Image# 12940378183 PAGE 1 / 62

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		All Authorized				Office Use Only
NAME OF TOO COMMITTEE (in full)	YPE OR PRINT ▼		mple: If typir r the lines.	ng, type	12FE4M5	
Political Action Committee	ee of the Ame	erican Assoc	iation of C	Orthopae	dic Surgeo	ons
ADDRESS (number and street)	317 Massachusetts	s Avenue, NE				
Check if different	1st Floor					
than previously reported. (ACC)	Washington				DC	20002
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦		;	STATE A	ZIP CODE ▲
C C00343137		3. IS THIS REPORT	\	IEW N) OR	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Bue on:	Mar 20 (M3)		Jun 20 (M6)	Η.	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)		Jul 20 (M7)	-	20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(C) 12-Day		Primary (12P Convention (General (
October 15 Quarterly Report (Q3)	·	or the.	Convention	120)	орсска (120)
January 31 Year-End Report (YE)		Election on	11 /	06	2012	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-El		General (300	à)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Tioport is	Election on	M = M /	D = D /	Y = Y = Y = Y	in the State of
5. Covering Period 10	/ D D / Y	2012	through	M M M	/ D D /	2012
I certify that I have examined this	Report and to the	best of my kno	wledge and b	pelief it is tru	ie, correct and	d complete.
Type or Print Name of Treasurer	William J Robb III,	MD				
Signature of Treasurer William	J Robb III, MD		[Electronically	Filed]	Date 10	23 / 2012
NOTE: Submission of false, erroneo	us, or incomplete in	nformation may su	bject the pers	son signing th	nis Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons

10 01 2012 Report Covering the Period: 2012 17 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1409935.15 January 1, 2012 (b) Cash on Hand at 1430560.47 Beginning of Reporting Period..... 1423981.73 72944.07 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1503504.54 2833916.88 6(a) and 6(c) for Column B)..... 535019.84 1865432.18 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 968484.70 968484.70 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

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

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons

I. Receipts	I. Receipts COLUMN A Total This Period							
Individuals/Persons Other	utions (other than loans) From:							
Than Political Committees								
(i) Itemized (use Schedule A)	61497.33	1257916.31						
(ii) Unitemized	4577.50	111946.16						
Lines 11(a)(i) and (ii)	66074.83	1369862.47						
Political Party Committees	0.00	0.00						
Other Political Committees (such as PACs)	0.00	0.00						
Total Contributions (add Lines								
Totals to Line 33, page 5)▶	66074.83	1369862.47						
rty Committees	0.00	0.00						
Loans Received	0.00	0.00						
an Repayments Received	0.00	0.00						
efunds, Rebates, etc.)								
arry Totals to Line 37, page 5)	1869.24	20507.46						
	5000.00	33500.00						
her Federal Receipts	7 7 7							
ividends, Interest, etc.)ansfers from Non-Federal and Levin Funds	0.00	111.80						
Non-Federal Account (from Schedule H3)	0.00	0.00						
Levin Funds (from Schedule H5)	0.00	0.00						
Total Transfers (add 18(a) and 18(b))	0.00	0.00						
	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)						

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
. Operating Expenditures: (a) Allocated Federal/Non-Federal		Calcillati Teat-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non Fodoral Chara	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	1519.84	20687.18
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	1519.84	20687.18
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees		
and Other Political Committees	64500.00	1315500.00
Independent Expenditures	464000.00	514245 00
(use Schedule E) Coordinated Party Expenditures	464000.00	514245.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(dee conodate 1)		
Loan Repayments Made	0.00	0.00
	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	10000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	10000.00
Other Disbursements	5000.00	5000 00
Other Disbursements	5000.00	5000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(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	0.00	2.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	535019.84	1865432.18
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	535019.84	1865432.18
from Line 31)	333013.04	1003432.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2005)		r age 3				
III. Net Contributions/Operating Expenditures						
3. Total Contributions (other than loans) (from Line 11(d), page 3)	66074.83	1369862.47				
4. Total Contribution Refunds (from Line 28(d))	0.00	10000.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	66074.83	1359862.47				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1519.84	20687.18				
7. Offsets to Operating Expenditures (from Line 15, page 3)	1869.24	20507.46				
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-349.40	179.72				

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

FOR LINE NUMBER:					PAGE		6	OF		62	
(0	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16	;		17

or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
,	of the American Association of Ortho	paedic Surgeons
Full Name (Last, First, Middle Initial) John L Andary MD		Date of Receipt
Mailing Address 2035 E 17th St		10 01 2012
City	State Zip Code	Transaction ID : AEE124FADC83942ED86
Idaho Falls	ID 83404-6430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	7
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Cody N Anderson MD	'	Date of Receipt
Mailing Address 2015 Stonegate Blvd		M = M / D = D / Y = Y = Y
City	State 7in Code	10 01 2012
City	State Zip Code TX 75703-0104	Transaction ID : A43BEDE920FCE4031BC
Tyler	TX 75703-0104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	7
East Texas Medical Ctr	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Deffery P Beckenbaugh DO	<u> </u>	Date of Receipt
Mailing Address 4121 8th St SW		10 01 2012
City	State Zip Code	Transaction ID : ABBD4383700BD43259EB
Rochester	MN 55902-8751	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	100.00
Name of Employer	Occupation	1
Olmsted Medical Center	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	800.00	
SUBTOTAL of Receipts This Page (options	al)	1350.00
	<u>·</u>	
TOTAL This Period (last page this line nur	mber only)	

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

7 OF 62 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Charles L Beck MD Date of Receipt Mailing Address 3584 W 9000 S Ste 405 01 2012 10 City Zip Code State Transaction ID: A867E0F12F1244559AE5 UT West Jordan 84088-5712 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician Group of Utah Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard A Biama MD Date of Receipt Mailing Address 1566 Edgehill Ln 10 01 2012 City State Zip Code Transaction ID: A1302E3A6A14E47C09D2 Redlands CA 92373-6523 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Arrowhead Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Benjamin E Bierbaum MD Date of Receipt Mailing Address 91 Parker Hill Ave 10 01 2012 City Zip Code State Transaction ID: A5FDC6B30BCF04F05936 MA Roxbury Crossing 02120-3215 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Longwood Orthopedic Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

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

FOR LINE NUMBER:					PAGE	:	8	OF	62	
ı	(che	ck only	or	ne)						
ı	X	11a		11b		11c		12		
		13		14		15		16	;	17

or for commercial purposes, other than usi	ing the name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee	of the American Association of Ortho	paedic Surgeons
Full Name (Last, First, Middle Initial) Gail S Chorney MD Mailing Address 2015 (7) 9:		Date of Receipt
Mailing Address 301 E 17th St		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code NY 10003-3804	Transaction ID : A518FEB02886F4B1BAE2
New York FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	500.00
Name of Employer	Occupation	
NYU Hospital for Joint Diseases	Orthopaedic Surgeon	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) John C Clohisy MD		Date of Receipt
Mailing Address Dept of Ortho Surg, CB	8233	M = M / D = D / Y = Y = Y = Y
660 S Euclid	State Zip Code	10 01 2012 Transaction ID : A87B2275729EE4B00A57
Saint Louis	MO 63110-1010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Washington University	Orthopaedic Surgeon	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Kenneth J Edwards MD		Date of Receipt
Mailing Address 183 Peace Blvd		Date of Receipt 10 01 2012
City Saint Joseph	State Zip Code MI 49085-9146	Transaction ID : ABCC0053CC9D14382838
<u> </u>	10000 0110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	_
Southwest Michigan Ctr for Orthopedics	Orthopaedic Surgeon	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	. [
Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (option	nal)	1600.00
	· · · · · · · · · · · · · · · · · · ·	
TOTAL This Period (last page this line nu	imber only)	

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

FOR LINE NUMBER:					PAGE	9	OF	62	
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16	;	17

	the name and address of any political committee	
	the American Association of Ortho	paedic Surgeons
Full Name (Last, First, Middle Initial) A. Richard S Glosser MD		Date of Receipt
Mailing Address 941 N Krome Ave		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : A3F7DF9EA42A44991B06
Homestead	FL 33030-4408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. iggiogato Total to Bato V	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Daniel William Green MD		Date of Receipt
Mailing Address 535 E 70th St		10 01 _2012 _
City	State Zip Code	Transaction ID : AF4536B041D29422A994
New York	NY 10021-4823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	167.00
Name of Employer	Occupation	+
Hospital for Special Surgery	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Teal-to-Date V	
Full Name (Last, First, Middle Initial) David A Halsey MD		Date of Receipt
Mailing Address 192 Tilley Drive		10 01 2012
City	State Zip Code	Transaction ID : A2AD16D2C9968453A901
South Burlington	VT 05403-4440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
University of Vermont Medical Group	Orthopaedic Surgeon	
Receipt For:		-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (optional)	467.00
TOTAL This Period (last page this line num	her only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

62

13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Paul E Havel MD Date of Receipt Mailing Address 14181 Business Ctr Dr NW 01 2012 10 City Zip Code State Transaction ID: A9D147B5D643F4DD9801 MN Elk River 55330-4654 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Allina Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. W Andrew Hodge MD, FACS Date of Receipt Mailing Address 885 Union St Suite 215 10 01 2012 City State Zip Code Transaction ID : A01247626BA614BE48D6 ME Bangor 04401-3092 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Darren L Johnson MD Date of Receipt Mailing Address 740 S Limestone Ste K401 10 01 2012 City Zip Code State Transaction ID: AC91D9616C5E049C6BDE KY Lexington 40536-0001 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation University of Kentucky Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FO	R LINE	NU	MBER	:	PAGE	11	OF	62
Use separate schedule(s) for each category of the	(ch	eck only	or	ne)					
Detailed Summary Page		1 1a		11b		11c	12		
,		13		14		15	16	.	17

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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Ravi Patel MD Date of Receipt Mailing Address 7721 Park River Oak Circle 01 2012 10 City Zip Code State Transaction ID: A7F74DAAD1C814C58A43 CA Sacramento 95831-5809 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Medical Clinic Sacramento Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott Edward Porter MD Date of Receipt Mailing Address Dept of Ortho, Acad Serv 701 Grove Rd 2nd Fl Suprt Twr 10 01 2012 City Zip Code State Transaction ID: A778AF56254EE4AE7B45 SC Greenville 29605-5601 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Greenville Hospital System Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 765.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bonhomme Joseph Prud'homme MD Date of Receipt Mailing Address 3400 Health Sciences Center South PO Box 9196 10 01 2012 City State Zip Code Transaction ID: AC7F173681B534551B3A WV Morgantown 26506-9196 Amount of Each Receipt this Period FEC ID number of contributing 85.00 С federal political committee. Name of Employer Occupation West Virginia University Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) 420.00

