FEC FORM 3X	AN	EPORT (ID DISB Other Than /	URSEM	ENTS	ee	C	office Use Only
1. NAME OF COMMITTEE (in fu		FEC MAILING I		ample:If typing er the lines	ı, type		
) (OB-GYN PAC)			
ADDRESS (number and	street)	09 12TH STREE	T, SW				
Check if differ than previousl reported. (ACC	× ، ۷	VASHINGTON					20024
2. FEC IDENTIFICAT	ION NUMBER	₩ -	CITY 🛋		S	TATE	ZIPCODE
C00364158			3. IS THIS REPORT		NEW (N) OR	AMEI (A)	NDED
July 15 Quarterly October Quarterly January 3 Quarterly	orts: Report(Q1) Report(Q2) I5 Report(Q3) 31 Report(YE)	(b) Monthly Report Due On: (c) 12-Day PRE -Ele Report fr) X		Aug 20 Sep 20 Oct 20 General (120 Special (120	Year Only (M9) Dec 20 (M12) (Non-Election Year Only) (M10) Jan 31 (YE) G) Runoff (12R)
Year Onl	on-election	(d) 30-Day Post -E Report fo		General (300	3)	Runoff (30R	i) Special (30S) in the State of
5. Covering Period	05	01 20)11	through	05	31	2011
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer STACIE MONROE Signature of Treasurer Electronically Filed by STACIE MONROE Date 0.6 0.9 2.0.1.1							
NOTE : Submission of f	alse, erroneous	s, or incomplete in	formation may s	ubject the pers	on signing this	Report to the pe	enalties of 2 U.S.C 437g.
Office Use Only							FEC FORM 3X (Rev. 12/2004)

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

٧	Vrite or Type Committee Name THE AMERICAN CONGRESS OF OB-GYN	S PAC (OB-GYN PAC)	
F	Report Covering the Period: From:	D D Y Y Y Y Y 0 1 2 0 1 1	To:
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2011 ^{Y Y Y}		231135.44
	(b) Cash on Hand at Begining of Reporting Period	335194.32	
	(c) Total Receipts (from Line 19)	30692.33	279103.65
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	365886.65	510239.09
7.	Total Disbursements (from Line 31)	42435.23	186787.67
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	323451.42	323451.42
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC) м м 05 01 м м 05 3^D1 D 2011 D 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period Calendar Year-to-Date** 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 24877.33 218483.99 (i) Itemized (use Schedule A) 5815.00 60364.66 (ii) Unitemized (iii) TOTAL (add 30692.33 278848.65 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees (C) 0.00 0.00 (such as PACs) (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 30692.33 278848.65 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 255.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 30692.33 279103.65 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 30692.33 279103.65 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE of Disbursements

COLUMN A

Total This Period

FEC Form 3X (Rev. 02/2003)

IL DISBURSEMENTS

		II. DISBURSEMENTS					
21.	Ope (a)	erating Expenditures: Shared Federal/Non-Federal Activity (from Schedule H4)					
		(i) Federal Share					
		(ii) Non-Federal Share					
	(b)	Other Federal Operating					
	. ,	Expenditures					
	(c)	Total Operating Expenditures					
		(add 21(a)(i), (a)(ii) and (b))					
22.	Tra	nsfers to Affiliated/Other Party					
		nmittees					
23.		ntributions to					
	and	leral Candidates/Committees					
24.	Independent Expenditure						
05		e Schedule E)					
25.	Cor	ordinated Expenditures Made by Party nmittees (2 U.S.C. 441a(d))					
	(use	nmittees (2 U.S.C. 441a(d)) e Schedule F)					
		-					
26.	Loa	n Repayments Made					
07	1	ve Mede					
27. 28.		ns Made unds of Contributions To:					
20.	(a)	Individuals/Persons Other					
		Than Political Committees					
	(b)	Political Party Committees					
	(C) (C)	Other Political Committees					
	(0)	(such as PACs)					
	(d)	Total Contribution Refunds					
	(0)	(add Lines 28(a), (b), and (c))					

29. Other Disbursements	
-------------------------	--

30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) (i) Federal Share

(ii) "Levin" Share

- (b) Federal Election Activity Paid Entirely With Federal Funds
- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

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Page 4

COLUMN B

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			0.00

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186787.67

DETAILED SUMMARY PAGE

of Disbursements

	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)	30692.33	278848.65
34.	Total Contribution Refunds (from Line 28(d))	0.00	900.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	30692.33	277948.65
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	935.23	5887.67
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	935.23	5887.67

