

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="46326.98"/>	<input type="text" value="46326.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="175983.10"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="51976.68"/>	<input type="text" value="191876.55"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="227959.78"/>	<input type="text" value="238203.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="170819.21"/>	<input type="text" value="181062.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57140.57"/>	<input type="text" value="57140.57"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	42487.40	157689.29
(ii) Unitemized	6972.10	29172.02
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	49459.50	186861.31
(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)	49459.50	186861.31
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).....	2517.18	5015.24
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
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))..... ▶	51976.68	191876.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	51976.68	191876.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	2319.21	5061.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2319.21	5061.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	168500.00	176000.00
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	1.00
(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	1.00
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)) ..	170819.21	181062.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	170819.21	181062.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	49459.50	186861.31
34. Total Contribution Refunds (from Line 28(d))	0.00	1.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49459.50	186860.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2319.21	5061.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2517.18	5015.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-197.97	46.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 61
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Agha J. Ahmed F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2014 Transaction ID : 61CA4B9F594388C69A2
Mailing Address 1737 S Triple Crown Ct		Amount of Each Receipt this Period 250.00
City Wichita	State KS	Zip Code 67230-7543
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation VASCULAR MEDICINE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jay H. Alexander F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2014 Transaction ID : 4362906619E729A8C903
Mailing Address 2256 Carlyle Ct		Amount of Each Receipt this Period 250.00
City Buffalo Grove	State IL	Zip Code 60089-4695
FEC ID number of contributing federal political committee. C	Name of Employer North Shore Cardiologists, SC	Occupation ADULT CARDIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Juan M. Aranda F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2014 Transaction ID : 498588B036850EBF640C
Mailing Address 356 Turkey Crk		Amount of Each Receipt this Period 166.67
City Alachua	State FL	Zip Code 32615-9367
FEC ID number of contributing federal political committee. C	Name of Employer Shands at the University of Florida	Occupation ADULT CARDIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.34	

SUBTOTAL of Receipts This Page (optional).....▶	666.67
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Robert W. Armbruster F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7330 Stafford Dr
 City Council Blfs State IA Zip Code 51503-6008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Heart Care Center Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 31 / 2014
Transaction ID : 490C6A077E1526CEC97
 Amount of Each Receipt this Period 500.00

B. Herbert D. Aronow MPH, F.A.C
 Full Name (Last, First, Middle Initial)
 Mailing Address 5325 Elliott Dr Ste 202
 City Ypsilanti State MI Zip Code 48197-8633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 13 / 2014
Transaction ID : 4621DC78-A3A1-49EB-
 Amount of Each Receipt this Period 1000.00

C. Rafael Ason F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7100 W 20th Ave Ste 501
 City Hialeah State FL Zip Code 33016-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 03 / 24 / 2014
Transaction ID : 9A404E46DD9B3F0C251
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Amol S. Bapat MD
Full Name (Last, First, Middle Initial)

Mailing Address 195 Sherwood Pass

City Roswell State GA Zip Code 30075-6858

FEC ID number of contributing federal political committee. **C**

Name of Employer Cardiovascular Physicians of North Atl Occupation INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014
Transaction ID : 70899F41B0DA78AC33D

Amount of Each Receipt this Period 250.00

B. Michael D. Barron F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 7535 Roosees Dr

City Indianapolis State IN Zip Code 46217-5492

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014
Transaction ID : 1377F3B90EA9A531315

Amount of Each Receipt this Period 250.00

C. John N. Beattie F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 3300 Holiday Village Rd

City Traverse City State MI Zip Code 49686-3996

FEC ID number of contributing federal political committee. **C**

Name of Employer Grand Traverse Heart Associates Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014
Transaction ID : 2B770FC47741B2B870D

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)..... ▶

**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)	PAGE 9 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Alfred A. Bove PHD, M.A.C		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014 Transaction ID : 475998F0B776000BD89F
Mailing Address 110 Anton Rd		Amount of Each Receipt this Period 100.00
City Wynnewood	State PA	Zip Code 19096-1226
FEC ID number of contributing federal political committee. C		
Name of Employer Temple University Hospital	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. John A. Bowers F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 Transaction ID : 32596476CC235590EA5
Mailing Address 10 Quail Hollow Dr		Amount of Each Receipt this Period 250.00
City Henderson	State NV	Zip Code 89014-2143
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Noel G. Boyle BCH, F.A.C		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 Transaction ID : 891043EA290664C4289
Mailing Address 150 N Robertson Blvd 100 UCLA Medical Plaza, Suite 660		Amount of Each Receipt this Period 250.00
City Beverly Hills	State CA	Zip Code 90211-2142
FEC ID number of contributing federal political committee. C		
Name of Employer UCLA Medical Center	Occupation ELECTROPHYSIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)
A. Thomas A. Burkart F.A.C.C.

Mailing Address 9124 SW 51st Rd

City Gainesville State FL Zip Code 32608-8171

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Florida Occupation ELECTROPHYSIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : 9BEA4B815E35EA0E55C

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Gary J. Butchko M.D.

Mailing Address 2222 Cherry St Ste 2800

City Toledo State OH Zip Code 43608-2675

FEC ID number of contributing federal political committee. **C**

Name of Employer sai Occupation PEDIATRIC CARD.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : 7A3A78776FAEFD6E941

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
c. Joseph G. Cacchione F.A.C.C.