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

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

	FOR LINE	NUMBER	: PAGE	E 12 O	F 6
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummun, rugo	13	14	15	16	

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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Marc J Rosen MD Date of Receipt Mailing Address 5605 W Eugle Ste 111 01 2012 10 City State Zip Code Transaction ID: AA3ACB418456D4C38819 Glendale ΑZ 85304-1273 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Orthopaedic Surgeon Ortho Surg Network of North America Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert A Ruggiero MD Date of Receipt Mailing Address 266 East Lancaster Ave Ste 200 10 01 2012 City State Zip Code Transaction ID: AB0834EDDBFC54F8A9DC PA Malvern 19355-3256 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation PA Orthopaedic Center Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Ruoff MD Date of Receipt Mailing Address 15-01 Broadway Ste 20 10 01 2012 City Zip Code State Transaction ID: A3D0C8CFFA85E41D8B05 NJ Fair Lawn 07410-6003 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Orthopaedic Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General

TOTAL This Period (last page this line number only)	SUBTOTAL of Receipts This Page (optional)		I	7	I	Ξ	7	I	60	0.00)
	TOTAL This Period (last page this line number only)	_	_	7	_	_	7	_	<u>_</u>	_	

500.00

Other (specify)

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

62

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Joshua Schkrohowsky MD Date of Receipt Mailing Address PO Box 545 01 2012 10 City Zip Code State Transaction ID: A820A51BA968A4F47898 WA Winthrop 98862-0545 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Mid Valley Hospital Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul Strawn Sherbondy MD Date of Receipt Mailing Address Ste 112, MC-UP02 1850 E Park Ave 10 01 2012 City State Zip Code Transaction ID: A929D3EA97A3842EA939 PA State College 16803-6706 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Penn State Hershey Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) c. Dmitry Tuder MD Date of Receipt Mailing Address 329 Elizabeth Rd 10 01 2012 City Zip Code State Transaction ID: A1B7EC30BC5044954A46 TX San Antonio 78209-5960 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation US Air Force Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 833.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE	NUMBER	: PAGE	E 14 OF
Use separate schedule(s)	(check only	y one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
	13	14	15	16

62

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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Christopher A Wills MD Date of Receipt Mailing Address 725 W La Veta Ave Ste 260 01 2012 10 City Zip Code State Transaction ID: A18287E111CA543C7AE4 CA Orange 92868-4439 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 504.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert B Wilsterman MD Date of Receipt Mailing Address 5 Bramblebush Park 10 01 2012 City State Zip Code Transaction ID: AA235110DF2474129994 MA Falmouth 02540-2325 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Orthopedic Specialists Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jaafar M Bazih MD Date of Receipt Mailing Address 4802 S 109th East Ave 10 02 2012 City State Zip Code Transaction ID: A619DFBAC4E5F4A5D812 OK Tulsa 74146-5822 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Tulsa Bone & Joint Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 834.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	: PAGE	E 15 OI	F 62
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	1

Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic Surgeons
Full Name (Last, First, Middle Initial) Gregory Dee Byrd MD, MA Mailing Address 3897 Cameron Dr NE		Date of Receipt
		10 02 2012
City	State Zip Code	Transaction ID: A2A025E888B744F3FAED
Lacey	WA 98516-3888	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Olympia Orthopaedic Associates	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Daniel A Caligiuri MD		Date of Receipt
Mailing Address 16 Hickory Rd		M M / D D / Y Y Y Y
City	State Zip Code	10 02 2012 Transaction ID : A21B99678EDF745B3AF8
New Hyde Park	NY 11040-2326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Craig Dunwody Cameron DO		Date of Receipt
Mailing Address 6500 La Posta Dr		10 02 2012
City El Paso	State Zip Code TX 79912-7333	Transaction ID : A1956EE0DB1654254927 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
El Paso Orthopaedic Surg Group	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	•	900.00
TOTAL This Period (last page this line number of	only)	

	FOR LINE	NOMREK	:	PAGE	-
Use separate schedule(s) for each category of the	(check only	one)			
Detailed Summary Page	X 11a	11b		11c	
	10	1.4		4.5	Г

16 OF

12

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) John T Capo MD Mailing Address 504 Observer Hwy Unit 2 City Hoboken FEC ID number of contributing federal political committee. Name of Employer UMDNJ Receipt For: Primary General Other (specify)	State Zip Code NJ 07030-6507 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 600.00	Date of Receipt 10 02 2012 Transaction ID: A269997BE1C9541DFA4A Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Theodore J Choma MD Mailing Address Missouri Orthopaedic Institute 1100 Virginia Avenue City Columbia FEC ID number of contributing federal political committee. Name of Employer Univ of Missouri Receipt For: Primary General Other (specify)	State Zip Code MO 65212-0001 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 02 2012 Transaction ID: AC53833CDC19E470C9DF Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Craig A Davis MD Mailing Address 1411 S Potomac St Ste 400 City Aurora FEC ID number of contributing federal political committee. Name of Employer Colorado Orthopaedic Consultan Receipt For: Primary General Other (specify)	State Zip Code CO 80012-4540 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 02 2012 Transaction ID : AC4F9005B8E51492DB65 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u>*</u>	800.00

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

FOR LINE NUMBER:						PAGE	 17	OF	62
(c	he	ck only	or	ıe)					
	X	11a		11b		11c	12		
		13		14		15	16	;	17

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) Scott John Deering MD Mailing Address 1605 Gleneagles Dr		Date of Receipt
		10 02 2012
City	State Zip Code	Transaction ID : A999F078ECC3B4B43832
Bowling Green	OH 43402-5236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mark J Geppert MD		Date of Receipt
Mailing Address Marsh Brook Professional C	Otr	M = M / D = D / Y = Y = Y
7 Marsh Brook Dr Ste 205	State Zip Code	10 02 2012
Somersworth	NH 03878-6523	Transaction ID: A6A69AD8AE74A492299B Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each Hecelpt tills Fellod
federal political committee.	C	250.00
Name of Employer	Occupation	
Seacoast Ortho & Sports Medicine	Orthopaedic Surgeon	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Cus G Gialamas MD		Date of Receipt
Mailing Address 653 Camino De Los Mares Ste 109		10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City San Clemente	State Zip Code CA 92673-2808	Transaction ID : A1B539BF4F7054A218D7
San Clemente	92013-2808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	1
Seaview Orthopedics	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	600.00
TOTAL This Period (last nage this line numb	er only)	
TOTAL THIS I CHOU (last page this line numb	O O I II y)	

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c Detailed Summary Page

62 12 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Mark Gillespy MD Date of Receipt Mailing Address 1075 Mason Avenue 2012 10 02 City State Zip Code Transaction ID: A362461354837416AAAF FL Daytona Beach 32117-4611 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Orthopaedic Group Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Devon D Goetz MD Date of Receipt Mailing Address 6001 Westown Pky 10 02 2012 City State Zip Code Transaction ID: AA3FD8C07836C40AE857 IΑ West Des Moines 50266-7702 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Des Moines Ortho Surgeons Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Paul Grutter MD Date of Receipt Mailing Address 1374 Rozella Way 10 02 2012 City Zip Code State Transaction ID: A14C09C3548E2405E803 TN Gallatin 37066-7466 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Name of Employer Occupation **Grutter Orthopaedics** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

	FOR LINE	NUMBER	: PAGE	E 19 C	Ρ
Use separate schedule(s)	(check on	ly one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	e American Association of Orthopa	
Full Name (Last, First, Middle Initial) Andrew P Gutow MD Mailing Address 741 Westminster Ln		Date of Receipt
City	State Zip Code	10 02 2012 Transaction ID : A6F983A4FA19047AF826
Los Altos	CA 94022-1144	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	188.00
Name of Employer	Occupation	
Palo Alto Medical Foundation Group Receipt For: Primary Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 938.00	
Full Name (Last, First, Middle Initial) Charlotte J Harris MD Mailing Address 700 5 1114 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Date of Receipt
Mailing Address 732 East Maple Leaf Rd		10 02 2012
City	State Zip Code	Transaction ID : A51827821C3674DD8B6B
Maysville	KY 41056-9069	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fleming County Hospital	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Edward J Hellman MD		Date of Receipt
Mailing Address Orthopaedics Indianapolis 8450 Northwest Blvd City	State Zip Code	10 02 2012
Indianapolis	IN 46278-1381	Transaction ID : AAE63AF1FF3624C54963 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Ortho Indy	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	2000.00	
SUBTOTAL of Receipts This Page (optional)	•	1438.00
TOTAL This Period (last page this line number	only)	

	FOF	LINE	NU	MRFK	:	PAGE	: 2	20 O
	(che	ck only	or	ne)				
for each category of the Detailed Summary Page	X	11a		11b		11c		12
,	1	13		14		15		16

	tatements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full)	e American Association of Orthopa	
Full Name (Last, First, Middle Initial) A. Robert K Henrichsen MD	The state of the s	<u> </u>
Mailing Address 13000 Big Sky Place		Date of Receipt
City Auburn	State Zip Code CA 95602-9151	10 02 2012 Transaction ID : A3CE73458F2B04C72843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer Self Employed Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Jaime Hernandez MD Mailing Address 6815 Noble Ave		Date of Receipt
City Van Nuys FEC ID number of contributing federal political committee.	State Zip Code CA 91405-3796	10 02 2012 Transaction ID : A88DB3F7F73B7477A856 Amount of Each Receipt this Period 500.00
Name of Employer Southern California Ortho Institute Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Derek L Jones MD Mailing Address 197 Mercenten		Date of Receipt
Mailing Address 127 Warrenton City Houston FEC ID number of contributing federal political committee.	State Zip Code TX 77024-6223	10 02 2012 Transaction ID : A25325B5585BE4860837 Amount of Each Receipt this Period 500.00
Name of Employer UT Physicians Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	>	1300.00
TOTAL This Period (last page this line number	only)	

