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

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

ADDRESS (number and street) ▼ 409 12TH STREET, SW

☐ Check if different than previously reported. (ACC)

WASHINGTON | DC | 20024 –

CITY ▲ | STATE ▲ | ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00364158

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 M M / D D / Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 12 / 01 / 2011 through 12 / 31 / 2011

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 STACIE MONROE

Signature of Treasurer *STACIE MONROE* ***[Electronically Filed]*** Date 01 / 10 / 2012

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

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

Report Covering the Period: From: 12 / 01 / 2011 To: 12 / 31 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2011		231135.44
(b) Cash on Hand at Beginning of Reporting Period	334021.79	
(c) Total Receipts (from Line 19)	13114.66	456668.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	347136.45	687804.39
7. Total Disbursements (from Line 31)	35970.07	376638.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	311166.38	311166.38
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

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

Report Covering the Period: From: 12/01/2011 To: 12/31/2011

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)	7954.66	344219.29
(ii) Unitemized	5160.00	112194.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	13114.66	456413.95
(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) ▶	13114.66	456413.95
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	255.00
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)) ▶	13114.66	456668.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	13114.66	456668.95

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	970.07	10738.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	970.07	10738.01
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	35000.00	365000.00
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	900.00
(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	900.00
29. Other Disbursements	0.00	0.00
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))	35970.07	376638.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	35970.07	376638.01

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)	13114.66	456413.95
34. Total Contribution Refunds (from Line 28(d))	0.00	900.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13114.66	455513.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	970.07	10738.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	970.07	10738.01

Image# 12950044155

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)
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☒ 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)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
ARIEL E. ABRAHAMS
Mailing Address 1223 FEDERAL AVENUE
City: LOS ANGELES State: CA Zip Code: 90025
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24179
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
JACQUES ABRAMOWICZ
Mailing Address 100 EAST BELLEVUE PLACE
City: CHICAGO State: IL Zip Code: 60611
FEC ID number of contributing federal political committee: C
Name of Employer: RUSH UNIVERSITY
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 820.00

Date of Receipt: 12 / 07 / 2011
Transaction ID : SA11AI.24239
Amount of Each Receipt this Period: 125.00

C. Full Name (Last, First, Middle Initial)
JEFFREY J. ANDERSON
Mailing Address 1414 WEST 4TH STREET
City: GILETTE State: WY Zip Code: 82716
FEC ID number of contributing federal political committee: C
Name of Employer: CAMPBELL COUNTY HOSPITAL
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24183
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 875.00

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

Image# 12950044156

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)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
RALPH J. ANDERSON
Mailing Address 4100 COACHMAN LANE
City: COLLEYVILLE State: TX Zip Code: 76034
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF NORTH TEXAS
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 12 / 21 / 2011
Transaction ID : SA11AI.24270
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
DAVID J. BOES
Mailing Address 3926 CROOKED CREEK DRIVE
City: OKEMOS State: MI Zip Code: 48864
FEC ID number of contributing federal political committee: C
Name of Employer: INGHAM REGIONAL MEDICAL CENTER
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 585.00
Date of Receipt: 12 / 08 / 2011
Transaction ID : SA11AI.24291
Amount of Each Receipt this Period: 65.00

C. Full Name (Last, First, Middle Initial)
KEITH R. BRILL
Mailing Address 179 BORTIZAN DRIVE
City: LAS VEGAS State: NV Zip Code: 89138
FEC ID number of contributing federal political committee: C
Name of Employer: WOMEN'S SPECIALTY CARE
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : SA11AI.24348
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 215.00