Mailing Address 5740 Hickory Knoll Ct

City Fairview State PA Zip Code 16415-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer Cleveland Clinic Foundation Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : 4000ADE3F53919FC5CF8

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	625.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. George E. Castro M.D., F.A.		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 Transaction ID : 29B70D57923C9A3BA41
Mailing Address 107 Governors Creek Dr		Amount of Each Receipt this Period 500.00
City Orangeburg	State SC	Zip Code 29118-9054
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Hollace D. Chastain F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 29 / 2014 Transaction ID : 4FD4B2552AABD0848409
Mailing Address 1819 Braemar Dr		Amount of Each Receipt this Period 100.00
City Fort Wayne	State IN	Zip Code 46814-9364
FEC ID number of contributing federal political committee. C		
Name of Employer Fort Wayne Cardiology	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Richard A. Chazal M.D., F.A.		Date of Receipt MM / DD / YYYY 03 / 07 / 2014 Transaction ID : 486E8611822938360204
Mailing Address 671 N Town and River Dr		Amount of Each Receipt this Period 83.34
City Fort Myers	State FL	Zip Code 33919-5931
FEC ID number of contributing federal political committee. C		
Name of Employer The Heart Group	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.01	

SUBTOTAL of Receipts This Page (optional).....▶	683.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Russell A. Ciafone F.A.C.C.		Date of Receipt
Mailing Address 66 Highridge Rd		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
West Simsbury	CT	06092-2004
FEC ID number of contributing federal political committee. C		Transaction ID : B0D259DB745F54EC560
Name of Employer Self-Employed		Amount of Each Receipt this Period
Occupation ADULT CARDIOLOGY		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		250.00

Full Name (Last, First, Middle Initial) B. Michael G. Clark PA-C, MPAS		Date of Receipt
Mailing Address 6424 Fianna Hills Dr		M M M / D D D / Y Y Y Y Y Y 03 / 15 / 2014
City	State	Zip Code
Fort Worth	TX	76132-4481
FEC ID number of contributing federal political committee. C		Transaction ID : 7EE56477-07F3-4380-
Name of Employer Fisher Cardiology and Electrophysiology		Amount of Each Receipt this Period
Occupation ADULT CARDIOLOGY		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		250.00

Full Name (Last, First, Middle Initial) c. D. Thomas Combs F.A.C.C.		Date of Receipt
Mailing Address 63045 Carnelian Ln		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
Bend	OR	97701-9015
FEC ID number of contributing federal political committee. C		Transaction ID : 38C3F070F39CE1F23DA
Name of Employer Self-Employed		Amount of Each Receipt this Period
Occupation ADULT CARDIOLOGY		300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		300.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. George H. Crossley F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 276 Stratton Pl
 City Brentwood State TN Zip Code 37027-4228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Thomas Heart Occupation ELECTROPHYSIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 25 / 2014**
Transaction ID : 44BD81016C34E8A52015
 Amount of Each Receipt this Period **250.00**

B. Stanley P. Defehr F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3140 SE Bison Rd
 City Bartlesville State OK Zip Code 74006-7647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Stem Cardiology Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : 7FADE64466D7325D838
 Amount of Each Receipt this Period **1000.00**

C. Howard J. Eisen F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 N 15th St Mail Stop 1012
 City Philadelphia State PA Zip Code 19102-1101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Drexel University College of Medicine Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : C23AD4F95F3D20CD1BF
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. David M. Evans F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Ashlei Ln
 City Searcy State AR Zip Code 72143-3024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Heart Clinic Arkansas Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2014
Transaction ID : 4D7081BBB27740007AAF
 Amount of Each Receipt this Period
 100.00

B. Susan I. Farkas F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1406 62nd Ave N
 City Fargo State ND Zip Code 58102-6001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sanford Heart Center Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : 7EFB3B069FD88948389
 Amount of Each Receipt this Period
 500.00

C. Victor A. Ferrari F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3400 Spruce St
 City Philadelphia State PA Zip Code 19104-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hospital of the University of Pennsylv Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : 78681F4D3F57D45F6AD
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Kevin Fitzpatrick		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014 Transaction ID : 459A9845CEFD81BF2BC4
Mailing Address 2400 N St NW Heart House		Amount of Each Receipt this Period 83.34
City Washington	State DC	Zip Code 20037-1153
FEC ID number of contributing federal political committee. C		
Name of Employer American College of Cardiology	Occupation ADMINISTRATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

Full Name (Last, First, Middle Initial) B. Eduardo D. Flores F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014 Transaction ID : 70A8F44D855ED2B1894
Mailing Address 905 E Canton Rd		Amount of Each Receipt this Period 365.00
City Edinburg	State TX	Zip Code 78539-7014
FEC ID number of contributing federal political committee. C		
Name of Employer Heart Clinic, Inc.	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) C. Andrew M. Freeman F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014 Transaction ID : 2018427A363401FA788
Mailing Address 1220 S Saint Paul St		Amount of Each Receipt this Period 250.00
City Denver	State CO	Zip Code 80210-2031
FEC ID number of contributing federal political committee. C		
Name of Employer National Jewish Health	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	698.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. George D. Gibson F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1901 N Elizabeth St
 City Pueblo State CO Zip Code 81003-4056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pueblo Cardiology Associates Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : 79663A6860F9E592C62
 Amount of Each Receipt this Period **500.00**