	FOR LINE NUMBER: PAGE 21 (
Use separate schedule(s)	(chec	k only	or	ie)					
for each category of the Detailed Summary Page	X	11a		11b		11c		12	
		13		14		15		16	

	Statements may not be sold or used by any persone name and address of any political committee t	
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) Haik G Kavookjian MD Mailing Address 555 Newfield Ave		Date of Receipt 10 02 2012
City Stamford FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code CT 06950 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Transaction ID: A65BF2C23E5C24915B83 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Allen Sanders Kent MD Mailing Address 800 12th Ave Ste 200 City Fort Worth FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code TX 76104-2519 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 300.00	Date of Receipt 10 02 2012 Transaction ID: ADD1A2D0C3E2A49F7847 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Leonard J Kibiloski MD Mailing Address 2310 California Rd City Elkhart FEC ID number of contributing federal political committee. Name of Employer OSMC Receipt For: Primary Other (specify)	State Zip Code IN 46514-1228 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 02 2012 Transaction ID : AA07766F48EE64CCC978 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	•	1050.00
TOTAL This Period (last page this line number	r only)	

	FO	R LINE	NU	MBER	:	PAGE	= 2	22	OF	62
Use separate schedule(s) for each category of the	l `_	eck only	or	ne)						
Detailed Summary Page	>	1 1a		11b		11c		12		
, ,		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Herbert J Louis MD Date of Receipt Mailing Address 5110 N 40th St Ste 236 02 2012 10 City Zip Code State Transaction ID: ADE2FF8DFC3BF4354B22 Phoenix ΑZ 85018-2151 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Retired Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul C Matson MD Date of Receipt Mailing Address 1431 Premier Drive 10 02 2012 City State Zip Code Transaction ID: A7EA2706194FA451DB5B MN Mankato 56001-6076 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Orthopedic & Fracture Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Michael A Milek MD Date of Receipt Mailing Address 520 Harpeth Trace Dr 02 10 2012 City Zip Code State Transaction ID: AA6EA4C48CD3A4039A8F TN Nashville 37221-3128 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Tennessee Ortho Alliance Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

1350.00

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

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

FOR LINE NUMBER: PAGE 23 OF 62 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) David R Morawski MD Date of Receipt Mailing Address 2525 Kaneville Rd 02 2012 10 State City Zip Code Transaction ID: A8F42FABD222D48F5816 Geneva IL 60134-2578 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Fox Valley Orthopaedic Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Davis C Peterson MD Date of Receipt Mailing Address 3831 Piper St Ste S220 10 02 2012 City State Zip Code Transaction ID: A35B28D1483404D2481E ΑK Anchorage 99508-4680 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Anchorage Fracture & Ortho Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rola H Rashid MD Date of Receipt Mailing Address 20 Hagen Dr Ste 110 02 10 2012 City Zip Code State Transaction ID: A4037FBF6BE64484DA2C NY Rochester 14625-2665 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 1700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE NUMBER: PAGE 24 OF	F 62
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	13 14 15 16	17

	d Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	the American Association of Orthor	
Full Name (Last, First, Middle Initial) Gary S Simon MD Mailing Address 150 Helmsley Dr NW		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Atlanta FEC ID number of contributing federal political committee. Name of Employer Resurgens Orthopaedics Receipt For:	State Zip Code GA 30327-4901 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID : A4ED979308D55452085C Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steven M Theiss MD Mailing Address 510 20th St Fot 901	250.00	Date of Receipt
City Birmingham FEC ID number of contributing federal political committee. Name of Employer UAB Orthopaedics	State Zip Code AL 35233-2028 C Occupation Orthopaedic Surgeon	Transaction ID: AD72A7220ABBB49A8A10 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last First Middle Initial)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Andrew Lawrence Whaley MD Mailing Address 46 Cabernet City San Antonio FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code TX 78258-4669 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 02 2012 Transaction ID : A7B7DB24F73F3499E916 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	1000.00
TOTAL This Period (last page this line numb	er only)	

	FOR LINE	NUMBER	: PAGE	E 25 OF
Use separate schedule(s)	(check only	y one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
	13	1/1	15	16

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) A. David I Zaret MD Mailing Address 8 Empire Ct		Date of Receipt
City	State 7in Code	10 02 2012
City Dix Hills	State Zip Code NY 11746-6704	Transaction ID: A374ED0A698014A1A876 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 75.00
Name of Employer	Occupation	_
Orlin & Cohen Orthopedic Assoc	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Alfredo L Axtmayer MD Mailing Address a D	·	Date of Receipt
Mailing Address 8 Research Pkwy		10 04 2012
City	State Zip Code	Transaction ID : A4F9C04CF3BE1433E899
Wallingford	CT 06492-1930	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1500.00
Name of Employer Mid-State Medical Center	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2090 Woodwinds Dr		10 04 2012
City Saint Paul	State Zip Code MN 55125-2522	Transaction ID : A07D7A7AE63F44F22AFA Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Summit Orthopedics	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2575.00
TOTAL This Period (last page this line numbe	r only)	

	FOR	LINE	NU	MBER	:	PAGE	. 2	26	OF	
Use separate schedule(s) for each category of the	(che	ck only	or	ıe)						
Detailed Summary Page	×	11a		11b		11c		12		
		12		1/		15		16	. [

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) Ira L Fedder MD Mailing Address 7505 Osler Dr Ste 104		Date of Receipt 10 04 2012
City Towson FEC ID number of contributing federal political committee. Name of Employer Towson Orthopaedic Associates	State Zip Code MD 21204-7737 C Occupation Orthopaedic Surgeon	Transaction ID : A8EA675F55CE148259DF Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Joshua B Frank MD Mailing Address 175 E 96th St PH-T City New York FEC ID number of contributing federal political committee. Name of Employer Coastal Orthopaedics Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NY 10128-6216 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 10 04 2012 Transaction ID : ACA219357524A466B985 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Stephen D Helper MD Mailing Address 29001 Cedar Rd Ste 519 City Cleveland FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code OH 44124-4041 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 300.00	Date of Receipt 10 04 2012 Transaction ID: A8104FC5A4B5D44CF914 Amount of Each Receipt this Period 200.00
SUBTOTAL of Receipts This Page (optional)	•	1200.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 27 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

62

for each category of the Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) James G Howe MD Date of Receipt Mailing Address Fletcher Allen Health Care 192 Tilley Dr 04 2012 10 City Zip Code State Transaction ID: A46B5FB67E41D4A05BB3 VT South Burlington 05403-4440 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Moss Jones MD Date of Receipt Mailing Address Palmetto Health Richland 3 Richland Medical Park, Suite 330 10 04 2012 City State Zip Code Transaction ID: A12FE56D9D5784B78B81 SC Columbia 29203-6862 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Palmetto Health Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Christopher M Magee MD Date of Receipt Mailing Address 111 Maltese Dr 10 04 2012 City Zip Code State Transaction ID: AB2C9FC981E61409F843 NY Middletown 10940-2115 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Middletown Medical Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

62

for each category of the Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Alfonso Mejia MD Date of Receipt Mailing Address 835 S Wolcott Ave M/C 844 Rm E-270 04 2012 10 City State Zip Code Transaction ID: A4AA40BEB27A146BC993 Chicago IL 60612-3748 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Univ of Illinois at Chicago Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joshua Pletka MD Date of Receipt Mailing Address 4535 Spruce Ridge Dr 10 04 2012 City State Zip Code Transaction ID: AA9D022A37DDD4E42B62 NY Manlius 13104-9655 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **Upstate Orthopaedics** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. George W Prutzman MD Date of Receipt Mailing Address 689 Sierra Rose Dr Ste B 10 04 2012 City Zip Code State Transaction ID: A8955D6F0C71F45AE80A NV Reno 89511-2076 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation William B Ririe Hospital Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER:				PAGE	. 2	29	OF	62		
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

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

	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) David R Richardson MD Mailing Address 1211 Union Ave Ste 510	State 7in Code	Date of Receipt 10 04 2012
City Mamphis	State Zip Code TN 38104-6656	Transaction ID : A29722593D4664C7D824
Memphis FEC ID number of contributing federal political committee.	C 38104-6656	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	1
Campbell Clinic	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 545.00	
Full Name (Last, First, Middle Initial) 3. Jeffrey J Sketchler MD		Date of Receipt
Mailing Address 4817 Richland Ave		M = M / D = D / Y = Y = Y
City	Stata Zin Codo	10 04 2012
City Metairie	State Zip Code LA 70002-1343	Transaction ID : A203DE80140C64A93A80
Metairie	LA 70002-1343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Pontchartrain Bone & Joint	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		
Alan D Barronian MD		Date of Receipt
Mailing Address 16259 Sylvester Rd SW Ste		10 05 7 2012
City Burien	State Zip Code WA 98166-3059	Transaction ID: AAF981A97E6B04F90938 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Proliance Surgeons	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number	<u> </u>	

	FOF	R LINE	NU	IMBER	:	PAGE	3	30 O	F	62
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) David Blum MD Mailing Address 301 NW 84th Ave Ste 303 City Plantation FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code FL 33324-1807 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 10 05 2012 Transaction ID: ACDA67D43358A440FAAA Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Henry Robert Boucher MD Mailing Address 3333 N Calvert St Ste 400 City Baltimore FEC ID number of contributing federal political committee. Name of Employer MedStar Receipt For: Primary General Other (specify)	State Zip Code MD 21218-6501 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 10 05 2012 Transaction ID: AD9AE58FA2E0C486AAA5 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Kim Marie Clabbers MD Mailing Address 120 W Maple Ave City Langhorne FEC ID number of contributing federal political committee. Name of Employer Lower Bucks Hospital Receipt For: Primary General Other (specify)	State Zip Code PA 19047-2820 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 05 2012 Transaction ID: AFC41F87824D64BA19E9 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	_	1000.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 31 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

62

for each category of the Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Struan H Coleman MD Date of Receipt Mailing Address 535 E 70th St 05 2012 10 City Zip Code State Transaction ID: AD463B53B0BB041A3BCA NY New York 10021-4823 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Hospital for Special Surgery Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Evan L Flatow MD Date of Receipt Mailing Address 5 E 98th St Box 1188 10 05 2012 City State Zip Code Transaction ID: A7FD82D8ADF884E088B4 NY New York 10029-6501 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Mt Sinai School of Medicine Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. James P Jamison MD Date of Receipt Mailing Address 6470 Tippecanoe Rd 05 10 2012 City Zip Code State Transaction ID: AABD791883FB048F8BA6 OH Canfield 44406-9008 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Youngstown Orthopaedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