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

Image# 12950044157

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
STEPHEN P. BUCHANAN
Mailing Address 945 SPRING CREEK DRIVE
City: GRAPEVINE State: TX Zip Code: 76051
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF NORTH TEXAS
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : SA11AI.24329
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
OCTAVIA M. CANNON
Mailing Address 3643 CANFIELD HILL COURT
City: CHARLOTTE State: NC Zip Code: 28270
FEC ID number of contributing federal political committee: C
Name of Employer: ARBORETUM OB/GYN
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : SA11AI.24330
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
JAMES P. CHANEY
Mailing Address 1730 HIGHWAY 25 NORTH
City: AMORY State: MS Zip Code: 38821
FEC ID number of contributing federal political committee: C
Name of Employer: PHYSICIANS AND SURGEONS CLINIC
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt: 12 / 22 / 2011
Transaction ID : SA11AI.24272
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 175.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
BENJAMIN H. CHEEK
Mailing Address 1626 SUMMIT DRIVE
City: COLUMBUS State: GA Zip Code: 31906
FEC ID number of contributing federal political committee: C
Name of Employer: OB/GYN ASSOCIATES OF COLUMBUS
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1749.99

Date of Receipt: 12 / 26 / 2011
Transaction ID : SA11AI.24275
Amount of Each Receipt this Period: 83.33

B. Full Name (Last, First, Middle Initial)
BETH A. COOK
Mailing Address 4222 BUCK CREEK COURT
City: NORTH CHARLESTON State: SC Zip Code: 29420
FEC ID number of contributing federal political committee: C
Name of Employer: WOMEN'S HEALTH PARTNERS
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 06 / 2011
Transaction ID : SA11AI.24224
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
LUIS B. CURET
Mailing Address P.O. BOX 50519
City: ALBUQUERQUE State: NM Zip Code: 87181
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF NEW MEXICO
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 12 / 21 / 2011
Transaction ID : SA11AI.24268
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 833.33

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

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
THOMAS S. DARDARIAN
Mailing Address 108 CETON COURT
City: BROOMAIL | State: PA | Zip Code: 19008
FEC ID number of contributing federal political committee: C
Name of Employer: MAIN LINE WOMEN'S HEALTH CARE
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00

Date of Receipt: 12 / 14 / 2011
Transaction ID : SA11AI.24331
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
ROBERT H. DEBBS
Mailing Address 2 SASSAFRAS COURT
City: VOORHEES | State: NJ | Zip Code: 08043
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF PENNSYLVANIA
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 12 / 10 / 2011
Transaction ID : SA11AI.24298
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
NATHANIEL G. DENICOLA
Mailing Address 821 BARRACKS, CARRIAGE HOUSE
City: NEW ORLEANS | State: LA | Zip Code: 70116
FEC ID number of contributing federal political committee: C
Name of Employer: TULANE OB/GYN
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 840.00

Date of Receipt: 12 / 14 / 2011
Transaction ID : SA11AI.24332
Amount of Each Receipt this Period: 84.00

SUBTOTAL of Receipts This Page (optional) ▶ 284.00

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

Image# 12950044160

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
TERESA A. ECKHART
Mailing Address 160 SOUTH GRANDVIEW
City: DUBUQUE | State: IA | Zip Code: 52003
FEC ID number of contributing federal political committee: C
Name of Employer: DUBUQUE OB/GYN
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 12 / 12 / 2011
Transaction ID : SA11AI.24154
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
LISA ENG
Mailing Address 8 78TH STREET
City: BROOKLYN | State: NY | Zip Code: 11209
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 650.00

Date of Receipt: 12 / 19 / 2011
Transaction ID : SA11AI.24283
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
DOUGLAS K. FENTON
Mailing Address 332 SANTA FE DRIVE
City: ENCINITAS | State: CA | Zip Code: 92024
FEC ID number of contributing federal political committee: C
Name of Employer: NORTH COAST WOMEN'S CARE
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1200.00

Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24191
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 350.00

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

Image# 12950044161

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)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
THOMAS A. FERRARA

