Date of Receipt
	Mailing Address 9900 Talbert Ave #302	2		07 06 7 2010
	City	State	Zip Code	Transaction ID: SA11AI.4914
	Fountain Valley	CA	92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Edinger Medical Group	Occupatio Physicia		Check
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 ;.	Full Name (Last, First, Middle Initial) Tamara Fogarty, MD	1		Date of Receipt
	Mailing Address 24782 Red Lodge PI			07 06 YYYYY 2010
	City	State	Zip Code	Transaction ID: SA11AI.4915
	Laguna Hills	CA	92653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Edinger Medical Group	Occupatio Physicial		Check
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Γ				2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 21 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	
CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FE	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Catou Greenberg, MD			Date of Receipt
Mailing Address 462 Westminster Ave		7in Oada	07 01 2010
City	State	Zip Code	Transaction ID: SA11AI.4916
Newport Beach	CA	92663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Greater Newport Physicians	Occupatio Physicia		— Check
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Elaine Grodin, MD	1		Date of Receipt
Mailing Address 3611 Bellflower Blvd			07 06 7 2010
City	State	Zip Code	Transaction ID: SA11AI.4917
Long Beach	CA	90808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Edinger Medical Group	Occupatio Physicia		- Check
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Cambria Hembree, MD			Date of Receipt
Mailing Address 210 1/2 Glendora Ave	,		07 06 7 2010
City	State	Zip Code	Transaction ID: SA11AI.4918
Long Beach	CA	90803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Edinger Medical Group	Occupatio Physicia		Check
Receipt For:	, ' 	e Year-to-Date ▼	
Primary General Other (specify) ▼	55 5	500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 21 (check only one) X 11a
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	o solicit contributions from such committee.
	CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEI	DERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
۸.	Full Name (Last, First, Middle Initial) David Kaufman, DO			Date of Receipt
	Mailing Address 18 Endeavor, Suite 20	4		07 14 2010
	City	State CA	Zip Code	Transaction ID: SA11AI.4919
	FEC ID number of contributing federal political committee.	C	92618	Amount of Each Receipt this Period 500.00
	Name of Employer Greater Newport Physicians	Occupation Physician		Check
	Receipt For: Primary General Other (specify) ▼	, ' 	Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Ann Mai, MD	I		Date of Receipt
	Mailing Address 2 Medlor	07 01 7 2010		
	City	State	Zip Code	Transaction ID: SA11AI.4920
	Irvine	CA	92618	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Check
	Name of Employer Greater Newport Physicians	Occupation Physician		Officer
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
_	Full Name (Last, First, Middle Initial) Douglas McConnaughey	<u> </u>		Date of Receipt
	Mailing Address 9 Cape Danbury	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: SA11AI.4922
	Newport Beach FEC ID number of contributing federal political committee.	CA	92660	Amount of Each Receipt this Period 500.00
	Name of Employer Edinger Medical Group	Occupation Physician		Check
	Receipt For: Primary General Other (specify) ▼	,	Year-to-Date ▼ 500.00	
S	UBTOTAL of Receipts This Page (optional)		\	1500.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC FITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 21 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other NAME OF COMMITTEE (In Fig. 1)	than using the name and a	ddress of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee. N COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle I Denise McCourt Mailing Address 7842 Conr	nitial)	EDELINE I GEITIGHE NOTION	Date of Receipt
City	State	Zip Code	0 7 0 6 2 0 1 0 Transaction ID: SA11AI.4923