ı	FOR LINE NUMBER:		: PAGE	32 OF	62
	(check only one)				
	X 11a	11b	11c	12	
	13	14	15	16	17

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

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) Herbert J Louis MD Mailing Address 5110 N 40th St Ste 236 City Phoenix FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code AZ 85018-2151 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 3000.00	Date of Receipt 10 05 2012 Transaction ID: A827B6719156847D4941 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) 3. Jeffrey L Lovallo MD Mailing Address 7025 Benjamin St		Date of Receipt 10 05 _2012 _
City Mc Lean	State Zip Code VA 22101-1550	Transaction ID : A25D6981972384D6EBCF Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Anderson Clinic	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) D. John G Lunt MD		Date of Receipt
Mailing Address 35 Tamarack Ave		10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Danbury	State Zip Code CT 06811-4959	Transaction ID : AD8F31CEA4DD541BB9A Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4000.00
Name of Employer Hand Center of Western Center	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional))	6000.00
TOTAL This Period (last page this line numb	<u> </u>	

		PAGE	33 OF	62
Use separate schedule(s) for each category of the	(check only one)	11c	7 12	
Detailed Summary Page	13 14	15	16	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)	e American Association of Orthopa	
Full Name (Last, First, Middle Initial) James B Manning MD Mailing Address 2680 Crimson Canyon Dr		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Bone & Joint Specialists Receipt For: Primary General Other (specify)	State Zip Code NV 89128-0841 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 3000.00	Transaction ID: A5E60B042B81348B1AF6 Amount of Each Receipt this Period 2000.00
Full Name (Last, First, Middle Initial) Hal J McCutchan MD Mailing Address 14221 92nd St SE City Snohomish FEC ID number of contributing federal political committee. Name of Employer Western Washington Medical Group Receipt For: Primary General Other (specify)	State Zip Code WA 98290-9029 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 05 2012 Transaction ID: ABB0A9CAE290B479E8FF Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Thomas L Mehlhoff MD Mailing Address 7401 S Main City Houston FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code TX 77030-4509 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 10 05 2012 Transaction ID: A502081B666CB4016B9E Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)		3500.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 34 OF Use separate schedule(s) (check only one) X 11a 11b 11c

62

for each category of the 12 Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Brian D Mulliken MD Date of Receipt Mailing Address 8322 Bellona Ave Ste 100 05 2012 10 City Zip Code State Transaction ID: ACB86D7538CEB4F8288E MD Towson 21204-2065 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Univ of Marvland Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. John David Ramsay MD Date of Receipt Mailing Address 400 22nd Ave 10 05 2012 City State Zip Code Transaction ID: A21FD3D8353E54438920 SD **Brookings** 57006-2450 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Avera Brookings Medical Clinic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) c. William P Rix MD Date of Receipt Mailing Address 55 Audubon Way 05 10 2012 City Zip Code State Transaction ID: A210C35DC4EAB4C50A5A NH Auburn 03032-3109 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation NH Orthopaedic Surgery Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 475.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

35 OF 62 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Perry R Secor MD Date of Receipt Mailing Address 3771 Katella Ave Ste 209 05 2012 10 City Zip Code State Transaction ID: AF46FEDAD3214462A801 CA 90720-3121 Los Alamitos Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark A Wolgin MD Date of Receipt Mailing Address Orthopaedic Associates 619 Pointe North Blvd 10 05 2012 City State Zip Code Transaction ID: AF913EEE9C0FC41139CF GA Albany 31721-1514 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Orthopaedic Associates Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 580.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gregory Solis MD Date of Receipt Mailing Address 10610 Brighton Hill Circle N. 09 10 2012 City State Zip Code Transaction ID: A5857DC4327F44B7A97C FL Jacksonville 32256-4536 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Jacksonville Ortho Institute Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

- 9

850.00

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

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

	FOR LINE	NUMBER:	PAGE	= 36 OF
Use separate schedule(s)	(check only	/ one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
	13	14	15	16

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic Surgeons
Full Name (Last, First, Middle Initial) Thomas J Blumenfeld MD Mailing Address 1020 29th St Ste 450		Date of Receipt
		10 10 2012
City	State Zip Code	Transaction ID : A477C2FE560F344DB9AF
Sacramento	CA 95816-5173	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Clifford K Boese MD		Date of Receipt
Mailing Address One Edmundson PI Ste 500		M M / D D / Y Y Y Y Y
City	State Zip Code	10 10 2012 Transaction ID : AD0811AE662274EE1803
Council Bluffs	IA 51503-4619	Transaction ID : AD0811AE662274FE1893 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each Hoodpt this Follow
federal political committee.	C	1000.00
Name of Employer	Occupation	
Miller Orthopedic Affiliates	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	
Full Name (Last, First, Middle Initial) C. James W Gallentine MD		Date of Receipt
Mailing Address 3121 Sheridan Blvd		10 10 2012
City	State Zip Code	Transaction ID : A5664CC2D2933443E8D6
Lincoln	NE 68502-5232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Nebraska Ortho & Sports Med	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
SUBTOTAL of Receipts This Page (optional)	>	1750.00
TOTAL This Period (last page this line number	only)	

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

ı	FOR LINE	NUMBER:	: PAGE	37 OF	62
	(check only	one)			
	X 11a	11b	11c	12	
	13	14	15	16	17

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

	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) Richard W Garner MD Mailing Address 3831 Piper St Suite S220 City Anchorage	State Zip Code AK 99508-4680	Date of Receipt 10 10 2012 Transaction ID: A271B9150E1834781B06 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Anchorage Fracture & Ortho Clinic Receipt For: □ Primary □ General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00	1000.00
Full Name (Last, First, Middle Initial) John G Heller MD Mailing Address 59 Executive Park South NE Ste 3000 City Atlanta FEC ID number of contributing federal political committee. Name of Employer Emory Spine Center Receipt For: Primary General Other (specify)	State Zip Code GA 30329-2208 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 10 2012 Transaction ID: AC3F792ABF1A24B318DI Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) D Kay Kirkpatrick MD Mailing Address 5671 Peachtree Dunwoody City Atlanta FEC ID number of contributing federal political committee. Name of Employer Resurgens Orthopaedics Receipt For: Primary General Other (specify)	Rd Ste 700 State Zip Code GA 30342-5047 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 10 10 2012 Transaction ID : ACF43304AE3454EDD9C Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	>	3000.00
TOTAL This Period (last page this line number	er only)	

Primary

В.

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE N	MMBEK:		PAGE	
	(check only	one)	_		_
or each category of the			1		_
Detailed Summary Page	X 11a	1110	1	.1C	
		□ [Г	

38 OF

12

62

16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Adam Edward Klein MD Date of Receipt Mailing Address 109 Legacy Drive 2012 10 City Zip Code State Transaction ID: AD351127F94584F98B1A 26508-4273 WV Morgantown Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation West Virginia University Orthopaedic Surgeon Receipt For:

Aggregate Year-to-Date ▼

	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Kevin James Kulwicki MD		Date of Receipt
Mailing Address 505 Sunset Drive		10 10 2012
City	State Zip Code	Transaction ID: A397D1181EA934B77A1I
Ashland	KY 41101-2171	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Kings Daughters Hospital	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

500.00

Full Name (Last, First, Middle Initial) Gregg Louis Massanelli MD Date of Receipt Mailing Address 2700 Vine St 2012 10 10 City State Zip Code Transaction ID: A43A5DF26E9EC4389B69 AR El Dorado 71730-6700 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation South Arkansas Ortho Center Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00

SUBTOTAL of Receipts This Page (optional)			7		Ξ	7		10	00.00)	
TOTAL This Period (last page this line number only)	_	_	7	_	Ξ	7	_	Ξ	_	_]

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

FOF	FOR LINE NUMBER: PAGE 39 OF 62									
(che	(check only one)									
X	11a		11b		11c		12			
	13		14		15		16			17

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

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial) Christopher M Miller MD Mailing Address 5059 S Greenbriar Ave City Springfield FEC ID number of contributing federal political committee. Name of Employer Ferrell-Duncan Clinic Receipt For:	State Zip Code MO 65804-7758 C Occupation Orthopaedic Surgeon	Date of Receipt 10 10 2012 Transaction ID: A7142A282E0D74853832 Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Alan Rosen MD Mailing Address 17270 Red Oak Dr Ste 200 City Houston FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code TX 77090-2632 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 10 2012 Transaction ID: A67C3AF050C7D44C0BB7 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Frederick Suh Song MD Mailing Address 7 Beechtree Ln City Princeton FEC ID number of contributing federal political committee. Name of Employer Princeton Orthopaedic Associates Receipt For: Primary General Other (specify)	State Zip Code NJ 08540-7428 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 10 2012 Transaction ID: A1106AEDAAFEF455DBD Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)	_	3000.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 40 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

62

13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Christopher Joseph Spieles MD Date of Receipt Mailing Address 735 S Shoop Ave 2012 10 City Zip Code State Transaction ID: A388DA0F2F2D14CEE90E OH Wauseon 43567-1735 Amount of Each Receipt this Period FEC ID number of contributing C 375.00 federal political committee. Name of Employer Occupation West Ohio Orthopedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 875.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stuart Winakur MD Date of Receipt Mailing Address 8322 Bellona Ave 10 10 2012 City State Zip Code Transaction ID: A5F623742205F4B4BADB MD Towson 21204-2065 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Towson Orthopaedic Associates** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. George S Zakaib MD Date of Receipt Mailing Address 3400 SW Redmond Hill Rd 10 2012 City Zip Code State Transaction ID: A0A185CAD69D94A91BA4 OR McMinnville 97128-8395 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation WVMC Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 875.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 41 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	one) 11b 14	11c	12 16	17
ny information copied from such Reports and Statements ma	, , , ,				U		

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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Mustasim N Rumi MD Date of Receipt Mailing Address 2901 Mill Reef Cv 2012 10 City State Zip Code Transaction ID: A9B89ED5C3C024BD3A37 TX 78746-1828 Austin Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Orthopaedic Surgeon Orthopaedic Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kathleen Anne Hogan MD Date of Receipt Mailing Address 17 Riverside St Ste 101 10 12 2012 City State Zip Code Transaction ID: A18529436A93E46D49A4 NH Nashua 03062-1383 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation NH Orthopaedic Center Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen W Shick MD Date of Receipt Mailing Address 14577 Faucet Ln 2012 12 City State Zip Code Transaction ID: A76BC65DF8F8D4A88BCC IN **Fishers** 46040-9476 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Central Indiana Orthopedics Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional).....