B. Osvaldo S. Gigliotti F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2310 Pruett St
 City Austin State TX Zip Code 78703-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Seton Heart Institute Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 18 / 2014**
Transaction ID : 1BE5D473-4386-4FF7-
 Amount of Each Receipt this Period **250.00**

C. Michael F. Gilson F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Prospect St
 City Providence State RI Zip Code 02906-1446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 03 / 2014**
Transaction ID : 456C99D8505AA7F72591
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **850.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Fredric Ginsberg F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : 74CCC3F17A08520FCE
Mailing Address 1 Cooper Plz FI 3		Amount of Each Receipt this Period 250.00
City Camden	State NJ	Zip Code 08103-1461
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Thomas B. Gore M.D., F.A.		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : 8744614147E8092334C
Mailing Address 106 Clubview Dr		Amount of Each Receipt this Period 250.00
City Lagrange	State GA	Zip Code 30240-1001
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. David R. Holmes M.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 25 / 2014 Transaction ID : 4661B6709F9C166646E2
Mailing Address 1122 21st St NE		Amount of Each Receipt this Period 83.34
City Rochester	State MN	Zip Code 55906-4059
FEC ID number of contributing federal political committee. C		
Name of Employer Mayo Clinic	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02	

SUBTOTAL of Receipts This Page (optional).....▶	583.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Daniel J. Humiston F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1928 Maple Hollow Way
 City Bountiful State UT Zip Code 84010-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Utah Cardiology, PC Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **625.01**

Date of Receipt **03 / 07 / 2014**
Transaction ID : 423B9C4FB263423A8A39
 Amount of Each Receipt this Period **208.34**

B. Pamela A. Ivey F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 Quail Run Rd
 City Henderson State NV Zip Code 89014-2148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cardiovascular Consultants of Nevada-H Occupation CLINICAL CARDIOLOGY/GENERAL CARDIOI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 31 / 2014**
Transaction ID : C1435193BCA3715ADC8
 Amount of Each Receipt this Period **500.00**

C. Zev Jacobson F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 167 Summit Ln
 Division of Cardiology -- 8th Floor
 City Bala Cynwyd State PA Zip Code 19004-2918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Core Pediatric Cardiology, PC Occupation PEDIATRIC CARD.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 24 / 2014**
Transaction ID : B77564D25043422B70C
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....	1208.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Alan Jansujwicz MS, F.A.C.		Date of Receipt
Mailing Address 225 Cedar St		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bangor	ME	04401-4639
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : DDA934CAE53A66C3AC6
Name of Employer	Occupation	Amount of Each Receipt this Period
Northeast Cardiology Associates	CLINICAL CARDIOLOGY/GENERAL CARDIO	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Kathy J. Jenkins MPH, F.A.C		Date of Receipt
Mailing Address 300 Longwood Ave		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Boston	MA	02115-5724
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : DD7EA916CB88E9FE98B
Name of Employer	Occupation	Amount of Each Receipt this Period
Childrens Hospital Boston	PEDIATRIC CARD.	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Oji Joseph F.A.C.C.		Date of Receipt
Mailing Address 8314 Tivoli Dr		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
Orlando	FL	32836-8776
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : BD0418A403A140A8852
Name of Employer	Occupation	Amount of Each Receipt this Period
Polk Cardiovascular Services	ADULT CARDIOLOGY	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="950.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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)	PAGE 22 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Sanjiv Kaul F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3181 SW Sam Jackson Park Rd
 Division of Cardiology Uhn-62
 City Portland State OR Zip Code 97239-3011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Oregon Health & Science University Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2014
Transaction ID : 13420FAA-D8AE-4F58-
 Amount of Each Receipt this Period
500.00

B. Mohammed Kazimuddin F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 Rivergreen Ln
 City Bowling Green State KY Zip Code 42103-8729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Western Kentucky Heart & Lung Asso. Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2014
Transaction ID : A83975020B375DA2B4C
 Amount of Each Receipt this Period
250.00

C. Rachel D. Keever F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Montrose Dr
 City Shelby State NC Zip Code 28150-6064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sanger Clinic Occupation ECHOCARDIOGRAPHY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2014
Transaction ID : 95A249DFE957C727CDC
 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).....	

**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)	PAGE 23 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Jerry D. Kennett M.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4614 Copperstone Ct
 City Columbia State MO Zip Code 65203-1696
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Missouri Cardiovascular Specialists Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1250.00**

Date of Receipt **03 / 07 / 2014**
Transaction ID : 4046B5E0970BD7E3742D
 Amount of Each Receipt this Period **500.00**

B. J. Patrick Kleaveland F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2188 S Cedar Crest Blvd
 City Allentown State PA Zip Code 18103-9600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lehigh Valley Heart Specialists Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 24 / 2014**
Transaction ID : 6ED736F1B7EED9BCABA
 Amount of Each Receipt this Period **250.00**

C. Richard J. Kovacs F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 Senate Blvd Mpc-2 Suite 4000
 City Indianapolis State IN Zip Code 46202-1228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Krannert Institute of Cardiology Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 12 / 2014**
Transaction ID : DC29FD0E-B29C-4C3C-
 Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **1750.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Karla Marie Kurrelmeyer M.D., F.A.		Date of Receipt
Mailing Address 4036 Ruskin St		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Houston	TX	77005-4335
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : 65E7978B7F7C67FFAA8
Methodist Debakey Heart Center	ECHOCARDIOGRAPHY	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. Vincent S. La DELia F.A.C.C.		Date of Receipt
Mailing Address 44 Saddleridge Dr		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
Elmira	NY	14903-7974
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : 7CFA8C50CAA8F98C37A
Guthrie Cardiology	ADULT CARDIOLOGY	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) C. Ellis W. Lader F.A.C.C.		Date of Receipt
Mailing Address 636 Hurley Ave		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
Hurley	NY	12443-5114
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : DD6409DF142EC4B3409
Mid-Valley Cardiology	ADULT CARDIOLOGY	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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)	PAGE 26 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Jerre F. Lutz F.A.C.C.