Mailing Address 10122 EAST 10TH STREET

City: INDIANAPOLIS | State: IN | Zip Code: 46229

FEC ID number of contributing federal political committee: C

Name of Employer: COMMUNITY HEALTH NETWORK

Occupation: PHYSICIAN

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 2100.00

Date of Receipt: 12 / 27 / 2011

Transaction ID : SA11AI.24279

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
ROBERT F. FLORA

Mailing Address 7679 MANNHEIM COURT

City: HUDSON | State: OH | Zip Code: 44236

FEC ID number of contributing federal political committee: C

Name of Employer: SUMMA HEALTH SYSTEM

Occupation: PHYSICIAN

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 07 / 2011

Transaction ID : SA11AI.24242

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
DAVID A. FORSTEIN

Mailing Address 117 RAMSFORD LANE

City: SIMPSONVILLE | State: SC | Zip Code: 29681

FEC ID number of contributing federal political committee: C

Name of Employer: GREENVILLE HOSPITAL SYSTEM

Occupation: PHYSICIAN

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 900.00

Date of Receipt: 12 / 14 / 2011

Transaction ID : SA11AI.24334

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

Image# 12950044162

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)
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- [ ] 17

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
MICHAEL A. GOLD
Mailing Address 1161 21ST AVENUE
City: NASHVILLE | State: TN | Zip Code: 37232
FEC ID number of contributing federal political committee: C
Name of Employer: VANDERBILT UNIVERSITY MEDICAL
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 19 / 2011
Transaction ID : SA11AI.24284
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
B. MITCHELL GRABOIS
Mailing Address 21110 BISCAYNE BOULEVARD
City: MIAMI | State: FL | Zip Code: 33180
FEC ID number of contributing federal political committee: C
Name of Employer: FLORIDA WOMAN CARE
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24192
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
WILLIAM W. GREENFIELD
Mailing Address 4301 WEST MARKHAM STREET
City: LITTLE ROCK | State: AR | Zip Code: 72205
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF ARKANSAS
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24194
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

Image# 12950044163

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
NEIL A. HAMILL

Mailing Address 3882 SOUTH 177TH AVENUE

City: OMAHA | State: NE | Zip Code: 68130

FEC ID number of contributing federal political committee: C

Name of Employer: METHODIST HOSPITAL | Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 07 / 2011

Transaction ID : SA11AI.24243

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
THOMAS W. JERNIGAN

Mailing Address P.O. BOX 70569

City: JOHNSON CITY | State: TN | Zip Code: 37614

FEC ID number of contributing federal political committee: C

Name of Employer: EAST TENNESSEE UNIVERSITY | Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 12 / 2011

Transaction ID : SA11AI.24311

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
CAROLEE V. JONES

Mailing Address 717 NORTH 190TH PLAZA

City: ELKHORN | State: NE | Zip Code: 68022

FEC ID number of contributing federal political committee: C

Name of Employer: METHODIST PHYSICIANS CLINIC | Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 12 / 2011

Transaction ID : SA11AI.24313

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

Image# 12950044164

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
LEAH A. KAUFMAN
Mailing Address 331 FAIRWAY DRIVE
City: FARMINGDALE State: NY Zip Code: 11735
FEC ID number of contributing federal political committee: C
Name of Employer: LONG ISLAND JEWISH MEDICAL
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 12 / 19 / 2011
Transaction ID : SA11AI.24289
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
YONG J. KIM
Mailing Address 396 REMINGTON BOULEVARD
City: BOLINGBROOK State: IL Zip Code: 60440
FEC ID number of contributing federal political committee: C
Name of Employer: BOLINGBROOK WOMEN'S CLINIC
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 12 / 08 / 2011
Transaction ID : SA11AI.24292
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
JAMES N. MARTIN JR.
Mailing Address 2101 EASTOVER DRIVE
City: JACKSON State: MS Zip Code: 39211
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF MISSISSIPPI
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1660.00

Date of Receipt: 12 / 13 / 2011
Transaction ID : SA11AI.24302
Amount of Each Receipt this Period: 80.00

SUBTOTAL of Receipts This Page (optional) ▶ 230.00

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

Image# 12950044165

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)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
CHARLES P. MIRABILE