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

	FOR LINE	NUMBER	: PAGE	E 42 OF
Use separate schedule(s)	(check only	y one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
,,	13	1/	15	16

62

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	e American Association of Orthop	
Full Name (Last, First, Middle Initial) Gregory W Soghikian MD Mailing Address 700 Lake Ave Ste 1		Date of Receipt
City Manchester FEC ID number of contributing federal political committee. Name of Employer NH Orthopaedic Surgery Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code NH 03103-2734 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 2000.00	Transaction ID: A769D3191318E48C4B8B Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Sanaz Hariri MD Mailing Address 1169 Trinity Dr City Menlo Park FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary Other (specify) General Other (specify)	State Zip Code CA 94025-6668 C Occupation Unknown Aggregate Year-to-Date ▼	Date of Receipt 10 13 2012 Transaction ID: AEF533E7267264943BBD Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) William A Crotwell III Mailing Address 4217 River Oaks Lane City Mobile FEC ID number of contributing federal political committee. Name of Employer Alabama Orthopaedic Clinic Receipt For: Primary General Other (specify)	State Zip Code AL 36619-9552 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 10 15 2012 Transaction ID: AA13CFA78D4F2491AAB5 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 43 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

62

13 14 15 16 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) Political Action Committee of the American Association of Orthopaedic Surgeons Full Name (Last, First, Middle Initial) Daniel R Harrah MD Date of Receipt Mailing Address 3220 Hospital Dr 2012 10 City Zip Code State Transaction ID: A607C0DFB710B437FADF Juneau ΑK 99801-7808 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dinakar S Murthi MD Date of Receipt Mailing Address 17 Riverside St Suite 101 10 15 2012 City State Zip Code Transaction ID: AFF7A6AD7B8194CEAACD NH Nashua 03062-1383 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation New Hampshire Orthopaedic Center Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Don K Moore MD Date of Receipt Mailing Address 9077 S Federal Hwy 10 16 2012 City State Zip Code Transaction ID: AB60F4906AF11459EAC1 FL Port Saint Lucie 34952-3405 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Florida Orthopaedic Specialists Orthopaedic spine surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

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

F	OR	LINE	PAGE	- 4	14	OF		62			
(check only one)											
	×	11a		11b		11c		12			
		13		14		15		16			17

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

	g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee o	f the American Association of Orthop	paedic Surgeons
Full Name (Last, First, Middle Initial) Donald A Hackbarth MD Mailing Address Dept of Ortho Surg Box 2 9200 W Wisconsin Ave City Milwaukee FEC ID number of contributing federal political committee. Name of Employer Medical College of Wisconsin Receipt For: Primary General Other (specify)	State Zip Code WI 53226-3522 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Date of Receipt 10 17 2012 Transaction ID : A17A2D1D0A2754AD69A8 Amount of Each Receipt this Period 750.00
Full Name (Last, First, Middle Initial) Bernard G Kirol MD Mailing Address 1910 Blanding St City Columbia	State Zip Code SC 29201-3520	Date of Receipt 10 17 2012 Transaction ID : ADFF594FE68DE48D8983
Columbia FEC ID number of contributing federal political committee. Name of Employer Midlands Orthopaedics, PA	Occupation	Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Jay David Pond MD Mailing Address 800 Orthopedic Way City Arlington FEC ID number of contributing federal political committee. Name of Employer Arlington Orthopedic Associates	State Zip Code TX 76015-1629 C Occupation Orthogoadic Surgeon	Date of Receipt 10 17 2012 Transaction ID : A13CAB57D5B024E9897E Amount of Each Receipt this Period 380.00
Arlington Orthopedic Associates Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 380.00	
SUBTOTAL of Receipts This Page (optional	al)	2130.00
TOTAL This Period (last page this line nun	nber only)	61497.33

SOURDING A VEGO TO SE			
SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 OF 62 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of		· ·	
Full Name (Last, First, Middle Initial)			
A. American Association of Orthopaed			Date of Receipt
Mailing Address 317 Massachusetts Avenue 1st Floor	e, NE		10 15 2012 _
City	State	Zip Code	Transaction ID : A7C4A1352C9AE44AC9A3
Washington	DC	20002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1869.24
Name of Employer	Occupation	1	Refund of bank fees from affiliated organization
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	riggrogate	20492.87]
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
FFO ID available of contribution			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		, , , , , , , , , , , , , , , , , , ,]
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		Amount of Each Necept this Feriou
Name of Employer	Occupation	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		7	
SUBTOTAL of Receipts This Page (optional)			1869.24

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

1869.24

S IT

ımı	age# 12940378228			
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 OF 62 (check only one) 11a 11b 11c 12 13 14 15 X 16 17
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Political Action Committee of the			
Α.	Full Name (Last, First, Middle Initial) John Sullivan for Congress Inc			Date of Receipt
	Mailing Address P.O. Box 470840			1,0
	City Tulsa	State OK	Zip Code 74147	Transaction ID : A3FCB2C47C0664022805
	FEC ID number of contributing federal political committee.	C co	0366773	Amount of Each Receipt this Period 5000.00
	Name of Employer	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
٥.	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	1
_	Full Name (Last, First, Middle Initial)			1
C.				Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	

5000.00

5000.00

Other (specify)

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

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

S	CHEDULE B (FEC Form 3X)						PAGE 47 OF 62
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only one)			
			Summary Page	X^2	22 27 28a	23 28b	24 25 2 28c 29 3
_	.,	<u> </u>					
	ny information copied from such Reports and Statem for commercial purposes, other than using the name						
$\sqrt{}$	NAME OF COMMITTEE (In Full)						
	Political Action Committee of the A	merican	Association	of Orth	opaedic	Surgeor	ns
	Full Name (Last, First, Middle Initial)				D. I.	(D:-1	
Α.	Aristotle International, Inc				Date	of Disburse	
	Mailing Address 205 Pennsylvania Ave SE				10	O:	
	•	State	Zip Code		Tran	saction ID	: B7F779B05E2614FAD8
	Washington Purpose of Disbursement	DC	20003			0	. 5
	Credit card processing fees				Amou	nt of Each	Disbursement this Period
	Candidate Name			Category/ Type			34.00
	Office Sought: House Disbursen	nent For:		Турс		,	
	Senate	Primary	General				
		Other (spec	cify) 🔻				
_	State: District:						
R	Full Name (Last, First, Middle Initial)				Date	of Disburse	ment
υ.	Northern Trust Company				Date	_	
	Mailing Address 50 S. LaSalle St.				10		5 2012
	City S Chicago	State IL	Zip Code 60675		Tran	saction ID	: B41712623BF504D24BI
	Purpose of Disbursement Bank fees deducted from account				Amou	nt of Each	Disbursement this Period
	Candidate Name			Category/	-		
				Type			739.25
	Office Sought: House Disbursen						
		Primary	General				
	State: District:	Other (spec	GIIY)				
_	Full Name (Last, First, Middle Initial)						
C.	Northern Trust Company					of Disburse	
	Mailing Address 50 S. LaSalle St.				10	/ O	
	City	State	Zip Code		_		
	Chicago	IL	60675		Tran	saction ID	: B148FFF7F754B4D58A
	Purpose of Disbursement Bank fees deducted from account			· ·	1		
	Candidate Name			Category/ Type		nt of Each	Disbursement this Period 681.82
	Office Sought: House Disbursen	nent For:		- 7100			
	Senate	Primary	General				
		Other (spec	cify) 🔻				
_	State: District:						
s	SUBTOTAL of Disbursements This Page (optional)			··················)			1455.07
T	OTAL This Period (last page this line number only))			

S 17

SC	HEDULE E	B (FEC Form	3X)			FOR LINE NUMBER:				PAGE 48 OF 62				62		
ITE	EMIZED DIS	SBURSEMENT	ΓS		arate schedule(s category of the	5)	(check only one)									
					Summary Page		×	21b 27	22	<u>,</u>	23 28b		24 28c	25 29		26
									28							30b
		pied from such Report urposes, other than u														,
$\overline{}$	NAME OF COM		<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
I \		tion Committee	of the A	merican	Associatio	n of	Ort	hop	aedic	Su	rgeo	ns				
	•	First, Middle Initial)														
Α.	Aristotle Int	ernational, Inc									isburse					
	Mailing Address	205 Pennsylvania Ave	e SE						1	0	1	2	/ I Y	2012	Y	
	City		Ç	State	Zip Code				Tra	near	tion ID	· R	5223611		43D/	\ 8E4
	Washington			DC	20003				110	IISac	טו ווטוו	. Б	J2230 I I	OFED	4307	1004
	Purpose of Disbu Credit card proc	ursement essing fee							Amo	unt o	f Each	Dis	burseme	ent this	Perio	od
	Candidate Name	ı				C	atego	ry/						6 [,]	4.77	П
	Office Sought:	House	Disburser	nent For:			Туре				7		,			
	omoo cougiii.	Senate President		Primary Other (spe	General											
	State:	District:		Other (spe	City) \blacktriangledown											
		First, Middle Initial)														
В.	,	,							Date	of D	isburse	me	nt			
									M	M	/ D	D	/ Y	YY	Υ	
	Mailing Address								L		L		L		Ш	
	City		5	State	Zip Code											
	Purpose of Disbu	ursement						\neg								
									Amo	unt o	f Each	Dis	burseme	ent this	Perio)d
	Candidate Name					C	ategoi Type	ry/								
	Office Sought:	House	Disbursen	nent For:			- 7 -						,			
		Senate		Primary	General											
		President		Other (spe	cify) 🔻											
	State:	District:														
C.	Full Name (Last,	First, Middle Initial)							Data	of C	oisburse	ma	nt			
Ο.									Date	M	/ D			YY	V	
	Mailing Address								IVI	IVI						
	City		Ç	State	Zip Code											
	D															
	Purpose of Disbu	ursement					-									
	Candidate Name					┨	-		Amo	unt o	f Each	Dis	burseme	ent this	Perio	od
	Canadate Name					C	atego Type	ry/	/							
	Office Sought:	House	Disburser	nent For:			.,,,,				7		- 7			_
		Senate		Primary	General											
		President		Other (spe	cify) 🔻											
	State:	District:														
sı	UBTOTAL of Disl	bursements This Pag	e (optional)										-	64	1.77	٦
									=	=	,		7			=
Т	OTAL This Period	d (last page this line	number only)					•			7			1519	9.84	