Full Name (Last, First, Middle Initial)
Mailing Address 4627 Shiloh Ridge Trl

City Snellville State GA Zip Code 30039-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer Emory University School of MedicineDep Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : 9F16FCA096E1344D247

Amount of Each Receipt this Period
 1000.00

B. Michael J. Mack F.A.C.C.

Full Name (Last, First, Middle Initial)
Mailing Address 1100 Allied Dr Ste 4418

City Plano State TX Zip Code 75093-5348

FEC ID number of contributing federal political committee. **C**

Name of Employer The Heart Hospital Baylor Plano Occupation CARDIOTHORACIC SURGERY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2014
Transaction ID : A8B683E7-37C6-4002-

Amount of Each Receipt this Period
 500.00

C. Sunil V. Mankad F.A.C.C.

Full Name (Last, First, Middle Initial)
Mailing Address 200 1st St SW Gonda 5 South Room 5-209

City Rochester State MN Zip Code 55905-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Mayo Clinic Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2014
Transaction ID : C07FB7C3-10EA-4F40-

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Sunil V. Mankad F.A.C.C.		Date of Receipt
Mailing Address 200 1st St SW Gonda 5 South Room 5-209		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City Rochester	State MN	Zip Code 55905-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4EB7BB7A7EA57BFE7EDE
Name of Employer Mayo Clinic	Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period <input type="text" value="83.33"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="333.33"/>	

Full Name (Last, First, Middle Initial) B. David C. May PHD, F.A.C		Date of Receipt
Mailing Address 953 Creek Xing		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Coppell	State TX	Zip Code 75019-6322
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 71FEBAEAA5274BBC2DC
Name of Employer Cardiovascular Specialists, PA	Occupation INTERVENTIONAL CARDIOLOGY	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Andrew L. Mecca F.A.C.C.		Date of Receipt
Mailing Address 2315 Myrtle St Ste 190		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Erie	State PA	Zip Code 16502-4604
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : BFCC59606C676112DD2
Name of Employer Self-Employed	Occupation ELECTROPHYSIOLOGY	Amount of Each Receipt this Period <input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1333.33"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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)	PAGE 28 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Margo B. Minissian MSN, CNS,
Full Name (Last, First, Middle Initial)

Mailing Address 444 S San Vicente Blvd
Ste 600

City Los Angeles State CA Zip Code 90048-4174

FEC ID number of contributing federal political committee. **C**

Name of Employer Cedars Sinai Heart Institute Womens He
Occupation PREVENTIVE CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
552.00

Date of Receipt
03 / 16 / 2014
Transaction ID : 46DF8D57785218F1596C

Amount of Each Receipt this Period
184.00

B. Michael J. Mirro F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 2005 Prestwick Ln

City Fort Wayne State IN Zip Code 46814-9317

FEC ID number of contributing federal political committee. **C**

Name of Employer Fort Wayne Cardiology Corporation
Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 31 / 2014
Transaction ID : CFEB8EE8094E6703EF1

Amount of Each Receipt this Period
500.00

C. Douglas C. Morris F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 1853 Breckenridge Dr NE

City Atlanta State GA Zip Code 30345-4050

FEC ID number of contributing federal political committee. **C**

Name of Employer Emory Heart Center
Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 24 / 2014
Transaction ID : 4FAF6F3AD7873ECC1D4

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1184.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Marc A. Mugmon F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : 4A1A9C0F12B6C304BE81
Mailing Address 7193 Collingwood Ct		Amount of Each Receipt this Period 83.34
City Elkridge	State MD	Zip Code 21075-5548
FEC ID number of contributing federal political committee. C	Name of Employer Chesapeake CardioVascular Associates	
Occupation ADULT CARDIOLOGY		Aggregate Year-to-Date ▼ 250.02
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Peter K. O'Brien F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 Transaction ID : EE4C34E2ADF1BBB0226
Mailing Address 105 Lambeth Ct		Amount of Each Receipt this Period 500.00
City Lynchburg	State VA	Zip Code 24503-2148
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	
Occupation ADULT CARDIOLOGY		Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vincent M. Pacienza M.D., F.A.		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 Transaction ID : 61BDAD37FD8AC694581
Mailing Address 75 Plandome Rd		Amount of Each Receipt this Period 500.00
City Manhasset	State NY	Zip Code 11030-2303
FEC ID number of contributing federal political committee. C	Name of Employer Manhasset Cardiovascular PC	
Occupation ADULT CARDIOLOGY		Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	1083.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Bruce Lee Palmer F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3500 Arena Rd
 City State Zip Code
 Wichita Falls TX 76310-5122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Wichita Heart and Vascular INTERVENTIONAL CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : 45F39399DD2FD3B74BD
 Amount of Each Receipt this Period
 365.00