Huntington Beach FEC ID number of contributing federal political committee.	CA	92648	Amount of Each Receipt this Period 500.00
Name of Employer Edinger Medical Group Receipt For: Primary General Other (specify) ▼			Check
Full Name (Last, First, Middle I Jack Middlebrooks, MD Mailing Address 18710 Spr			Date of Receipt
City	State	Zip Code	0 7 0 6 2 0 1 0 Transaction ID: SA11AI.4924
Fountain Valley FEC ID number of contributing federal political committee.	CA	92708	Amount of Each Receipt this Period 500.00
Name of Employer Edinger Medical Group	Occupat Physici		Check
Receipt For: Primary General Other (specify) ▼	Aggrega	te Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle I Lam-Quynh Nguyen, MD Mailing Address 3506 Brav			Date of Receipt 0 7 0 6 7 2 0 1 0
City	State	Zip Code	Transaction ID: SA11AI.4925
Huntington Beach FEC ID number of contributing federal political committee.	CA	92649	Amount of Each Receipt this Period 500.00
Name of Employer Greater Newport Physicians	Occupat Physici		Check
Receipt For: Primary General Other (specify) ▼	Aggrega	te Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Pa	ge (optional)		1500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 21 (check only one) X 11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FE	DERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
Д. А.	Full Name (Last, First, Middle Initial) Harry Pellman, MD			Date of Receipt
	Mailing Address 16691 Greenview LN			07 06 2010
	City Huntington Beach	State CA	Zip Code 92649	Transaction ID: SA11AI.4927 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	020-10	500.00
	Name of Employer Edinger Medical Group	Occupation Physicia		Check
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
– В.	Full Name (Last, First, Middle Initial) Lauri Seymour, MD			Date of Receipt
	Mailing Address 23301 Via Dorado	07 06 2010		
	City	State	Zip Code	Transaction ID: SA11AI.4928
	Coto de Caza	CA	92679	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Check
	Name of Employer Edinger Medical Group	Occupation Physicia		
	Receipt For:	, ' ' ' 	e Year-to-Date	
	Primary General Other (specify) ▼	0 0	500.00	
С. С.	Full Name (Last, First, Middle Initial) Malcolm Sperling, MD			Date of Receipt
	Mailing Address 4661 Los Patos Avenu	ie		07 06 2010
	City	State	Zip Code	Transaction ID: SA11AI.4929
	Huntington Beach FEC ID number of contributing federal political committee.	CA	92649	Amount of Each Receipt this Period 500.00
	Name of Employer Edinger Medical Group	Occupation Physicia		Check
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .	1		1500.00
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 21 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GRAL PAC)	ROUPS FE	DERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
∠ A .	Full Name (Last, First, Middle Initial) Debra Spindel			Date of Receipt
	Mailing Address 510 Superior Ave, Sui	08 / 06 / 2010		
	City	State	Zip Code	Transaction ID: SA11AI.4930
	Newport Beach	CA	92663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Nautilus / Greater Newport Physicians	Occupation Vice Pre		— Check
	Receipt For:			
	Primary General Other (specify) ▼		500.00	
– В.	Full Name (Last, First, Middle Initial) Mary Straub			Date of Receipt
	Mailing Address 5661 Littler Drive	07 06 7 2010		
	City	State	Zip Code	Transaction ID: SA11AI.4931
	Huntington Beach	CA	92649	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Edinger Medical Group	Occupation Office M		— Check
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
- С.	Full Name (Last, First, Middle Initial) Mai-Khanh Tran, MD			Date of Receipt
	Mailing Address 9337 Lily Ave			07 06 2010
	City	State	Zip Code	Transaction ID: SA11AI.4932
	Fountain Valley	CA	92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Greater Newport Physicians	Occupation Physicia		Check
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00]
ſ	SUBTOTAL of Receipts This Page (optional)	1		1500.00
-	TOTAL This Period (last page this line number		<u> </u>	