SCHEDULE B (FEC Form 3X)	lloo congrete cohedule/s	, FOR LINE		PAGE 49 OF 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast offing		
	Detailed Summary Page		22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Sta	tements may not be sold or u			
or for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)				
Political Action Committee of the	American Association	on of Orthop	aedic Surgeons	3
Full Name (Last, First, Middle Initial)				
A. Archer for Congress			Date of Disbursem	ent
Alcher for Congress			M M / D D	/ Y Y Y Y
Mailing Address P.O. Box 122			10 05	2012
				
City Bettendorf	State Zip Code IA 52722-0003		Transaction ID :	BE0BFE26FC4D64215A8F
Purpose of Disbursement	IA 52722-0003			
. 4.,5000 0. 2.004.00			Amount of Each Di	isbursement this Period
Candidate Name		Category/		
John H Archer Jr.		Type		2500.00
Office Sought: House Disburs	sement For: 2012			
Senate	Primary General			
State: IA District: 02	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Bob Casey for Senate Inc			Date of Disbursem	ent
Bob eddey for certain me			M = M / D = D	/ Y Y Y Y Y
Mailing Address 30 S 15th Street, Suite 400			10 05	2012
City Philadelphia	State Zip Code PA 19102-4801		Transaction ID:	B8ABCFF78AF314E92A7I
Purpose of Disbursement	17102-4001			
			Amount of Each Di	isbursement this Period
Candidate Name		Category/		2500.00
Sen. Robert P. Casey Jr.		Type		2300.00
Office Sought: House Disburs	sement For: 2012			
President	Primary			
State: PA District:	Curici (opcony)			
Full Name (Last, First, Middle Initial)				
C. Friends of Bernie Sanders			Date of Disbursem	ent
			M M / D D	/ Y Y Y Y Y
Mailing Address P.O. Box 391			10 05	2012
City	State Zip Code			
Burlington	VT 05402-0391		Transaction ID :	B98CFAA60C79A4AECBE
Purpose of Disbursement				
			Amount of Each Di	isbursement this Period
Candidate Name		Category/		2500.00
Sen. Bernie Sanders Office Sought: House Disburs	sement For: 2012	Туре		7
Senate	Primary General			
President	Other (specify)			
State: VT District:				
SUBTOTAL of Disbursements This Page (optional)	·····		7500.00
TOTAL This Period (last page this line number on	ıy)		1	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 50 OF 62
ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(check only	one)
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and St	atements may not be sold or	used by any person	
or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
Political Action Committee of the	American Association	on of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial)			
A. Friends of Maria			Date of Disbursement
Mailing Address P.O. Box 12740			10 05 2012
City	State Zip Code		Transaction ID : B159833F8290444939A2
Seattle	WA 98111-4740		Transaction ID : B159633F6290444939A2
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Cotogogy	
Sen. Maria Cantwell		Category/ Type	2500.00
	rsement For: 2012	71	, , ,
X Senate	Primary X General		
President	Other (specify) ▼		
State: WA District:			
Full Name (Last, First, Middle Initial)			
B. Hoosiers for Richard Mourdock			Date of Disbursement
Mailing Address D.O.B. 1700			M = M / D = D / Y = Y = Y
Mailing Address P.O. Box 1583			10 05 2012
City	State Zip Code		Transaction ID : B20BF34694B6C4482A
Indianapolis Purpose of Disbursement	IN 46206-1583		
Pulpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name			Attribute of Each Bisbardonient this Feriod
Richard E Mourdock		Category/ Type	2500.00
	rsement For: 2012	71	, , ,
X Senate	Primary General		
President	Other (specify) ▼		
State: IN District:			
Full Name (Last, First, Middle Initial)			
C. House Conservatives Fund			Date of Disbursement
Mailing Address P.O. Box 2752			10 05 _2012 _
City	State Zip Code		Transaction ID : B649194940C3F4289894
Washington Purpose of Disbursement	DC 20013-2752		
Fulpose of Disbursement			
Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	5000.00
Office Sought: House Disbu	rsement For: 2012	.,,,,,	
Senate	Primary X General		
President	Other (specify) ▼		
State: District:			
<u> </u>			
SUBTOTAL of Disbursements This Page (options	al)	·····	10000.00
		<u> </u>	
TOTAL This Period (last page this line number of	nly)		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 51 OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	v one)
	Detailed Summary Page	21b	22 🗶 23 🔲 24 🔲 25
		27	28a 28b 28c 29
Any information copied from such Reports and Star			
or for commercial purposes, other than using the n	ame and address of any polit	ical committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Political Action Committee of the	American Associatio	n of Orthop	aedic Surgeons
Full Name (Last, First, Middle Initial)			
A. People for Derek Kilmer			Date of Disbursement
Mailing Address P.O. Box 1574			10 05 2012
City	State Zip Code		
Gig Harbor	WA 98335-3574		Transaction ID : B700444C63E6D484E
Purpose of Disbursement			
			Amount of Each Disbursement this Perio
Candidate Name		Category/	5000.00
Derek Kilmer		Type	5000.00
Office Sought: House Disburs	sement For: 2012		
Senate	Primary General		
President	Other (specify) ▼		
State: WA District: 06			I
Full Name (Last, First, Middle Initial)			
B. Rob Andrews U.S. House Comm	ittee		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 215 Fourth Ave, Suite 200			10 05 2012
City	State Zip Code		Transaction ID : BFC9AE739CF734075
Haddon Heights	NJ 08035-1306		
Purpose of Disbursement			
			Amount of Each Disbursement this Perio
Candidate Name		Category/	2500.00
Rep. Robert E. Andrews		Type	2500.00
	sement For: 2012		
Senate	Primary General		
President	Other (specify) ▼		
State: NJ District: 01			
Full Name (Last, First, Middle Initial)			
C. Shore PAC			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. Box 3157			10 05 2012
City	State Zin Code		
City	State Zip Code NJ 07740-3157		Transaction ID : B6F176B9A92594350
Long Branch Purpose of Disbursement	110 07740-3137		
Pallone's LPAC			Amount of Fook Diskungers and this Device
Candidate Name			Amount of Each Disbursement this Perio
Carolidate Name		Category/	5000.00
Office Sought: House Disburs	sement For: 2012	Туре	
Senate Disburs	Primary General		
President			
State: District:	Other (specify) ▼ Other2012		
State. District.	Other2012		
OUDTOTAL - (D) I			12500.00
SUBTOTAL of Disbursements This Page (optional)	·····	12300.00
TOTAL This Bushed (lead to 11 th 11 th	1. A		
TOTAL This Period (last page this line number on	ıу)		

SCHEDULE B (FEC Form 3X)	Hoo comments as be start of	FOR LINE		PAGE 52 OF 62	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orlin)			
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Sta	tements may not be sold or u				
or for commercial purposes, other than using the r	name and address of any politi	ical committee to	solicit contributions f	rom such committee.	
NAME OF COMMITTEE (In Full)					
\mid $ angle$ Political Action Committee of the	American Associatio	n of Orthop	aedic Surgeon	S	
Full Name (Last First Middle Initial)					
Full Name (Last, First, Middle Initial) A. Whitehouse for Senate			Date of Disbursem	nent	
willenouse for Seriale					
Mailing Address 1284 N Main St.					
City	State Zip Code		Transaction ID :	B27E52235F8E54AAC8FB	
Providence Purpose of Disbursement	RI 02904-1830				
r urpose of bisbursement			Amount of Each D	isbursement this Period	
Candidate Name		Category/			
Sen. Sheldon Whitehouse		Type		2500.00	
Office Sought: House Disbur	sement For: 2012				
Senate	Primary X General				
State: RI District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
B. Angus King for U.S. Senate Cam	naian		Date of Disbursem	nent	
Aligus Kilig for 0.5. Seriate Call	ipaigii		M M / D D		
Mailing Address 135 Maine St			10 09	2012	
City	State Zip Code ME 04011-2009		Transaction ID :	B8F6CAE2DC5374A0CB14	
Brunswick Purpose of Disbursement	ME 04011-2009				
			Amount of Each D	isbursement this Period	
Candidate Name		Category/			
Angus Stanley King Jr.		Type		5000.00	
	sement For: 2012				
Senate	Primary Seneral				
President State: ME District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. Friends of Connie Mack			Date of Disbursem	nent	
			M M / D D	/	
Mailing Address P.O. Box 14-1129			10 09	2012	
City	State Zip Code				
Coral Gables	FL 33114		Transaction ID:	BA00A4F5405264AECBD5	
Purpose of Disbursement					
			Amount of Each D	isbursement this Period	
Candidate Name		Category/		2500.00	
Rep. Connie Mack Office Sought: House Disbur	sement For: 2012	Туре		2000.00	
✓ Senate	Primary General				
President	Other (specify)				
State: FL District:					
'					
SUBTOTAL of Disbursements This Page (optiona	l)			10000.00	
TOTAL This Period (last page this line number or	nly)	•••••••••••••••••••••••••••••••••••••••			