B. Vaughn W. Payne F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 Hager Ln
 City State Zip Code
 Staffordsville KY 41256-9144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kentucky Heart Institute ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 249.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : 4657B98671756ACE5EB6
 Amount of Each Receipt this Period
 83.33

c. Douglas James Pearce F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4230 Harding Pike
 Ste 330
 City State Zip Code
 Nashville TN 37205-2018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Saint Thomas Health Services ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2014
Transaction ID : 93AE7BB3-B256-4265-
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....	1448.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. William H. Pentz F.A.C.C.		Date of Receipt
Mailing Address 20 Rebel Rd		M M M / D D D / Y Y Y Y Y Y 03 / 01 / 2014
City Radnor	State PA	Zip Code 19087-2809
FEC ID number of contributing federal political committee. C		Transaction ID : 4CA99FBFC5F4C74B00B9
Name of Employer Penn Cardiology At Pennsylvania Hospit		Amount of Each Receipt this Period
Occupation ADULT CARDIOLOGY		90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	270.00	

Full Name (Last, First, Middle Initial) B. John G. Peterson F.A.C.C.		Date of Receipt
Mailing Address 2341 S Pittsburg St		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City Spokane	State WA	Zip Code 99203-3866
FEC ID number of contributing federal political committee. C		Transaction ID : 29BCF89CC4C5D2CFFCB
Name of Employer Spokane Cardiology		Amount of Each Receipt this Period
Occupation ADULT CARDIOLOGY		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) C. John W. Pickrell F.A.C.C.		Date of Receipt
Mailing Address 1909 Elkhorn Valley Dr		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City Casper	State WY	Zip Code 82609-4620
FEC ID number of contributing federal political committee. C		Transaction ID : 4D3D9F9711CF335C9CEA
Name of Employer Wyoming CardioPulmonary		Amount of Each Receipt this Period
Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO		85.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	255.00	

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Gregg J. Reis F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Seven Springs Rd
 City Wayne State PA Zip Code 19087-2813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Phoenixville Hospital Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : 72B2EA0BC0054DB4E52
 Amount of Each Receipt this Period
 500.00

B. John F. Robb F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Medical Center Dr
 City Lebanon State NH Zip Code 03756-1000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dartmouth-Hitchcock Medcl Ctr Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 29 / 2014
Transaction ID : 81C5DCD1-9761-4E57-
 Amount of Each Receipt this Period
 250.00

C. George P. Rodgers M.D., F.A.
 Full Name (Last, First, Middle Initial)
 Mailing Address 11673 Jollyville Rd Ste 205-B
 City Austin State TX Zip Code 78759-4200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2014
Transaction ID : 4F75A6069FB0CCF08EB1
 Amount of Each Receipt this Period
 83.34

SUBTOTAL of Receipts This Page (optional).....▶	833.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Felix J. Rogers F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5400 Fort St
 Ste 200
 City State Zip Code
 Trenton MI 48183-4636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : 1EB2FBA2EEBF5F6D6EB
 Amount of Each Receipt this Period
 250.00

B. Robert Calvin Rollings F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 W Bluff Dr
 City State Zip Code
 Savannah GA 31406-7550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Savannah Cardiology, P.C. ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2014
Transaction ID : DE929315E844655E9E9
 Amount of Each Receipt this Period
 250.00

C. John S. Rumsfeld PHD, F.A.C
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 S Cherry St
 City State Zip Code
 Denver CO 80246-1031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 249.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : 4600AA3CEA262B264D4A
 Amount of Each Receipt this Period
 83.33

SUBTOTAL of Receipts This Page (optional).....	583.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. Victor M. Salgado F.A.C.C.		Date of Receipt
Mailing Address Las Praderas #6 Bo. Pueblo		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City Hatillo	State PR	Zip Code 00659
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : AF1FA539E3BC8788B22
Name of Employer Centro Cardiovascular de Arecibo		Amount of Each Receipt this Period
Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) B. Michael K. Schroyer A.A.C.C.,		Date of Receipt
Mailing Address 9065 Pebblepointe Cir		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City Zionsville	State IN	Zip Code 46077-8992
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 405BB3725CDFC28D6692
Name of Employer Saint Vincent Heart Center of Indiana		Amount of Each Receipt this Period
Occupation ADMINISTRATION		<input type="text" value="83.34"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.02"/>		

Full Name (Last, First, Middle Initial) c. Tushar Nandlal Shah F.A.C.C.		Date of Receipt
Mailing Address 241 Summerford PI		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City Centerville	State OH	Zip Code 45458-4633
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 0306707801AD2D991A6
Name of Employer Self-Employed		Amount of Each Receipt this Period
Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="633.34"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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)	PAGE 35 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Jonathan A. Sherman F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 9811 Highland Glen Pl
 City Colorado Springs State CO Zip Code 80920-2439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pikes Peak Cardiology Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 31 / 2014
Transaction ID : E21E0A03E849CB5932E
 Amount of Each Receipt this Period 400.00