			FOR LINE NUMBER: PAGE 6/34
	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	(check only one)
I	TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
_			13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
Γ			
	THE AMERICAN CONGRESS OF OE	3-GYNS PAC (OB-GYN PAC)	
A.	Full Name (Last, First, Middle Initial) TED L. ANDERSON	Date of Receipt	
	Mailing Address 516 LEANNE WAY		05 / 06 / Y Y Y Y 05 / 06
	City	State Zip Code	Transaction ID: SA11AI.22253
	FRANKLIN	TN 37069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	750.00
	Name of Employer VANDERBILT UNIVERSITY	Occupation PHYSICIAN	1
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	1500.00	1
-	Other (specify)		
В.	Full Name (Last, First, Middle Initial) THOMAS F. ARNOLD		Date of Receipt
	Mailing Address 1145 14TH AVENUE	M M / D D / Y Y Y Y 05 06 2011	
	City	State Zip Code	Transaction ID: SA11AI.22254
	DICKINSON	ND 58601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer MEDICAL CENTER ONE	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1510.00	
– C.	Full Name (Last, First, Middle Initial) JANICE L. BACON	<u> </u>	Date of Receipt
	Mailing Address 3401 HEATHERWOO	D ROAD	0 5 0 6 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.22255
	COLUMBIA	SC 29205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1500.00
	Name of Employer UNIVERSITY OF SOUTH CAROL- INA	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1550.00	
Γ	SUBTOTAL of Receipts This Page (optional)		2500.00
┝		••••••••••••••••••••••••••••••••••••••	-
	TOTAL This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 34 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17					
	Any information copied from such Reports and S or for commercial purposes, other than using the	on for the purpose of soliciting contributions oslicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)							
A.	Full Name (Last, First, Middle Initial) KENNETH I. BARRON	Date of Receipt							
	Mailing Address 14 CADY STREET	05 / D D / Y Y Y 2011							
	City	State	Zip Code	Transaction ID: SA11AI.22290					
	PROVIDENCE FEC ID number of contributing federal political committee.	RI C	02903	Amount of Each Receipt this Period					
	Name of Employer TRUESDALE OB/GYN	Occupatio PHYSIC							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 300.00]					
- В.	Full Name (Last, First, Middle Initial) LEONARD A. BRABSON Mailing Address 939 EMERALD AVEN	UE		Date of Receipt					
	City	State	Zip Code	0 5 1 7 2 0 1 1 Transaction ID: SA11AI.22368					
	KNOXVILLE	TN	37917	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	Name of Employer SELF-EMPLOYED	Occupatio PHYSIC							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]					
- C.	Full Name (Last, First, Middle Initial) JAMES T. BREEDEN			Date of Receipt					
	Mailing Address 1775 CHAPARRAL			05 06 Y Y Y Y 011 06 06 2011					
		State NV	Zip Code	Transaction ID: SA11AI.22256					
	CARSON CITY FEC ID number of contributing federal political committee.	C	89703	Amount of Each Receipt this Period					
	Name of Employer CARSON MEDICAL GROUP	Occupatio PHYSIC		_					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 1500.00]					
	SUBTOTAL of Receipts This Page (optional)			900.00					
Ī	TOTAL This Period (last page this line number	only)							

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8/34
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	THE AMERICAN CONGRESS OF OB	-GYNS PAC	C (OB-GYN PAC)	
Α.	Full Name (Last, First, Middle Initial) STEPHEN P. BUCHANAN	Date of Receipt		
	Mailing Address 945 SPRING CREEK	DRIVE		05 / 15 / Y Y Y Y 011 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code	Transaction ID: SA11AI.22373
	<u>GRAPEVINE</u>	TX	76051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer UNIVERSITY OF NORTH TEXAS	Occupatio PHYSIC		
	Receipt For:		e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		800.00	
		0 0	0 0 0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) BENJAMIN H. CHEEK			Date of Receipt
	Mailing Address 1626 SUMMIT DRIVE			05 11 2011
	City	State	Zip Code	Transaction ID: SA11AI.22231
	COLUMBUS	GA	31906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer OB/GYN ASSOCIATES OF COLU- MBUS	Occupatio PHYSIC		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1500.00	
C.	Full Name (Last, First, Middle Initial) JEANNE A. CONRY	<u> </u>		Date of Receipt
•••	Mailing Address 8204 CANTERSHIRE	WAY		0 5 1 1 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.22232
	GRANITE BAY	CA	95746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer KAISER PERMANENTE	Occupatio PHYSIC		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1500.00	
	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: PAGE 9 / 34 (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OE	B-GYNS PAC	C (OB-GYN PAC)	
A.	Full Name (Last, First, Middle Initial) BRENDA L. DAWLEY			Date of Receipt
	Mailing Address 1 WINDSOR DRIVE			05 / D 6 / Y Y Y Y 2011
	City	State	Zip Code	Transaction ID: SA11AI.22258
	HUNTINGTON	WV	25701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIVERSITY OB/GYN	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	 Primary General Other (specify) ▼ 	0 0	500.00]
B.	Full Name (Last, First, Middle Initial) LAURA A. DEAN			Date of Receipt
	Mailing Address 14 HIGHWAY 96 EAS	бт		05 / ^Y Y Y Y Y 06 / 2011
	City	State	Zip Code	Transaction ID: SA11AI.22259
	DELLWOOD	MN	55110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer STILLWATER MEDICAL GROUP	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		1500.00	
С.	Full Name (Last, First, Middle Initial) ROBERT H. DEBBS			Date of Receipt
	Mailing Address 2 SASSAFRAS COUF	RT		05 11 Y Y Y Y Y 011 1 2011
	City	State	Zip Code	Transaction ID: SA11AI.22409
	VOORHEES	NJ	08043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer UNIVERSITY OF PENNSYLVANIA	Occupation PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 300.00	1
	Other (specify)	0 0		
	SUBTOTAL of Receipts This Page (optional)		······	1100.00
	TOTAL This Period (last page this line number	r only)		