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 53	OF 62
IT	EMIZED DISBURSEMENTS		rate schedule(s)	(check only	one)		
- •			ategory of the Summary Page	21b	22 🔀	23 24 25	26
_				27	28a	28b 28c 29	30b
	ny information copied from such Reports and Statem						
or	for commercial purposes, other than using the name	e and addre	ess of any politic	al committee to	solicit contri	butions from such comm	nittee.
	NAME OF COMMITTEE (In Full)						
$ \rangle$	Political Action Committee of the A	merican	Association	of Orthop	aedic Su	rgeons	
$oldsymbol{oldsymbol{\angle}}$				<u>'</u>			
	Full Name (Last, First, Middle Initial)				.		
A.	Pete Stark Re-election Committee				Date of D	isbursement	
	M 211 A 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				M = M	/ D D / Y Y	
	Mailing Address P.O. Box 8331				10	09 2012	
	City	State	Zip Code				
	Fremont	CA	94537-8331		Transac	tion ID : B51C24C066D	6C456AA82
	Purpose of Disbursement		3.007.0001				
	•				Amount of	Each Disbursement thi	is Period
	Candidate Name			Cotomorii			
	Rep. Pete Stark			Category/ Type		15	500.00
		nent For: 20	 012	717-		,	
		Primary	General				
		Other (speci					
	State: CA District: 13		•				
_	Full Name (Last, First, Middle Initial)						
В.	•	PAC			Date of D	isbursement	
	201101 2000010111p 201101 / Illioniou 1	<i>,</i>			M = M	/ D D / Y Y Y	Y
	Mailing Address P.O. Box 3055				10	14 2012	
	•	State	Zip Code		Transac	tion ID : B459422EAB8	A541729C8
	Virginia Beach	VA	23454-9155		i i alisac		5 11 2500
	Purpose of Disbursement Scott Rigell's LPAC		T			real Direction	- D
	•				Amount of	f Each Disbursement thi	s Period
	Candidate Name			Category/		25	500.00
	Office Cought			Туре			- 11
		nent For: 20					
		Primary	General				
	President State: District:	Other (speci					
_			Other2012				
_	Full Name (Last, First, Middle Initial)				Doto of D	isbursement	
U.	Denny Heck for Congress						
	Mailing Address D.O. Poy 225				10	14 2012	
	Mailing Address P.O. Box 235				10	14 2012	
	City	State	Zip Code				
		WA	98507-0235		Transac	tion ID : B44F474635C1	IE4146A0E
	Purpose of Disbursement						
				' '	Amount of	f Each Disbursement thi	s Period
	Candidate Name			Category/			
	Dennis Heck			Type		10	00.00
	Office Sought: House Disbursen	nent For: 20	012			7	
		Primary	✓ General				
	President	Other (speci	ify) 🔻				
	State: WA District: 10						
Г	<u>'</u>						
5	SUBTOTAL of Disbursements This Page (optional)					50	00.00
H					_	7	
Т	TOTAL This Period (last page this line number only)					4-1-4-1-1	
	* * =			-		,	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 54 OF 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🗙 23 🔲 24 📗 25 🖂 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten			
or for commercial purposes, other than using the nam	e and address of any political	ai committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			l' 0
Political Action Committee of the A	merican Association	of Orthopa	aedic Surgeons
Full Name (Last, First, Middle Initial)			
A. George Allen for U.S. Senate			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 2507 Kensington Ave			10 14 2012
011	7' 0 1		
City S Richmond	State Zip Code VA 23220-3313		Transaction ID : B6E86D83C81A94172BC3
Purpose of Disbursement	23220-3313		
. 4.,5666 6. 2.654.66			Amount of Each Disbursement this Period
Candidate Name		Cotogony	
George Allen		Category/ Type	2500.00
	nent For: 2012		
X Senate	Primary Seneral		
President	Other (specify) ▼		
State: VA District:			
Full Name (Last, First, Middle Initial)			
B. Golden State Congressional Victor	y Fund		Date of Disbursement
Mailing Address 2470 Daniell's Bridge Rd,			10 14 2012
Suite 121			10 14 2012
City	State Zip Code		Transaction ID : BEE7ED625E94844B390B
Athens	GA 30606-6191		Transaction ID . BEE7ED023E94044B390B
Purpose of Disbursement CA Joint Committee			
Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2500.00
Office Sought: House Disburser	nent For: 2012	туре	
Senate	Primary General		
President	Other (specify)		
State: District:	Other2012		
Full Name (Last, First, Middle Initial)			
C. John Tavaglione for Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 4201 Brockton Ave Suite 100			10 14 2012
	State Zip Code		
Riverside	CA 92501-3431		Transaction ID: B505B307599EA44D2A3B
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
John F Tavaglione	and Fam. 55:5	Туре	1000.00
	nent For: 2012		
President	Primary		
State: CA District: 41	Caron (opcomy)		
2.1 2.1 71			
SUBTOTAL of Disbursements This Page (optional)			6000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 55 OF 62
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon oriny	,	
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	monto mov not be cold or us			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
Political Action Committee of the A	American Association	n of Orthopa	aedic Surgeons	;
		<u>'</u>		
Full Name (Last, First, Middle Initial)			Date of Disburseme	ont
A. Keystone PAC				
Mailing Address P.O. Box 29			10 14	2012
City	State Zip Code		Transaction ID : E	3964E6BACB15D4C23862
Uwchland Purpose of Disbursement	PA 19480-0029			
Gerlach's LPAC			Amount of Each Di	sbursement this Period
Candidate Name		Cotogony		
		Category/ Type		5000.00
Office Sought: House Disburse	ment For: 2012			
Senate	Primary General			
State: District:	Other (specify) ▼ Other2012			
Full Name (Last, First, Middle Initial)	Otherzorz			
B. Ron Barber for Congress			Date of Disburseme	ent
Non Barber for Congress			M M / D D	/ Y Y Y Y
Mailing Address P.O. Box 57715			10 14	2012
0				
City Tucson	State Zip Code AZ 85732-7715		Transaction ID : I	B3CAA04D57349494B83F
Purpose of Disbursement	7.2 037327713			
			Amount of Each Di	sbursement this Period
Candidate Name		Category/		1000.00
Ron Barber	. =	Туре		1000.00
Office Sought: House Disburse Senate	ment For: 2012 Primary General			
President	Other (specify)			
State: AZ District: 08	(
Full Name (Last, First, Middle Initial)				
C. Sanford D. Bishop, Jr. for Congres	SS		Date of Disburseme	ent
			M M / D D	/ Y Y Y Y Y
Mailing Address 209 Pennsylvania Ave SE			10 14	2012
City	State Zip Code			
Washington	DC 20003-1107		Transaction ID : I	BC16E50F5051D488B9BE
Purpose of Disbursement				
Candidate Name			Amount of Each Di	sbursement this Period
Rep. Sanford D. Bishop Jr.		Category/ Type		5000.00
	ment For: 2012	туре	7	7
Senate	Primary General			
President	Other (specify) ▼			
State: GA District: 02				
				11000.00
SUBTOTAL of Disbursements This Page (optional).		·····•	7	11000.00
TOTAL This Period (last page this line number only	·)			
(page and mile namber off)	,			

SCHEDULE B (FEC Form 3X)	Llee concrete selectivity	FOR LINE		PAGE 56 OF 62
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	,	
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30l
Any information copied from such Benevic and Cities	nonte may not be sald as ::=			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan	nems may not be sold or us ne and address of any politic	cal committee to	solicit contributions fr	rom such committee.
NAME OF COMMITTEE (In Full)	71.5			
Political Action Committee of the A	merican Association	n of Orthop	aedic Surgeons	5
		-		
Full Name (Last, First, Middle Initial)			Date of Disbursem	ent
A. Tom Rice for Congress			M M / D D	
Mailing Address 1107 48th Ave, N			10 14	2012
Suite 210				
,	State Zip Code		Transaction ID :	B231B0AD90CEF44639C
Myrtle Beach Purpose of Disbursement	SC 29577-5443			
. a.pood of bloodisoment			Amount of Each Di	isbursement this Period
Candidate Name		Category/		
Tom Rice		Type		2500.00
Office Sought: House Disburser	ment For: 2012			
Senate	Primary General			
State: SC District: 07	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B.			Date of Disbursem	ent
			M M M / D D	/
Mailing Address				J L
				
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Di	isbursement this Period
Candidate Name		Category/		
		Туре		7
Office Sought: House Disburser Senate	nent For: Primary General			
President	Other (specify)			
State: District:	• · · · · · · · · · · · · · · · · · · ·			
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursem	ent
A			M M / D D	/
Mailing Address				التنتا
City	State Zip Code			
Purpose of Disbursement				
Fulpose of Disbursement			Amount of Fools Di	iahaant thia Daviad
Candidate Name		Category/ Type	Amount of Each Di	isbursement this Period
Office Sought: House Disburser	nent For:	1,400		7
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
				2500.00
SUBTOTAL of Disbursements This Page (optional)		·····•	-	2300.00
TOTAL This Period (last page this line number only)				64500.00
TOTAL THIS FERIOU (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 57 OF 62	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	(check only one)		
 	Detailed Summary Page	21b	22 23	24 25 26	
		27	28a 28b	28c 🗙 29 30b	
Any information copied from such Reports and Statem					
or for commercial purposes, other than using the name	le and address of any politic	ai committee to	SOlicit Contributions from	n such committee.	
NAME OF COMMITTEE (In Full)		f O th	l: - O		
Political Action Committee of the A	merican Association	of Ortnopa	aedic Surgeons		
Full Name (Last, First, Middle Initial)					
A. Women's Policy, Inc			Date of Disbursemer	nt	
Mailing Address 409 12th Street SW			10 05	2012	
Suite 310			10 03	2012	
City	State Zip Code		Transaction ID . Bl	= 000EC77DE	
Washington	DC 20024-6126		Transaction ID : Bi	E609FC77DEA546B2A92	
Purpose of Disbursement 2013 Congressional Dinner			Amount of Each Dist	oursement this Period	
Candidate Name		Category/		5000.00	
000		Type	7	3000.00	
	nent For: 2012				
	Primary General Other (specify) ▼				
State: District:	Other0				
Full Name (Last, First, Middle Initial)					
B.			Date of Disbursemer	nt	
			M = M / D = D	/ Y Y Y Y Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
			Amount of Each Dish	oursement this Period	
Candidate Name		Category/			
		Туре		7	
Office Sought: House Disbursen					
	Primary General Other (specify) ▼				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
C.			Date of Disbursemer	nt	
			M M / D D	/	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
. 4.,5666 6. 2.654.666			Amount of Each Disk	oursement this Period	
Candidate Name		Category/	Amount of Each bisi	oursement this renou	
Office Sought: House Disbursen	aont For:	Type			
	Primary General				
	Other (specify)				
State: District:	(openij) V				
SUBTOTAL of Disbursements This Page (optional)				5000.00	
				5000.00	
TOTAL This Period (last page this line number only).				5000.00	