Mailing Address 4140 WEST MEMORIAL ROAD

City: OKLAHOMA CITY | State: OK | Zip Code: 73120

FEC ID number of contributing federal political committee: C

Name of Employer: PERINATAL CENTER OF OKLAHOMA

Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 07 / 2011

Transaction ID : SA11AI.24248

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
ANGEL A. OJEDA

Mailing Address 15921 EAST 8 MILE ROAD

City: EASTPOINTE | State: MI | Zip Code: 48021

FEC ID number of contributing federal political committee: C

Name of Employer: EASTLAND WOMEN'S CLINIC

Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 06 / 2011

Transaction ID : SA11AI.24229

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
SAMUEL RAFALIN

Mailing Address 210 CENTRAL PARK SOUTH

City: NEW YORK | State: NY | Zip Code: 10019

FEC ID number of contributing federal political committee: C

Name of Employer: CENTRAL PARK SOUTH OB/GYN

Occupation: PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 16 / 2011

Transaction ID : SA11AI.24350

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

Image# 12950044166

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
JONATHAN H. REINSTINE
Mailing Address 4121 DUTCHMAN'S LANE
City: LOUISVILLE State: KY Zip Code: 40207
FEC ID number of contributing federal political committee: C
Name of Employer: ASSOCIATES IN OB/GYN
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 12 / 26 / 2011
Transaction ID : SA11AI.24278
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
KAREN M. SCHNEIDER
Mailing Address 6431 FANNIN STREET
City: HOUSTON State: TX Zip Code: 77030
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSITY OF TEXAS
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24210
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
KAREN G. SWENSON
Mailing Address 1305 WEST 34TH STREET
City: AUSTIN State: TX Zip Code: 78705
FEC ID number of contributing federal political committee: C
Name of Employer: WOMEN PARTNERS IN HEALTH
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 754.00
Date of Receipt: 12 / 11 / 2011
Transaction ID : SA11AI.24301
Amount of Each Receipt this Period: 84.00

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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

Image# 12950044167

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)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
JANICE E. TILDON-BURTON

Mailing Address 1700 TALLEY ROAD

City: WILMINGTON | State: DE | Zip Code: 19803

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED | Occupation: PHYSICIAN

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 1024.96

Date of Receipt: 12 / 13 / 2011

Transaction ID : SA11AI.24303

Amount of Each Receipt this Period: 83.33

B. Full Name (Last, First, Middle Initial)
BARRY H. TISCHLER

Mailing Address 621 SOUTH BUTTE STREET

City: SAN PEDRO | State: CA | Zip Code: 90732

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED | Occupation: PHYSICIAN

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 06 / 2011

Transaction ID : SA11AI.24235

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
ROSALIND C. WARNER

Mailing Address 673 MANDALAY BEACH ROAD

City: OXNARD | State: CA | Zip Code: 93035

FEC ID number of contributing federal political committee: C

Name of Employer: SELF-EMPLOYED | Occupation: PHYSICIAN

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 12 / 2011

Transaction ID : SA11AI.24324

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 583.33

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

Image# 12950044168

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
ESTELLE H. WHITNEY
Mailing Address 4910 MONUMENT ROAD
City: PHILADELPHIA State: PA Zip Code: 19131
FEC ID number of contributing federal political committee: C
Name of Employer: CHRISTIANA CARE HEALTH
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 16 / 2011
Transaction ID : SA11AI.24352
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
KATHRYN J. WOOD
Mailing Address 5575 WARREN PARKWAY
City: FRISCO State: TX Zip Code: 75034
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 22 / 2011
Transaction ID : SA11AI.24274
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
STEVE YU
Mailing Address 8909 SHADY GROVE COURT
City: GAITHERSBURG State: MD Zip Code: 20877
FEC ID number of contributing federal political committee: C
Name of Employer: SELF-EMPLOYED
Occupation: PHYSICIAN
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 01 / 2011
Transaction ID : SA11AI.24216
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 775.00

TOTAL This Period (last page this line number only) ▶ 7954.66

Image# 12950044169

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)

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City: PHOENIX | State: AZ | Zip Code: 85072

Purpose of Disbursement: CREDIT CARD TRANSACTION FEES

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 05 / 2011

Transaction ID : SB21B.24150

Amount of Each Disbursement this Period: 215.66

B.