ſ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 34 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may be name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OI	B-GYNS PAC	(OB-GYN PAC)	
∠ A.	Full Name (Last, First, Middle Initial) MARK S. DEFRANCESCO			Date of Receipt
	Mailing Address 35 TERRELL FARM F	PLACE		05 / D 6 / Y Y Y Y 2011
	City	State	Zip Code	Transaction ID: SA11AI.22260
	CHESHIRE	СТ	06410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For:		e Year-to-Date V	1
	Primary General Other (specify) Image: Control of the second	0 0	1500.00]
– В.	Full Name (Last, First, Middle Initial) NATHANIEL G. DENICOLA			Date of Receipt
	Mailing Address 821 BARRACKS, CA	RRIAGE HOL	JSE	05 11 YYYY 2011
	City	State	Zip Code	Transaction ID: SA11AI.22410
	NEW ORLEANS	LA	70116	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		84.00
	Name of Employer TULANE OB/GYN	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	252.00]
– C.	Full Name (Last, First, Middle Initial) JOSEPH L. DESTEFANO			Date of Receipt
	Mailing Address 8700 VENTNOR AVE	INUE		05 07 Y Y Y Y 011 07 2011
	City	State	Zip Code	Transaction ID: SA11AI.22278
	MARGATE	NJ	08402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer REGIONAL WOMEN'S HEALTH	Occupation PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)			834.00
F	TOTAL This Period (last page this line numbe		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11/34 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OE	B-GYNS PAC	C (OB-GYN PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MERIDITH J. FARROW			Date of Receipt
	Mailing Address 114 33RD AVENUE S	SOUTH		05 05 2011
	City	State	Zip Code	Transaction ID: SA11AI.22250
	JACKSONVILLE	FL	32250	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer UNIVERSITY OF FLORIDA	Occupatio PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	 Primary General Other (specify) ▼ 	0 0	250.00	
- B.	Full Name (Last, First, Middle Initial) DOUGLAS K. FENTON			Date of Receipt
	Mailing Address 332 SANTA FE DRIVE	E		M M / D D / Y Y Y Y 05 02 2011
	City	State	Zip Code	Transaction ID: SA11AI.22249
	ENCINITAS	CA	92024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer NORTH COAST WOMEN'S CARE	Occupatio PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 500.00	1
	Other (specify)	0 0	500.00	
с	Full Name (Last, First, Middle Initial) THOMAS A. FERRARA			Date of Receipt
	Mailing Address 11398 TALON TRACE	Ξ		05 [/] /06 [/] /2011
	City	State	Zip Code	Transaction ID: SA11AI.22261
	FISHERS	IN	46037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
	Name of Employer COMMUNITY HEALTH NETWORK	Occupatio PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 1600.00	1
_	Other (specify)		1000.00	1
	SUBTOTAL of Receipts This Page (optional)			1650.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER: PAGE 12/34 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB			o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) RAVI GADA Mailing Address 3006 KENOSHA DRIV	F		Date of Receipt
				05 06 2011
	City ROCHESTER	State MN	Zip Code 55901	Transaction ID: SA11AI.22262
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer MAYO CLINIC	Occupatio PHYSICI		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00]
В.	Full Name (Last, First, Middle Initial) STEVEN A. GELBER Mailing Address 20 ARROWWOOD DF			Date of Receipt
				05 07 2011
	City	State	Zip Code	Transaction ID: SA11AI.22280
	ITHACA FEC ID number of contributing federal political committee.	NY C		Amount of Each Receipt this Period
	Name of Employer OB/GYN ASSOCIATES	Occupatio PHYSICI		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	≥ Year-to-Date ▼ 250.00]
C.	Full Name (Last, First, Middle Initial) THOMAS M. GELLHAUS			Date of Receipt
	Mailing Address 6345 JAMES ROAD			05 / P D / Y Y Y Y 06 2011
	City	State	Zip Code	Transaction ID: SA11AI.22263
	BETTENDORF FEC ID number of contributing federal political committee.	IA C	52722	Amount of Each Receipt this Period 750.00
	Name of Employer UNIVERSITY OF IOWA	Occupatio PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00]
	SUBTOTAL of Receipts This Page (optional)	· 		2000.00
	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: PAGE 13/34 (check only one) 11a X 11a 11b 13 14 15 16
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF O	B-GYNS PAC (OB-GYN PAC)	
۷ A.	Full Name (Last, First, Middle Initial) MIRIAM GREENE		Date of Receipt
	Mailing Address 340 EAST 34TH STF	EET	05 06 Y Y Y Y 2011
	City	State Zip Code	Transaction ID: SA11AI.22264
	NEW YORK FEC ID number of contributing federal political committee.	NY 10016	Amount of Each Receipt this Period
	Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
- В.	Full Name (Last, First, Middle Initial) TAMMY R. GRUENBERG Mailing Address 2704 NETHERLAND	AVENUE	Date of Receipt
			05 07 2011
	City BRONX	State Zip Code NY 10463	Transaction ID: SA11AI.22281 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer NEW YORK MEDICAL ALLIANCE	Occupation PHYSICIAN	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- C.	Full Name (Last, First, Middle Initial) FRANK N. HARRISON, JR.		Date of Receipt
	Mailing Address 3741 HEARTHSTON	E COURT	05 / D D / Y Y Y Y 05 23 2011
	City	State Zip Code	Transaction ID: SA11AI.22350
	CHARLOTTE FEC ID number of contributing	NC 28211	Amount of Each Receipt this Period
	federal political committee.		
	Name of Employer CAROLINAS MEDICAL CENTER	Occupation PHYSICIAN	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
ſ	SUBTOTAL of Receipts This Page (optional)		2250.00
	TOTAL This Period (last page this line number	r only)	•