B. M. Eugene Sherman F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5110 S Hanover Way
 City Englewood State CO Zip Code 80111-6239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Heart Specialists of Colorado Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2014
Transaction ID : 35D2A2A0E5B6BD93AF0
 Amount of Each Receipt this Period 2500.00

c. David J. Slotwiner F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 Loring Ave
 City Pelham State NY Zip Code 10803-2014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Long Island Jewish Medical Center Occupation ELECTROPHYSIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014
Transaction ID : 1CC89EFB9A163453B7C
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....▶	3150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. William T. Smith F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1912 Hallmark Ln
 City State Zip Code
 Wilmington NC 28405-6225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cape Fear Heart Associates ELECTROPHYSIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2014
Transaction ID : 457D89E1FFA6EAC5B90D
 Amount of Each Receipt this Period
 250.00

B. Richard W. Snyder F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5514 Yolanda Ln
 City State Zip Code
 Dallas TX 75229-6440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Heart Place INTERVENTIONAL CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2014
Transaction ID : 245FC6AF984F7795FA2
 Amount of Each Receipt this Period
 2500.00

c. Robert S. Spadafora F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7865 E Stonecliff Cir
 City State Zip Code
 Mesa AZ 85207-1471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : DEE96D70F31496D8068
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. John S. Strobel F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : 8A88806729DAA6B6F6F
Mailing Address 3407 E Olcott Blvd		Amount of Each Receipt this Period 250.00
City Bloomington	State IN	Zip Code 47401-2429
FEC ID number of contributing federal political committee. C	Name of Employer Internal Medicine Associates	Occupation ELECTROPHYSIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Suma A. Thomas F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 25 / 2014 Transaction ID : 4BA3897C8170C1C4A2C1
Mailing Address 7620 Old Georgetown Rd Apt 1214		Amount of Each Receipt this Period 208.34
City Bethesda	State MD	Zip Code 20814-6182
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.02	

Full Name (Last, First, Middle Initial) C. E. Murat Tuzcu F.A.C.C.		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 Transaction ID : 9680F9B765D05CE4129
Mailing Address 3211 Lander Rd		Amount of Each Receipt this Period 1000.00
City Pepper Pike	State OH	Zip Code 44124-5444
FEC ID number of contributing federal political committee. C	Name of Employer Cleveland Clinic Foundation	Occupation ADULT CARDIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1458.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Carson S. Webb
Full Name (Last, First, Middle Initial)

Mailing Address 900 Poplar Dr

City Fairbanks State AK Zip Code 99709-3559

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014
Transaction ID : A1608A5639572100C33

Amount of Each Receipt this Period 250.00

B. Harvey J. White F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 1020 El Pueblo Rd NW

City Los Ranchos State NM Zip Code 87114-1203

FEC ID number of contributing federal political committee. **C**

Name of Employer Vessel Health Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2014
Transaction ID : C2F394BADE03CF3822D

Amount of Each Receipt this Period 1000.00

C. Michael C. Widmer F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 2753 NE Red Oak Dr

City Bend State OR Zip Code 97701-8348

FEC ID number of contributing federal political committee. **C**

Name of Employer St. Charles Heart and Lung Center Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt 03 / 25 / 2014
Transaction ID : 4AC1966E4DEB1E9BFF8F

Amount of Each Receipt this Period 83.33

SUBTOTAL of Receipts This Page (optional)..... ▶ 1333.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial) A. John S. Williamson F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014 Transaction ID : 8561DBCEF33FC97401B
Mailing Address PO Box 30084		Amount of Each Receipt this Period 300.00
City Reno	State NV	Zip Code 89520-3084
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Richard F. Wright F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2014 Transaction ID : 400692293C1925901392
Mailing Address 1038 S Carmelina Ave		Amount of Each Receipt this Period 150.00
City Los Angeles	State CA	Zip Code 90049-5810
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Heart Institute	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Lambert A. Wu F.A.C.C.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2014 Transaction ID : 4474AA3B8E5AC7C5E514
Mailing Address 1524 NW Grove Ave		Amount of Each Receipt this Period 208.34
City Topeka	State KS	Zip Code 66606-1234
FEC ID number of contributing federal political committee. C		
Name of Employer Cotton O'Neil Heart Center	Occupation ECHOCARDIOLOGY/ECHOCARDIOGRAPHY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.02	

SUBTOTAL of Receipts This Page (optional).....▶	658.34
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 42 OF 61
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stuart W. Zarich F.A.C.C.

Mailing Address 259 Longmeadow Rd

City State Zip Code
Fairfield CT 06824-1734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 29 / 2014

Transaction ID : **D9B606F9-5E60-482E-**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	42487.40

**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)	PAGE 43 OF 61
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A. American College of Cardiology - Admin Account

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 85024

City Richmond State VA Zip Code 23285-5024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5015.24

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2014
Transaction ID : D9343D3A903B62A1F77

Amount of Each Receipt this Period
2517.18

Reimbursement for February Amex Fees and March Merchant Fees

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2517.18
TOTAL This Period (last page this line number only).....▶	2517.18

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
March 2014 Amex Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VC2D10FC3DC399399278

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Wells Fargo, N.A.

Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City Knoxville State TN Zip Code 37920

Purpose of Disbursement
March 2014 Merchant Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : M97F8EFD8CE60EE0875B

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. AMERIPAC: The Fund for a Greater America

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address 700 13th Street, NW
Suite 600

Transaction ID : F7CDD87B5CF31C2E188

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
2014 Contribution

011
Category/ Type

Candidate Name

AMERIPAC: The Fund for a Greater America

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: District:

Full Name (Last, First, Middle Initial)

B. Ami Bera for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address PO Box 582496

Transaction ID : 2440B8F089AFE201504

City Elk Grove State CA Zip Code 95758

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
2014 General

011
Category/ Type

Candidate Name

Ameriash B. Bera

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: CA District: 07

Full Name (Last, First, Middle Initial)

C. Andy Harris for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Mailing Address PO Box 604

Transaction ID : DCCCA7EE77ADD9FFA3B

City Bel Air State MD Zip Code 21014

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
2014 Primary

011
Category/ Type

Candidate Name

Andrew P. Harris

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: MD District: 01

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. BADGERPAC

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
2014 Contribution

011

Candidate Name

BADGERPAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : **FE575C208B1E1DFAA99**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Bill Flores for Congress

Mailing Address PO Box 6207

City Bryan State TX Zip Code 77805

Purpose of Disbursement
2014 Primary

011

Candidate Name

William H. Flores

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: TX District: 17

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2014

Transaction ID : **D1F6E1C5F23AD7A722C**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Brady for Congress

Mailing Address PO Box 8277

City the Woodlands State TX Zip Code 77387-8277

Purpose of Disbursement
2014 General

011

Candidate Name

Kevin Brady

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: TX District: 08

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : **881DC9E753DB7CAF855**

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

12500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bucshon for Congress

Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Larry D. Bucshon

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IN District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : E5EF9C4CA9BB150E8A3

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Castor for Congress

Mailing Address 301 W Platt Street, #385

City Tampa State FL Zip Code 33606

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Katherine Anne Castor

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	4

Transaction ID : 959CF682FBDF6A56EA4

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Charles Boustany Jr. MD for Congress, Inc.

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598-0126

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Charles W. Boustany Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : A1A1F4975E4A3AE4593

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

7	5	0	0	.	0	0
---	---	---	---	---	---	---

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Cochran

Mailing Address PO Box 7183

City State Zip Code
Tupelo MS 38802

Purpose of Disbursement
2014 Primary

011

Candidate Name
William Thad Cochran

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : B61D3812CA3BB694196

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Collins for Senator

Mailing Address PO Box 1096

City State Zip Code
Bangor ME 04402

Purpose of Disbursement
2014 General

011

Candidate Name
Susan Margaret Collins

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

Transaction ID : 77FFFDA8F4B988A1720

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Collins for Senator

Mailing Address PO Box 1096

City State Zip Code
Bangor ME 04402

Purpose of Disbursement
2014 Primary

011

Candidate Name
Susan Margaret Collins

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

Transaction ID : C97A1B544B9D6CDCA97

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee To Re-Elect Linda Sanchez

Mailing Address 410 1st St SE
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Linda T. Sanchez

Office Sought: House
 Senate
 President
State: CA District: 38

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : B24FC0DBB8C7A0B33B0

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
2014 Contribution

011
Category/
Type

Candidate Name

Democratic Congressional Campaign Committee

Office Sought: House
 Senate
 President
State: District: Contribution

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : 6BC5C25BB32D6776E85

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Dr. Raul Ruiz for Congress

Mailing Address PO Box 6116

City La Quinta State CA Zip Code 92248

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Raul Ruiz

Office Sought: House
 Senate
 President
State: CA District: 36

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : DB42D3D17F32D984587

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

20000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Engel for Congress

Mailing Address 462 California Road

City State Zip Code
Bronxville NY 10708

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Eliot L. Engel

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 16

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : E42B4A10225DBBA388B

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Every Republican Is Crucial (ERICPAC)

Mailing Address 25 E Main Street
Suite 200

City State Zip Code
Richmond VA 23219-2109

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Every Republican Is Crucial (ERICPAC)

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : 79DB81D6F05FB934258

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends of Joe Heck

Mailing Address PO Box 750114

City State Zip Code
Las Vegas NV 89136

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Joseph Heck Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : 3DC7E6DA4E4F1222616

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Joe Heck

Mailing Address PO Box 750114

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Joseph Heck Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : **0B215BEB356B41C6B1D**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Friends of Joe Pitts

Mailing Address PO Box 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Joseph R. Pitts

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : **E00CF2966A22CC1E972**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Friends of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Lois Capps

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : **CB9ACFC2A822D259B3B**

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7500.00

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement
2014 Primary

011

Candidate Name
Lois Capps

Category/
Type

Office Sought: House Senate President
State: CA District: 24

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : 4446A6B251B0A23FFFD

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Friends of Sherrod Brown

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement
2018 Primary

011

Candidate Name
Sherrod Brown

Category/
Type

Office Sought: House Senate President
State: OH District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	8

Transaction ID : D68CA5BEF0ADF9BDC63

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Gene Green Congressional Campaign

Mailing Address PO Box 16128

City Houston State TX Zip Code 77222

Purpose of Disbursement
2014 Primary

011

Candidate Name
Raymond Eugene Green

Category/
Type

Office Sought: House Senate President
State: TX District: 29

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	4

Transaction ID : CE009A3F86B7D347FB3

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

9	0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

9	0	0	0	.	0	0
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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Guthrie for Congress

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102-9639

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

S. Brett Guthrie

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : D3CB30DA8B65750CA6F

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Guthrie for Congress

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102-9639

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

S. Brett Guthrie

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : C2342FB2E7C74ACA6D9

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. Healthcare Freedom Fund

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Healthcare Freedom Fund

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : DB832927DC5528CBA68

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7	5	0	0	0	0	0	0	0	0
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7	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Himes for Congress