A.

В.

PAGE 14/21 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC) Full Name (Last, First, Middle Initial) Date of Receipt Burton Willis, MD Mailing Address 16074 Bonaire Cr 07 06 2010 City State Zip Code Transaction ID: SA11AI.4934 **Huntington Beach** CA 92649 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Check Name of Employer Edinger Medical Group Occupation Physician Receipt For: Aggregate Year-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Betty Yu, MD Date of Receipt Mailing Address 16525 Oak Circle 07 06 2010 City State Zip Code Transaction ID: SA11AI.4935 Fountain Valley CA 92708 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Check Name of Employer Edinger Medical Group Occupation Physician Receipt For: Aggregate Year-to-Date ▼

500.00

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)		13800.00

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	Full Name (Last, First, Middle Initial) Merrill Lynch						Trans Date o	of Di	sburse	eme				Y			
	Mailing Address 2442 Avenida De la Carlo Suite 400	ota					0 7		0	7	L	2	0 i c)			
	•	State Zip Code CA 92653					Amou	nt of	Each	Dis	burser				d		
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SUBTOTAL of Disbursements This Page (optional)	•		•		300.00	
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	y Information copied from such Reports and State for commercial purposes, other than using the na				
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GREAL PAC)				
y	Full Name (Last, First, Middle Initial) HOWARD L. BERMAN				Transaction ID: SB23.4959 Date of Disbursement
	Mailing Address 14546 Hamlin St., #20	2			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
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	Senate President	rsement For: Primary Other (sp	2010 X General ecify) ▼		
	State: CA District: 28 Full Name (Last, First, Middle Initial) BARBARA BOXER				Transaction ID: SB23.4957 Date of Disbursement
	Mailing Address PO BOX 411176				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
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	JIM MR. COS	ΓΑ					Date of Dis	sbursement		Υ
	Mailing Address	2890 Huntington Apt. 153	n Boulevard				0 8	^D 20 / Y	ž 0 Ť 0	
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	Mailing Address	555 Capitol Mal	I, Suite 1425				09	0 7 / Y	^y 0 1 0	Y
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۸.	Full Name (Last, First, Middle Initial) WALLY HERGER							i on ID isburs			3.496	64		
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	City Willows	State Zip Code CA 95988				Amou	ınt o	f Each	n D	isburs				od
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	Mailing Address PO Box 33027					0,8	IVI	2	2 1] [2	0 1 (ט '	
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	State: WA District: 01 Full Name (Last, First, Middle Initial) KEVIN MCCARTHY							ion ID			3.495	2		
	Mailing Address PO Box 12667					0 ^M 8	М	/ D 2	2 0	′	Ý Ž	010	O Y	
	City Bakersfield	State Zip Code CA 93389				Amou	ınt o	f Each	n D	isburs	emen	t this	Perio	od .
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	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GR RAL PAC)											
۸.	Full Name (Last, First, Middle Initial) PATTY MURRAY			Transaction ID: SB23.4945 Date of Disbursement								
	Mailing Address PO BOX 3662			088 / 05 / 2010								
	City SEATTLE	State Zip Code WA 98124		Amount of Each Disbursement this Period								
	Purpose of Disbursement Contribution			1000.00								
	Candidate Name PEOPLE FOR PATTY MURRAY		Category/ Type									
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_	State: WA District: 00 Full Name (Last, First, Middle Initial)			Transaction ID: SB23.4967								
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	Mailing Address 235 Montgomery Stre Suite 610	et, Suite 610		$ \begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 9 \\ 2 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 0 & 1 & 0 \\ 0 & 2 & 0 & 1 & 0 \end{bmatrix} $								
	City San Francisco	State Zip Code CA 94104		Amount of Each Disbursement this Period								
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	Candidate Name NANCY PELOSI FOR CONGRESS		Category/ Type									
	Office Sought: X House Senate President State: CA District: 08	rsement For: 2010 Primary X General Other (specify)	1									
	Full Name (Last, First, Middle Initial) EARL R. POMEROY			Transaction ID: SB23.4943 Date of Disbursement								
	Mailing Address Post Office Box 9336			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
	City Fargo	State Zip Code ND 58106		Amount of Each Disbursement this Period								
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	Candidate Name EARL POMEROY FOR CONGRESS		Category/ Type									
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Α.	Full Name (Last, First, Middle Initial) EARL R. POMEROY Mailing Address Post Office Box 9336			Transaction ID: SB23.4962 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Fargo	State Zip Code ND 58106		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			1000.00
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_ В.	State: ND District: 00 Full Name (Last, First, Middle Initial) LUCILLE ROYBAL-ALLARD			Transaction ID: SB23.4946 Date of Disbursement
	Mailing Address PO Box 582			0 8 M / 2 0 / Y 2 0 1 0 Y
	City Kensington	State Zip Code MD 20895		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			1000.00
	Candidate Name LUCILLE ROYBAL-ALLARD FOR CONGR	RESS	Category/ Type	
	Office Sought: X House Senate President State: CA District: 34	ement For: 2010 Primary X General Other (specify)		
С.	Full Name (Last, First, Middle Initial) ADAM SCHIFF			Transaction ID: SB23.4955 Date of Disbursement
	Mailing Address 777 S. Figueroa St., Ste Suite 4050	. 4050		$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{bmatrix} \ \begin{smallmatrix} & & D & D \\ & & 2 & 3 \end{bmatrix} \ \begin{smallmatrix} & & & & & & & & & & & & & & & & & &$
	City Los Angeles	State Zip Code CA 90017		Amount of Each Disbursement this Period
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A.	MIKE MR. THOMPSON							Date	of D	isburs	en	nent		_		
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	President	Other (spe	ecity)													
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В.	PETER WELCH							Date	of D	isburs	en	nent				
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	Mailing Address 346 Town Farm Road							0 /		4	-			0 1 0	,	
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SUBTOTAL of Disbursements This Page (optional)	<u> </u>	1500.00
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State: VT

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