	SCHEDULE A (FEC Form 3X)		Lico conorata achadula(a)	FOR LINE NUMBER: PAGE 14/34
	· · · · · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Guinnary Fage	
Γ	Any information copied from such Reports and St	tatements may r	not be sold or used by any perso	on for the purpose of soliciting contributions
	or for commercial purposes, other than using the	name and addr	ess of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	THE AMERICAN CONGRESS OF OB-	GVNS PAC (
			(OD-GTNTAO)	
k	Full Name (Last, First, Middle Initial)			
Α.	RICHARD W. HENDERSON	Date of Receipt		
	Mailing Address 1709 CLEAVER LANE			
				05 06 2011
	City	State	Zip Code	Transaction ID: SA11AI.22265
	WILMINGTON	DE	19803	
	WIEIMINGTON		19803	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.			
	Name of Employer	Occupation		
	Name of Employer ST. FRANCIS HOSPITAL	PHYSICIA	N	
	Receipt For:	1 · · · · · · · · · · · · · · · · · · ·		-1
	Primary General	Aggregate Y	/ear-to-Date ▼	_
			1500.00	
	Other (specify)	0 0 0		
-				
-	Full Name (Last, First, Middle Initial)			Data of Descipt
В.	JULIA V. JOHNSON			Date of Receipt
	Mailing Address 119 BELMONT STREE	=T		05 06 2011
	0.1	01-11-	7	
	City	State	Zip Code	Transaction ID: SA11AI.22266
	WORCESTER	MA	01605	Amount of Each Receipt this Period
	FEC ID number of contributing	С		80.00
	federal political committee.			
	Name of Employer	Occupation		
	Name of Employer UNIVERSITY OF MASSACHUSET-	PHYSICIA	N	
	TS Receipt For:	1 1		_
	Primary General	Aggregate Y	lear-to-Date ▼	_
	Other (specify)		400.00	
		0 0 0		
-	Full Name (Last First Middle 1997)			
C.	Full Name (Last, First, Middle Initial) GERALD F. JOSEPH, JR.			Date of Receipt
0.	Mailing Address 39288 MAGNOLIA TRA			
	Maining Address 39288 MAGNULIA TRA	AUE		05 06 2011
	City	State	Zip Code	Transaction ID: SA11AI.22267
	PONCHATOULA	LA	70454	
			70434	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.			
	Name of Employer	Occupation		-
	Name of Employer OCHSNER MEDICAL CENTER	PHYSICIA	N	
	Receipt For:		Year-to-Date ▼	
	Primary General	, iggi egate i		
	Other (specify)		1600.00	
	• (-p••••,j) v			4
Г		1		
				1080.00
ļ	SUBTOTAL of Receipts This Page (optional)			
	TOTAL This Period (last page this line number of			

SCHEDULE	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 15/34 (check only one)
			Detailed Summary Page	13 14 15 16
or for commercial	purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	OMMITTEE (In Full) ICAN CONGRESS OF OE	B-GYNS PAC	C (OB-GYN PAC)	
Full Name (La KOTESWARA	st, First, Middle Initial) R. KUNDA			Date of Receipt
Mailing Addres	ss 2936 THOUSAND OA	KS DRIVE		05 / Y Y Y Y 012 2011
City		State	Zip Code	Transaction ID: SA11AI.22393
AUSTIN FEC ID numbo federal politica	er of contributing I committee.	C	78746	Amount of Each Receipt this Period
Name of Empl SAN MARCO	oyer S OB/GYN	Occupatio PHYSIC		-
Receipt For: Primary Other (s	General gecify) ▼	Aggregate	e Year-to-Date V 400.00]
Full Name (La GINA L. LAND	st, First, Middle Initial)			Date of Receipt
Mailing Addres	ss 795 EASTERN BYPA	SS		05 07 2011
City		State	Zip Code	Transaction ID: SA11AI.22283
RICHMOND FEC ID numbo federal politica	er of contributing	KY C	40475	Amount of Each Receipt this Period 250.00
Name of Empl RICHMOND V CARE	oyer WOMEN'S HEALTH	Occupation PHYSIC		
Receipt For: Primary Other (s	General gecify) ▼		e Year-to-Date 250.00]
Full Name (La KIMBERLY K. I	st, First, Middle Initial) LESLIE			Date of Receipt
Mailing Addres	5201 RIO GRANDE B	BOULEVARD)	M M / D D / Y Y Y Y 05 11 2011
City ALBUQUEF		State NM	Zip Code 87107	Transaction ID: SA11AI.22238 Amount of Each Receipt this Period
	er of contributing	C		500.00
Name of Empl UNIVERSITY	over OF NEW MEXICO	Occupation PHYSIC		
Receipt For: Primary Other (s	General gecify) ▼	Aggregate	e Year-to-Date V 500.00]
SUBTOTAL of F	Receipts This Page (optional) .			850.00
TOTAL This Pe	riod (last page this line number	r only)		