Full Name (Last, First, Middle Initial)

FIRST NATIONAL MERCHANT SOLUTIONS

Mailing Address 1620 DODGE STREET

City: OMAHA | State: NE | Zip Code: 68197

Purpose of Disbursement: CREDIT CARD TRANSACTION FEES

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 02 / 2011

Transaction ID : SB21B.24149

Amount of Each Disbursement this Period: 754.41

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:

SUBTOTAL of Disbursements This Page (optional) ▶ 970.07

TOTAL This Period (last page this line number only) ▶ 970.07

Image# 12950044170

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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A. Full Name (Last, First, Middle Initial)
ALLYSON SCHWARTZ FOR CONGRESS

Mailing Address P.O. BOX 2232

City: JENKINTOWN State: PA Zip Code: 19046

Purpose of Disbursement: CONTRIBUTION

Candidate Name: ALLYSON Y. SCHWARTZ

Category/ Type:

Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 13

Disbursement For: 2012
[ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 12 / 12 / 2011

Transaction ID : SB23.24175

Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
BERA FOR CONGRESS

Mailing Address P.O. BOX 582496

City: ELK GROVE State: CA Zip Code: 95758

Purpose of Disbursement: CONTRIBUTION

Candidate Name: AMERISH BERA

Category/ Type:

Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 03

Disbursement For: 2012
[X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 12 / 2011

Transaction ID : SB23.24159

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
COURTNEY FOR CONGRESS

Mailing Address 38 RISLEY ROAD

City: VERNON State: CT Zip Code: 06066

Purpose of Disbursement: CONTRIBUTION

Candidate Name: JOSEPH D. COURTNEY

Category/ Type:

Office Sought: [X] House [ ] Senate [ ] President
State: CT District: 02

Disbursement For: 2012
[ ] Primary [ ] General [X] Other (specify) Convention

Date of Disbursement: 12 / 12 / 2011

Transaction ID : SB23.24163

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

Image# 12950044171

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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
DOC PAC
Mailing Address 2470 DANIELL'S BRIDGE ROAD
City: ATHENS State: GA Zip Code: 30606
Purpose of Disbursement: CONTRIBUTION
Candidate Name:
Category/ Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24178
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
FRIENDS OF CHRIS MURPHY
Mailing Address P.O. BOX 127
City: CHESHIRE State: CT Zip Code: 06410
Purpose of Disbursement: CONTRIBUTION
Candidate Name: CHRISTOPHER S. MURPHY
Category/ Type:
Office Sought: [ ] House [X] Senate [ ] President
State: CT District: 00
Disbursement For: 2012 [ ] Primary [ ] General [X] Other (specify) Convention
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24168
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
FRIENDS OF DICK LUGAR
Mailing Address P.O. BOX 55952
City: INDIANAPOLIS State: IN Zip Code: 46205
Purpose of Disbursement: CONTRIBUTION
Candidate Name: RICHARD G. LUGAR
Category/ Type:
Office Sought: [ ] House [X] Senate [ ] President
State: IN District: 00
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24165
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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

Image# 12950044172

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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BARRASSO
Mailing Address P.O. BOX 52008
City: CASPER State: WY Zip Code: 82605
Purpose of Disbursement: CONTRIBUTION
Candidate Name: JOHN A. BARRASSO
Office Sought: [ ] House [X] Senate [ ] President
State: WY District: 00
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Category/ Type:
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24158
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
FRIENDS OF SHERROD BROWN
Mailing Address P.O. BOX 76187
City: WASHINGTON State: DC Zip Code: 20013
Purpose of Disbursement: CONTRIBUTION
Candidate Name: SHERROD BROWN
Office Sought: [ ] House [X] Senate [ ] President
State: OH District: 00
Disbursement For: 2012 [ ] Primary [X] General [ ] Other (specify)
Category/ Type:
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24161
Amount of Each Disbursement this Period: 3000.00