S

 $William\ Robb$

Signature

	CHEDULE E (FEC Form 3X)				
TΕ	EMIZED INDEPENDENT EXPENDITURES			PAGE 58 FOR LINE 2	OF 62 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC	IDENTIFICATION	ON NUMBER ▼
	colitical Action Committee of the American Association of Orthon Surgeons	oaedic	C	C00343137	
Ch	neck if 24-hour report 48-hour report New report Amends repo	rt filed on	M = M	/ /	Y Y Y Y Y
	Full Name (Last, First, Middle Initial) of Payee Issue & Image Advocacy Advertising	Date			
	Mailing Address 211 N Union St, Suite 100		10 ^M	01	2012
		Amo	unt		
	City State Zip Code Alexandria VA 22314				75000.00
	7.107.43.14.14			ID : E0204821	F7CC14CFBA85
	Purpose of Expenditure Radio airtime-Jim Matheson Category/ Type	Office Sou	ght:	House Senate	State: UT District: 02
	Name of Federal Candidate Supported or Opposed by Expenditure:		l	President	
	Rep. Jim Matheson	Check On	e:	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought 75000.00	Disbursem 2012		Primary specify)	General
	Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc	Date	м в м 10	/ D D /	2012
	Mailing Address 600 Fairmount Ave				
	Suite 306	Amo	unt		
	City State Zip Code				94000.00
	Towson MD 21286-1002				C58DD14FD097F
	Purpose of Expenditure Radio Airtime-Denny Rehberg Category/ Type	Office Sou	ght:	House Senate	State: MT District:
	Name of Federal Candidate Supported or Opposed by Expenditure:			President	
	Rep. Denny R. Rehberg	Check On	e:]	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought 94000.00	Disbursem 2012		Primary Prepared Primary	General
	(a) SUBTOTAL of Itemized Independent Expenditures	• [7	169000.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	· • [
	(c) TOTAL Independent Expenditures	•		7	
	Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent or party committee) any political party committee or its agent				

[Electronically Filed]

2012

23

10

Date

SCH ITEMI

ME OF COMMITTEE (In Full)						OF 62 24 OF FORM 3
plitical Action Committee of the urgeons	American A	ssociation of Ortho	paedic		C00343137	ON NUMBER T
				M = M /	D D /	Y . Y . Y . Y
eck if 24-hour report 48-hour rep	ort Nev	w report Amends rep	ort filed on			
Full Name (Last, First, Middle Initial) of Pay Mentzer Media Services, Inc	/ee		Date			
Ma Wan Adday				10	17	2012
Mailing Address 600 Fairmount Ave						
Suite 306			Amo	unt		
City	State	Zip Code				76000.00
Towson	MD	21286-1002	Trans	action ID	: E58DA786	695404FEEB2E
Purpose of Expenditure Radio Airtime-Nan Hayworth		Category/ Type	Office Sou	ght: X	House Senate	State: NY
Name of Fordered Conditions Commented as 6	S		_		President	District: 19
Name of Federal Candidate Supported or C Rep. Nan A.S. Hayworth	Opposed by Expen	alture:	Check One	: <u>X</u>		Oppose
Calendar Year-To-Date Per Election for Office Sought		76000.00	Disburseme	ent For: [Other (spe	Primary ecify)	General
Full Name (Last, First, Middle Initial) of Pay	/ee		Date			
Mentzer Media Services, Inc				M 10 /	17	Y Y Y Y Y 2012
Mailing Address 600 Fairmount Ave						
Suite 306			Amo	unt		
Suite 306	State	Zip Code	Amo	unt		
City	State MD	Zip Code 21286-1002	Amo	unt	1 1 7	82000.00
City Towson		21286-1002	Trans	action ID		EAF82744739B
		•		action ID	House Senate	
City Towson Purpose of Expenditure Radio Airtime -Dean Heller	MD	Category/ Type	Trans	action ID	House	State: NV
City Towson Purpose of Expenditure	MD	Category/ Type	Trans	action ID	House Senate President	State: NV
City Towson Purpose of Expenditure Radio Airtime -Dean Heller Name of Federal Candidate Supported or C	MD	Category/ Type	Trans Office Soug	action ID	House Senate President Support Primary	State: NV District:
City Towson Purpose of Expenditure Radio Airtime -Dean Heller Name of Federal Candidate Supported or C Dean Heller Calendar Year-To-Date Per Election for Office Sought	MD Dpposed by Expen	21286-1002 Category/ Type diture:	Trans Office Soug Check One Disburseme	action ID ght:	House Senate President Support Primary	State: NV District: Oppose General
City Towson Purpose of Expenditure Radio Airtime -Dean Heller Name of Federal Candidate Supported or C Dean Heller Calendar Year-To-Date Per Election for Office Sought	MD Dpposed by Expen	21286-1002 Category/ Type diture:	Trans Office Soug Check One Disburseme	action ID ght:	House Senate President Support Primary	State: NV District: Oppose
City Towson Purpose of Expenditure Radio Airtime -Dean Heller Name of Federal Candidate Supported or C Dean Heller Calendar Year-To-Date Per Election	MD Dpposed by Expendent	Category/ Type diture:	Trans Office Soug Check One Disburseme 2012	action ID ght:	House Senate President Support Primary	State: NV District: Oppose General

Unde with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

William Robb [Electronically Filed] 10 23 2012 Date Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 60 FOR LINE 2	OF 62 24 OF FORM 3X
FEC IDENTIFICATION	ON NUMBER ▼
C C00343137	
M = M / D = D /	Y Y Y Y Y
ite	
10 / 17	2012
nount	
	20000.00
nsaction ID : ED5FC544	O
ought: House Senate	State: GA
President	District: 06
ne: Support	Oppose
ment For: Primary	General
Other (specify)	
ite	
10 / 17	2012
nount	
	35000.00
nsaction ID : E66B3805	Ctata
ought: House Senate	State: NV
Senate President	District: 03
ne: Support	Oppose
ment For: Primary	General
Other (specify)	
	55000.00

NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Ortho Surgeons	paedic C C00343137 FEC IDENTIFICATION NUMBER ▼
Check if 24-hour report 48-hour report New report Amends report	ort filed on M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc Mailing Address 600 Fairmount Ave Suite 306 City State Zip Code Towson MD 21286-1002 Purpose of Expenditure Radio Airtime-Tom Price Category/ Type	Date M
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Thomas E. Price	President Oppose Oppose
Calendar Year-To-Date Per Election for Office Sought 20000.00 Full Name (Last, First, Middle Initial) of Payee	Disbursement For: Primary General Other (specify)
Mentzer Media Services, Inc Mailing Address 600 Fairmount Ave Suite 306 City State Zip Code Towson MD 21286-1002 Purpose of Expenditure Radio Airtime-Joe Heck Category/ Type Name of Federal Candidate Supported or Opposed by Expenditure: Joe Heck Calendar Year-To-Date Per Election for Office Sought	Amount 35000.00 Transaction ID : E66B3805277FF4113975 Office Sought: House State: NV Senate District: 03 President Check One: Support Oppose Disbursement For: Primary General 2012 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
(c) TOTAL Independent Expenditures	·· >
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
William Robb [Electronically Filed] Date Signature	e 10 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	61	OF	62	
FOR L	INE 2	4 OF F	ORM 3X	
ENITIE	OATIC	N	DED -	

	TOTT LINE 24 OF TOTTWI 3X
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopa	FEC IDENTIFICATION NUMBER ▼
Surgeons	C C00343137
Check if 24-hour report 48-hour report New report Amends report f	filed on M M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc	Date
Mailing Address 600 Fairmount Ave	
Suite 306	Amount
City State Zip Code	32000.00
Towson MD 21286-1002	Transaction ID : EB074E05F45C645BB9C7
Purpose of Expenditure Radio Airtime-Brett Guthrie Category/ Type	Office Sought: House State: KY Senate District: 02
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Rep. Brett Guthrie	Check One: Support Oppose
	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc	Date 17 2012
Mailing Address 600 Fairmount Ave Suite 306	10 17 2012 Amount
City State Zip Code	10000.00
Towson MD 21286-1002	Transaction ID : E2E5A30205A344188827
Purpose of Expenditure Radio Airtime-John Barasso Category/ Type	Office Sought: House State: WY Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Sen. John Barrasso	Check One: Support Oppose
Calendar fear-10-Date Per Election	Disbursement For: Primary General O12 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	42000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.	
William Robb [Electronically Filed] Date	10 23 2012
Signature	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 62 OF 62 FOR LINE 24 OF FORM 3X	
FEC IDENTIFICATION NUMBER ▼	
C C00343137	
/ D D / Y E Y E Y E	
110 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
40000.00	1
ction ID : E7E2A2A2627CB4126A37 ht: House State: NV	
Senate District:	_
Support Oppose	
nt For:	_
1 = M / D = D / Y = Y = Y	
nt	
171171171	
ht: House State: Senate District:	-
President	
President Oppose	

NAME OF COMMITTEE (In Full)			DENTIFICATION	ON NUMBER ▼
Political Action Committee of the American Association of Orthopaedic Surgeons			C00343137	
Check if 24-hour report 48-hour report New report Amends report file		ш М	/ D D /	Y I Y I Y I Y
Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc	Date			
At The Address		10 ^M	17	2012
Mailing Address 600 Fairmount Ave Suite 306	Amour	nt		
City State Zip Code				40000.00
Towson MD 21286-1002	Transac	tion IF	D · F7F2Δ2Δ2	40000.00 2627CB4126A37
Radio Airtime-Dean Heller Type	Office Sough		House Senate President	State: NV District:
Name of Federal Candidate Supported or Opposed by Expenditure: Dean Heller C	heck One:	×	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	risbursemen 12 Oth		Primary Decify)	General
Full Name (Last, First, Middle Initial) of Payee	Date			
	M	- M	/ D D /	Y Y Y Y Y
Mailing Address	Amour	nt		
City State Zip Code				1 45
Purpose of Expenditure Category/ Type O	Office Sough	nt:	House Senate	State:
Name of Federal Candidate Supported or Opposed by Expenditure:	heck One:		President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	isbursemen Otl		Primary pecify)	General
(a) SUBTOTAL of Itemized Independent Expenditures		-	7	40000.00
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			7	464000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.				
William Robb [Electronically Filed] Date	M M / 10	23	/ Y Y 201	2 Y
Signature		-		