Anvinf		Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
or for c	ormation copied from such Reports and Sta commercial purposes, other than using the r	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions
	ME OF COMMITTEE (In Full) E AMERICAN CONGRESS OF OB-	GYNS PAC (OB-GYN PAC)	
A. <u>TEF</u>	Name (Last, First, Middle Initial) RRY A. LEWIS		Date of Receipt
Mail	ling Address 2189 SOUTH AVENUE	A	05 / ^D ^D / ^Y ^Y ^Y ^Y ^Y ^Y
City		State Zip Code	Transaction ID: SA11AI.22395
<u>YU</u>		AZ 85364	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.		250.00
Nan ZIA	ne of Employer . OB/GYN	Occupation PHYSICIAN	
Rec	ceipt For:	Aggregate Year-to-Date ▼	-
	Primary General Other (specify) ▼	250.00	
	Name (Last, First, Middle Initial) IES N. MARTIN, JR.		Date of Receipt
Mail	ling Address 2101 EASTOVER DRIV	/E	05 28 2011
City	,	State Zip Code	Transaction ID: SA11AI.22449
<u>JA(</u>	CKSON	MS 39211	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C	80.00
Nan UNI	ne of Employer IVERSITY OF MISSISSIPPI	Occupation PHYSICIAN	_
Rec	ceipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	1000.00	
	Name (Last, First, Middle Initial) JISE S. MATTHEWS		Date of Receipt
Mail	ling Address 150 WOODLEY ROAD		05 14 2011
City		State Zip Code	Transaction ID: SA11AI.22379
	NNETKA	IL 60093	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.		250.00
<u>ALT</u>		Occupation PHYSICIAN	
Rec	eipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify)	250.00	
SUBT	I OTAL of Receipts This Page (optional)		580.00
	L This Period (last page this line number of		

ſ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Statements may I	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $17/34$ (check only one)11a11b11c121314151617on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB	e name and addr	ess of any political committee to	o solicit contributions from such committee.
2 A.	Full Name (Last, First, Middle Initial) PANTEA MOZAYENI Mailing Address 2 SALVO			Date of Receipt
	City	State	Zip Code	Transaction ID: SA11AI.22323
	IRVINE	CA	92606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer DOCTORS OF WOMEN	Occupation PHYSICIA	N	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
– B.	Full Name (Last, First, Middle Initial) WADE A. NEIMAN			Date of Receipt
	Mailing Address 1300 CRENSHAW CO			0 5 [/] 1 1 [/] 2 0 1 1
		State VA	Zip Code	Transaction ID: SA11AI.22242
	LYNCHBURG FEC ID number of contributing federal political committee.	C	24503	Amount of Each Receipt this Period
	Name of Employer WOMEN'S HEALTH SERVICES	Occupation PHYSICIA	N	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	
– C.	Full Name (Last, First, Middle Initial) HOLLY L. OLSON			Date of Receipt
	Mailing Address 1067 ALAOKI STREET	Т		0 5 / D 0 6 / Y Y Y Y 0 5 0 6 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11AI.22268
	MILILANI	HI	96789	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer U.S. ARMY	Occupation PHYSICIA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
F	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 18/34 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB	-GYNS PAC (OB-GYN PAC)	
A.	Full Name (Last, First, Middle Initial) RACHEL T. OVERCASH		Date of Receipt
	Mailing Address 1111 23RD STREET, I	NW	05 / D D / Y Y Y Y 05 / 06 / 2011
	City	State Zip Code	Transaction ID: SA11AI.22269
	WASHINGTON FEC ID number of contributing federal political committee.	DC 20037	Amount of Each Receipt this Period
	Name of Employer GEORGE WASHINGTON UNIVERS- ITY	Occupation PHYSICIAN	
	Receipt For: Primary General Other (specify) $ earrow$	Aggregate Year-to-Date ▼ 250.00	
- B.	Full Name (Last, First, Middle Initial) CAROL S. PAPOV		Date of Receipt
	Mailing Address 59 WASHINGTON RI	JGE ROAD	05 10 Y Y Y Y 05 10 2011
		State Zip Code	Transaction ID: SA11AI.22326
	NEW MILFORD FEC ID number of contributing federal political committee.	CT 06776	Amount of Each Receipt this Period
	Name of Employer WOMEN'S HEALTHCARE	Occupation PHYSICIAN	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- C.	Full Name (Last, First, Middle Initial) WILFRED PARNELL		Date of Receipt
	Mailing Address 7777 FOREST LANE		05 / ^D D / ^Y Y Y Y 23 2011
	City	State Zip Code	Transaction ID: SA11AI.22429
	DALLAS FEC ID number of contributing federal political committee.	TX 75230	Amount of Each Receipt this Period
	Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)	·	600.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/34 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB	-GYNS PAC (OB-GYN PAC)	
۷ A.	Full Name (Last, First, Middle Initial) JOSEPH A. PECCERILLO		Date of Receipt
	Mailing Address 68 CANTERBURY LAN	NE	M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.22401
	SOUTHINGTON	CT 06489	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer HELM & HELM	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date ▼	-
	Primary General Other (specify) ▼	250.00	
– В.	Full Name (Last, First, Middle Initial) MARGARET PUNCH		Date of Receipt
	Mailing Address 3136 MILLS COURT		M M / D D / Y Y Y Y 05 06 2011
	City	State Zip Code	Transaction ID: SA11AI.22271
	ANN ARBOR	MI 48104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer UNIVERSITY OF MICHIGAN	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	250.00	
– c.	Full Name (Last, First, Middle Initial) ANNE M. RAINVILLE		Date of Receipt
	Mailing Address 509 OCEAN AVENUE		05 / Y Y Y Y 05 12 2011
	City	State Zip Code	Transaction ID: SA11AI.22403
	PORTLAND	ME 04103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer MAINE MEDICAL CENTER	Occupation PHYSICIAN	
	Receipt For: Primary General	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	·	750.00
F	TOTAL This Period (last page this line number	-	