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement
2014 Convention

011

Candidate Name

James A. Himes

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CT District: 04

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : A24DFDC81923DDA802F

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Hope for Congress

Mailing Address PO Box 3060

City Arlington State VA Zip Code 22203

Purpose of Disbursement
2014 General

011

Candidate Name

Patrick A. Hope

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2014

Transaction ID : 4FB96B3D820CC7C466F

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Hope for Congress

Mailing Address PO Box 3060

City Arlington State VA Zip Code 22203

Purpose of Disbursement
2014 Primary

011

Candidate Name

Patrick A. Hope

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2014

Transaction ID : CDA8892178FC70426A1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

10000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoyer for Congress

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2014 General

011

Candidate Name

Steny H. Hoyer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : F9FB794513D2F5C77E8

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kevin McCarthy for Congress

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement
2014 General

011

Candidate Name

Kevin McCarthy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

Transaction ID : 650155C93261C67F12E

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Levin for Congress

Mailing Address PO Box 37

City Roseville State MI Zip Code 48066

Purpose of Disbursement
2014 Primary

011

Candidate Name

Sander M. Levin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : C76797F1886CB8E0F2D

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)..... ▶

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lone Star Leadership PAC

Mailing Address PO Box 30844

City State Zip Code
Bethesda MD 20824

Purpose of Disbursement
2014 Contribution

011

Candidate Name

Lone Star Leadership PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : 90BB4032FC51D2EFB38

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. McConnell Senate Committee '14

Mailing Address PO Box 1496

City State Zip Code
Louisville KY 40201

Purpose of Disbursement
2014 General

011

Candidate Name

Mitch McConnell

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : AE2563FCA91B483E643

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. Michael Burgess for Congress

Mailing Address PO Box 2334

City State Zip Code
Denton TX 76202-2334

Purpose of Disbursement
2014 General

011

Candidate Name

Michael Clifton Burgess

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : F03733A1536B3FB8DAC

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	2	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	2	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. MoBrooksForCongress.Com

Mailing Address 7610 Foxfire Dr.

City Huntsville State AL Zip Code 35802

Purpose of Disbursement
2014 Primary

011

Candidate Name

Morris Jackson Brooks Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AL District: 05

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2014

Transaction ID : A37245B17259A5BFCEF

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Committee

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2014 Contribution

011

Candidate Name

National Republican Congressional Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : 3CDDC86461E23C289E3

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Pascrell for Congress

Mailing Address PO Box 100

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
2014 General

011

Candidate Name

William J. Pascrell Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 09

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : 0750B5991865B96DF80

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

19000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pat Roberts for U.S. Senate, Inc.

Mailing Address PO Box 433

City State Zip Code
Great Bend KS 67530

Purpose of Disbursement
2014 Primary

Candidate Name
Pat Roberts

Office Sought: House
 Senate
 President
State: KS District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			19			2014			

Transaction ID : 53AD7507ACE3E738D04

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Paul Tonko for Congress

Mailing Address 911 Central Avenue
PO Box 221

City State Zip Code
Albany NY 12206

Purpose of Disbursement
2014 Primary

Candidate Name
Paul D. Tonko

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			26			2014			

Transaction ID : 36D8D1D57E2DB04C0CD

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. People for Enterprise Trade and Economic Growth (PETE PAC)

Mailing Address 7804 Evening Lane

City State Zip Code
Alexandria VA 22306-2754

Purpose of Disbursement
2014 Contribution

Candidate Name
People for Enterprise Trade and Economic Growth (PETE PAC)

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			19			2014			

Transaction ID : C7B33C054DEE7C7ADFC

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Renee Ellmers for Congress Committee

Mailing Address PO Box 99567

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Renee Jacisin Ellmers

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : DD8DB821581CBB1B8C8

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Roskam for Congress Committee

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Peter J. Roskam

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : 7A268D758321F386AC7

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Shore PAC

Mailing Address PO Box 3157

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Shore PAC

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : 38C047D89DEA495F79C

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

1	0	0	0	.	0	0
---	---	---	---	---	---	---

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Southerland for Congress

Mailing Address PO Box 1692

City Lynn Haven State FL Zip Code 32444

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

William Steve Southerland II

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2014

Transaction ID : 8A6E47C5DC31EA59E00

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Steve Israel for Congress Committee

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Steve J. Israel

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : 670FC1DEB4A509685E4

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Texans for Senator John Cornyn Inc

Mailing Address PO Box 13026

City Austin State TX Zip Code 78711

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

John Cornyn III

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : 7554FA306BAAEF9CE7A

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

8500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Voice for Freedom

Mailing Address 2700 Cumberland Parkway, Suite 150

City Atlanta State GA Zip Code 30339

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Voice for Freedom

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : 41D88D261DA41C842B8

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Volunteers for Shimkus

Mailing Address PO Box 661

City Collinsville State IL Zip Code 62234-0661

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

John M. Shimkus

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: IL District: 15

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2014

Transaction ID : 3A48A1C6A1D14405AF2

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Walden for Congress

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031-0037

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Gregory P. Walden

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: OR District: 02

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2014

Transaction ID : A76CFB34629F714B830

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

10000.00

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

168500.00