C.
Full Name (Last, First, Middle Initial)
GILLIBRAND FOR SENATE
Mailing Address 236 MASSACHUSETTS AVENUE
City: WASHINGTON State: DC Zip Code: 20002
Purpose of Disbursement: CONTRIBUTION
Candidate Name: KIRSTEN E. GILLIBRAND
Office Sought: [ ] House [X] Senate [ ] President
State: NY District: 00
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Category/ Type:
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24164
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

Image# 12950044173

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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
JACKIE SPEIER FOR CONGRESS
Mailing Address P.O. BOX 112
City: BURLINGAME State: CA Zip Code: 94011
Purpose of Disbursement: CONTRIBUTION
Candidate Name: JACKIE SPEIER
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 12
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24177
Amount of Each Disbursement this Period: 1500.00

B.
Full Name (Last, First, Middle Initial)
LOUISE SLAUGHTER RE-ELECTION COMMITTEE
Mailing Address P.O. BOX 730
City: HONEOYE State: NY Zip Code: 14471
Purpose of Disbursement: CONTRIBUTION
Candidate Name: LOUISE M. SLAUGHTER
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 28
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24176
Amount of Each Disbursement this Period: 1500.00

C.
Full Name (Last, First, Middle Initial)
MICHAEL BURGESS FOR CONGRESS
Mailing Address P.O. BOX 2334
City: DENTON State: TX Zip Code: 76202
Purpose of Disbursement: CONTRIBUTION
Candidate Name: DR. MICHAEL C. BURGESS
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 26
Disbursement For: 2012 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24162
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

Image# 12950044174

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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
NANCY PELOSI FOR CONGRESS
Mailing Address 700 13TH STREET, NW
City: WASHINGTON State: DC Zip Code: 20005
Purpose of Disbursement: CONTRIBUTION
Candidate Name: NANCY PELOSI
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 08
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24170
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS
Mailing Address P.O. BOX 425
City: ROSWELL State: GA Zip Code: 30077
Purpose of Disbursement: CONTRIBUTION
Candidate Name: THOMAS E. PRICE
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: GA District: 06
Disbursement For: 2012 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24171
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
RUSH HOLT FOR CONGRESS
Mailing Address P.O. BOX 782
City: PENNINGTON State: NJ Zip Code: 08534
Purpose of Disbursement: CONTRIBUTION
Candidate Name: RUSH D. HOLT
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 12
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 20 / 2011
Transaction ID : SB23.24262
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

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

Image# 12950044175

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
TIM BISHOP FOR CONGRESS
Mailing Address P.O. BOX 437
City: FARMINGVILLE State: NY Zip Code: 11738
Purpose of Disbursement: CONTRIBUTION
Candidate Name: TIMOTHY BISHOP
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 01
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24160
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
TIM MURPHY FOR CONGRESS
Mailing Address P.O. BOX 24551
City: PITTSBURGH State: PA Zip Code: 15234
Purpose of Disbursement: CONTRIBUTION
Candidate Name: TIM MURPHY
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 18
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 12 / 2011
Transaction ID : SB23.24169
Amount of Each Disbursement this Period: 1500.00

C.
Full Name (Last, First, Middle Initial)
TOM REED CAMPAIGN COMMITTEE
Mailing Address 407 EAST STATE STREET
City: EAGLE LAKE State: TX Zip Code: 77434
Purpose of Disbursement: VOID 11/30/2011 CONTRIBUTION
Candidate Name: THOMAS A. REED
Category/ Type:
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 14
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 09 / 2011
Transaction ID : SB23.24152
Amount of Each Disbursement this Period: -1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1500.00

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

Image# 12950044176

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 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

A.
Full Name (Last, First, Middle Initial)
TOM REED FOR CONGRESS
Mailing Address P.O. BOX 450
City VICTOR State NY Zip Code 14564
Purpose of Disbursement: CONTRIBUTION
Candidate Name: THOMAS W. REED, II
Category/ Type
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 29
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 12 / D D 12 / Y Y Y Y 2011
Transaction ID : SB23.24172
Amount of Each Disbursement this Period: 1000.00

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:

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:

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 35000.00