9	SCHEDULE A (FEC Form 3X)	Lies constate ashedula(a)	FOR LINE NUMBER: PAGE 20/34
	• •	Use separate schedule(s) for each category of the	(check only one)
I	TEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
_			13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	THE AMERICAN CONGRESS OF O	B-GYNS PAC (OB-GYN PAC)	
∠ A.	Full Name (Last, First, Middle Initial) NINA D. REYNOLDS	Date of Receipt	
	Mailing Address 33 MAIN STREET		05 / 12 / Y Y Y Y 05 112 2011
	City	State Zip Code	Transaction ID: SA11AI.22405
	<u>CHATHAM</u>	NJ 07928	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer OVERLOOK MEDICAL CENTER	Occupation PHYSICIAN	-
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General		
	Other (specify)	250.00	
- В.	Full Name (Last, First, Middle Initial) CARLA ROBERTS		Date of Receipt
	Mailing Address 2832 HARTHORNE	DRIVE	05 / 19 / Y Y Y Y 0 1 1 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.22417
	ATLANTA	GA 30345	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer EMORY UNIVERSITY	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
- C.	Full Name (Last, First, Middle Initial) STEPHAN R. SANKO		Date of Receipt
0.	Mailing Address 125 LATTIMORE RO	AD	
	City	State Zip Code	Transaction ID: SA11AI.22286
	ROCHESTER	NY 14620	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer ROCHESTER OB/GYN ASSOCIAT- ES	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date V]
	Primary General Other (specify)	500.00	
г			
	SUBTOTAL of Receipts This Page (optional)		1750.00
	TOTAL This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 34 (check only one) 11a X 11a 13 14 15 16 17
	Any information copied from such Reports and so for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OE	3-GYNS PAC (OB-GYN PAC)	
∠ A.	Full Name (Last, First, Middle Initial) JOSE H. SANTOS		Date of Receipt
	Mailing Address 2100 NORTH OCEAN	IBOULEVARD	05 / D D / Y Y Y Y 05 10 2011
	City	State Zip Code	Transaction ID: SA11AI.22330
	FT. LAUDERDALE	FL 33305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00]
– В.	Full Name (Last, First, Middle Initial) PETER A. SCHWARTZ		Date of Receipt
	Mailing Address 2009 REGENCY DRI	νe	05 06 YYYY 2011
	City	State Zip Code	Transaction ID: SA11AI.22272
	READING	PA 19610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer READING HOSPITAL	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date	_
	Primary General Other (specify) ▼	250.00]
– c.	Full Name (Last, First, Middle Initial) ALBERT G. THOMAS		Date of Receipt
	Mailing Address 14 FOREST AVENUE		05 07 Y Y Y Y 015 07
	City NEW ROCHELLE	State Zip Code NY 10804	Transaction ID: SA11AI.22287
	FEC ID number of contributing		Amount of Each Receipt this Period 300.00
	federal political committee.		
	Name of Employer MOUNT SINAI MEDICAL CENTER	Occupation PHYSICIAN	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	300.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	l	1550.00
	TOTAL This Period (last page this line number		

Т	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 34 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and s for commercial purposes, other than using the	Statements may e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OE	B-GYNS PAC	C (OB-GYN PAC)	
A.	Full Name (Last, First, Middle Initial) JANICE E. TILDON-BURTON			Date of Receipt
	Mailing Address 1700 TALLEY ROAD			05 / 24 / Y Y Y 2011
		State	Zip Code	Transaction ID: SA11AI.22438
	WILMINGTON FEC ID number of contributing federal political committee.	C	19803	Amount of Each Receipt this Period 83.33
	Name of Employer SELF-EMPLOYED	Occupatio PHYSIC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 416.65]
 В.	Full Name (Last, First, Middle Initial) APRIL M. TILLERY			Date of Receipt
	Mailing Address P.O. BOX 710			05 12 2011
	City	State	Zip Code	Transaction ID: SA11AI.22407
		KY	41051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer ALL WOMAN, PLLC	Occupatio PHYSIC		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	250.00]
). 	Full Name (Last, First, Middle Initial) PAUL G. TOMICH			Date of Receipt
	Mailing Address 3637 QUINCE COUR	Т		05 11 2011
	City	State	Zip Code	Transaction ID: SA11AI.22247
	DOWNERS GROVE FEC ID number of contributing federal political committee.	C	60515	Amount of Each Receipt this Period 900.00
	Name of Employer UNIVERSITY OF NEBRASKA	Occupatio PHYSIC		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 1500.00]
s	UBTOTAL of Receipts This Page (optional) .			1233.33
т	OTAL This Period (last page this line number	r only)	I	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 34 (check only one) X X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any per name and address of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB	-GYNS PAC (OB-GYN PAC)	
∠ A.	Full Name (Last, First, Middle Initial) ELISABETH D. TUCKER		Date of Receipt
	Mailing Address 2510 NORTH 12TH A	VENUE	05 / 10 / Y Y Y Y 2011
	City DENISACOLA	State Zip Code	Transaction ID: SA11AI.22334
	PENSACOLA	FL 32503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Name of Employer BAPTIST MEDICAL GROUP	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	250.00	
– В.	Full Name (Last, First, Middle Initial) NANCY H. WIGGINTON		Date of Receipt
	Mailing Address 1274 HANSEN ROAD		0 5 / ^D D D / <u>Y Y Y Y</u> 0 5 1 7 2 0 1 1
	City	State Zip Code	Transaction ID: SA11AI.22371
	LIVERMORE	CA 94550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer SUTTER EAST BAY MEDICAL GROUP	Occupation PHYSICIAN	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify)	1000.00	
– c.	Full Name (Last, First, Middle Initial) MITCHELL L. WILLENS	I	Date of Receipt
	Mailing Address 910 EAST HOUSTON	STREET	M M / D D / Y Y Y Y 05 06 2011
	City	State Zip Code	Transaction ID: SA11AI.22275
	TYLER FEC ID number of contributing federal political committee.	TX 75702	Amount of Each Receipt this Period 150.00
	Name of Employer SELF-EMPLOYED	Occupation	
	Receipt For:	PHYSICIAN Aggregate Year-to-Date	
	Primary General Other (specify) ▼	250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	I	1400.00
F	TOTAL This Period (last page this line number		•

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24/34 (check only one) 11a X 11a 11b I3 14 15 16
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB Full Name (Last, First, Middle Initial)	name and ad	dress of any political committee to	o solicit contributions from such committee.
Α.	PETER WRIGHT, III Mailing Address 19 BAKER AVENUE			Date of Receipt
	City POUGHKEEPSIE	State NY	Zip Code 12601	Transaction ID: SA11AI.22439 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer HEALTH QUEST MEDICAL PRAC- TICE	Occupatio PHYSIC	IAN	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
в.	Full Name (Last, First, Middle Initial) RANAE L. YOCKEY Mailing Address 800 BIESTERFIELD R	OAD		Date of Receipt
	City ELK GROVE VILLAGE	State	Zip Code 60007	05 06 2011 Transaction ID: SA11AI.22276 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
	Name of Employer ADVANCED WOMEN'S CARE	Occupatio PHYSIC		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00]

SUBTOTAL of Receipts This Page (optional)	►	1750.00
TOTAL This Period (last page this line number only)	►	24877.33

C	SCHEDULE B (FEC F	orm 3X)				NUMBER:	
	•			arate schedule(s) category of the	(check only		PAGE 25/34
_	TEMIZED DISBURSE		Detailed	Summary Page	X 21b 27	22 23 23 28a 28b	24 25 26 28c 29 30b
	Any Information copied from such F or for commercial purposes, other t						
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	Mailing Address P.O. BO	X 53852				05 05	Ý ŽOÍII
	City PHOENIX		State AZ	Zip Code 85072		Amount of Each Dis	bursement this Period
	Purpose of Disbursement CREDIT CARD TRANSACTIC	N FEES					436.72
	Candidate Name				Category/ Type		
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	City OMAHA		State NE	Zip Code 68197		Amount of Each Dis	bursement this Period
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	-	PAGE 26/34
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NAME OF COMMITTEE (In Full)				
THE AMERICAN CONGRESS OF OB-G	YNS PAC (OB-GYN PAC)			
Full Name (Last, First, Middle Initial) ALLYSON SCHWARTZ FOR CONGRES	S		Date of Disburs	
Mailing Address P.O. BOX 2232			05 ^M /	
City JENKINTOWN	State Zip Code PA 19046		Amount of Each	n Disbursement this Period
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Candidate Name ALLYSON Y. SCHWARTZ		Category/ Type		
	sement For: 2012 X Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) ANN MARIE BUERKLE FOR CONGRES	S		Date of Disburs	
Mailing Address 3779 UNDERWOOD V	VAY		0 ⁵ / ₀	1 8 ^P 2 0 1 1 ^Y
City SYRACUSE	State Zip Code NY 13215		Amount of Each	n Disbursement this Period
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Candidate Name ANN MARIE BUERKLE		Category/ Type		
	sement For: 2012 X Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) ANTHONY PORTANTINO CONGRESSI	ONAL EXPLORATORY CO	MMITTEE	Date of Disburs	
Mailing Address 555 SOUTH FLOWER	STREET		05 ^M /	
City LOS ANGELES	State Zip Code CA 90071		Amount of Each	n Disbursement this Period
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Candidate Name ANTHONY PORTANTINO		Category/ Type		
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SCHEDULE B (FEC Form 3X	Use separate schedule	e(s)					PAGE 27/34				
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Full Name (Last, First, Middle Initial) DIANA DEGETTE FOR CONGRESS			Transaction Date of Disb	ursemen		46	
Mailing Address P.O. BOX 61337			05	^D 1 8		011	Y
City DENVER	StateZip CodeCO80206		Amount of E	ach Disb			
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	ement For: 2012 Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial) DIANE BLACK FOR CONGRESS			Transaction Date of Disb	-	-	97	
Mailing Address P.O. BOX 1437			05	^D 0 4	/ Y Y	0 1 1	Y
City GALLATIN	StateZip CodeTN37066		Amount of E	ach Disb			
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Full Name (Last, First, Middle Initial) FLEMING FOR CONGRESS			Transaction Date of Disb	ursemen	-	22	
Mailing Address P.O. BOX 1236			05	^D 1 0	/ Y Y	011	Y
City MINDEN	State Zip Code LA 71058		Amount of E	ach Disb			-
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Candidate Name JOHN C. FLEMING, JR.		Category/ Type					
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Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BARRASSO				saction ID of Disburs	-	-	22356		
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	State Zip Code WY 82605		Amou	unt of Each	ו Dis	burse		-	od
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC) Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS Mailing Address P.O. BOX 586 City State Zip Code Max S. BAUCUS Amount of Each Disbursement this Office Sought: Nose Disbursement For: Office Sought: Nose Disbursement For: 2014 City Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Transaction ID: SB23.22416 Date of Disbursement Other (specify) Image: Second State Transaction ID: SB23.22416 Date of Disbursement Category/ Y 2 0 Y Y 2 0 Y Y Y 2 0 Y Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Transaction ID: SB23.224216 Date of Disbursement Cott Other (specify) Transaction ID: SB23.22422 Offic	IZED DISBURSEMENT	for each category of the		22 X 23	
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THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)										
Full Name (Last, First, Middle Initial) GEOFF DAVIS FOR CONGRESS			Transaction Date of Disk	-	23.2220	0				
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City FT. MITCHELL	StateZip CodeKY41017		Amount of E	Each Disbu			ərio			
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Candidate Name GEOFFREY C. DAVIS		Category/ Type								
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State N District. 04 Full Name (Last, First, Middle Initial) JOHN D. DINGELL FOR CONGRESS			Transaction Date of Dist	-	23.2222	1				
Mailing Address 700 13TH STREET, NW	05 ^M /	^D 1 0	Ý Ž) 1 1	Y					
City WASHINGTON	State Zip Code DC 20005		Amount of E	Each Disbu			ərio			
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City HIGHLAND HEIGHTS	StateZip CodeOH44143		Amount of E	Each Disbu			ərio			
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Candidate Name STEVE C. LATOURETTE		Category/ Type								
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Full Name (Last, First, Middle Initial) LISA MURKOWSKI FOR U.S. SENATE							ate			ours	en		23.2	-	-	Y	1
Mailing Address P.O. BOX 100847							05			2	24	-		2	0 ľ	1	
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Full Name (Last, First, Middle Initial) LYNN JENKINS FOR CONGRESS							ate	of D		ours	en	_	_				_
Mailing Address P.O. BOX 1441																	
City TOPEKA	State Zip Code KS 66601					Amount of Each Disbursement						riod					
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Full Name (Last, First, Middle Initial) MARSHA BLACKBURN FOR CONGRE	SS						ate	of D		ours	en	SB2 nent	23.2	224	13		
Mailing Address P.O. BOX 3750							0 5	М	/	D	3 0)	Y	ž	0 ľ	1 [×]	
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Candidate Name MARSHA BLACKBURN		C		egoi /pe	у/												
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Full Name (Last, First, Middle Initial) OLSON FOR CONGRESS						f Disburs	-		3.22	2207		
Mailing Address P.O. BOX 16381				Ó	5	/ D	04	/	Υ	žo i	1 ^Y	
City State Zip Code SUGAR LAND TX 77496						it of Eacl	n Dis	sburs	_		-	od
Purpose of Disbursement CONTRIBUTION										1000.0	00	
Candidate Name PETER G. OLSON		Cateo Typ										
3 X	ment For: 2012 Primary General Other (specify) ▼											
Full Name (Last, First, Middle Initial) PETE STARK RE-ELECTION COMMITTE	E				te of	iction ID f Disburs	seme		3.22			
Mailing Address P.O. BOX 8331					5	I / D	24	/	Y	ž01	1 ^Y	
City FREMONT	State Zip Code CA 94537			Ar	noun	t of Eacl	n Dis	sburs	-		-	od
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Candidate Name FORTNEY H. 'PETE' STARK		Category/ Type										
	ment For: 2012 Primary General Other (specify) ▼											
Full Name (Last, First, Middle Initial) RICHARD E. NEAL FOR CONGRESS				Da	ite of	iction ID f Disburs	seme	ent	3.22			
Mailing Address 76 MAGNOLIA TERRACE						I / D	2 ^D		Y	ž01	1 [×]	
City SPRINGFIELD	StateZip CodeMA01108			Ar	noun	t of Eacl	n Dis	sburs				od
Purpose of Disbursement CONTRIBUTION						<u> </u>				1000.0	0	
Candidate Name RICHARD E. NEAL		Cateo Typ										
	ment For: 2012 Primary General Other (specify) ▼											
SUBTOTAL of Disbursements This Page (optional)			•						3	000.0	0	_
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	SCHEDULE B (FEC Form 3X ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check on 21b 27	NUMBER: y one) 22 X 23 28a 28b	PAGE 34/34 24 25 26 28c 29 30b		
	Any Information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF C	ne name and address of any political					
Α.		THE FREEDOM PROJECT					
	City WASHINGTON	State Zip Code DC 20003		Amount of Each Di	isbursement this Period 5000.00		
	Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type				
	Office Sought: House E Senate President	isbursement For: Primary General Other (specify) ▼	і уре 				
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	SUBTOTAL of Disbursements This Page (optional)	•	5000.00
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