Image# 13940608194				PAGE 1 / 9
FEC FORM 3X	REPORT OF AND DISBUE For Other Than An Au	RSEMENT	s	
I. NAME OF	TYPE OR PRINT ▼	Example: If typi	ng, type 12FE4	Office Use Only
COMMITTEE (in full)		over the lines.	12664	CI
Cooperative of Amer	ican Physicians IE Co	mmittee		
DDRESS (number and street)	333 S Hope St 8th Floor			
Check if different				
than previously reported. (ACC)	Los Angeles			90071
P. FEC IDENTIFICATION		TY 🔺	STATE 🔺	ZIP CODE
C C00492116			NEW OR	AMENDED (A)
 TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	Report Due On: Ma	ur 20 (M3)	Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9) Nov 20 (M1 ¹ (Non-Election Year Only) Dec 20 (M1 ² (Non-Election Year Only)
April 15 Quarterly Report	(Q1)			Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report	(Q2) (C) 12-Day PRE-Election Report for the:	Primary (12F		eral (12G) Runoff (12R)
October 15 Quarterly Report				
January 31 Year-End Report	(YE) Elect	ion on		Y in the State of
July 31 Mid-Year Report (Non-elec Year Only) (MY)		General (300	a) Runo	off (30R) Special (30S
Termination Repo (TER)	ort	ion on	D = D / Y = Y = Y	in the State of
. Covering Period	03 / D D / Y Y Y Y 01 2013	through	03 / D C	2013
certify that I have examined	this Report and to the best of	f my knowledge and I	pelief it is true, correct	t and complete.
Type or Print Name of Treasu	rer Rebecca Olson			
Signature of Treasurer <i>Re</i>	becca Olson	[Electronicall]	Filed] Date	04 / D D / Y Y Y Y 12 / 2013
OTE: Submission of false, erro	oneous, or incomplete informati	on may subject the per-	son signing this Report	to the penalties of 2 U.S.C. §437g.
Office Use				FEC FORM 3X Rev. 12/2004
Only				

04/19/2013 19 : 57

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)	RECEIPTS AND DISBURSEMENTS	Page 2
۷	Vrite or Type Committee Name		
(Cooperative of American Physicians	E Committee	
F	Report Covering the Period: From: 03	01 / Y Y Y Y Y Y 01 2013 To:	03 / D D / Y Y Y Y Y 2013
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		54817.60
	(b) Cash on Hand at Beginning of Reporting Period	190010.88	
	(c) Total Receipts (from Line 19)	630543.10	817036.38
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	820553.98	871853.98
7.	Total Disbursements (from Line 31)	214335.93	265635.93
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	606218.05	606218.05
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DE FEC Form 3X (Rev. 06/2004)	TAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Committee Name		ŭ
Cooperative of American Physicians	IE Committee	
Report Covering the Period: From: 03	/ D D / Y Y Y Y 01 2013 To:	03 / D D / Y Y Y Y 2013
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	630500.00	816970.73
(ii) Unitemized (iii) TOTAL (add	7.0.00	0.00
Lines 11(a)(i) and (ii)	630500.00	816970.73
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	630500.00	816970.73
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	0.00
 Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds 	43.10	65.65
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d),		047000.00
12, 13, 14, 15, 16, 17, and 18(c))►	630543.10	817036.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	630543.10	817036.38

Image# 13940608196

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4				
II. Disbursements	II. Disbursements COLUMN A Total This Period					
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date				
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating Expenditures	214335.93	230635.93				
(c) Total Operating Expenditures						
(add 21(a)(i), (a)(ii), and (b)) ► Transfers to Affiliated/Other Party	214335.93	230635.93				
Committees Contributions to	0.00	0.00				
Federal Candidates/Committees and Other Political Committees	0.00	0.00				
Independent Expenditures	0.00	0.00				
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00					
(use Schedule F)		0.00				
Loan Repayments Made	0.00	0.00				
Loans Made Refunds of Contributions To:	0.00	0.00				
(a) Individuals/Persons Other Than Political Committees	0.00	1100.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees (such as PACs)	0.00	0.00				
(Such as FACS)	0.00					
(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))	0.00	1100.00				
Other Disbursements	0.00	33900.00				
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely		0.00				
With Federal Funds (c) Total Federal Election Activity (add	0.00	0.00				
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))	214335.93	265635.93				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	214335.93	265635.93				

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	630500.00	816970.73
 Total Contribution Refunds (from Line 28(d)) 	0.00	1100.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	630500.00	815870.73
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	214335.93	230635.93
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	214335.93	230635.93

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 6 OF

9

		Detailed Summary Page		11a		11b	11c	12	- -							
Any information copied from such Reports and	Statements ma	av not be sold or used by any n	erson fo	13 or the	DUrr	14 Dose of	15 soliciting	16 L contribu	17 tions							
or for commercial purposes, other than using t																
NAME OF COMMITTEE (In Full)					_											
Cooperative of American Phys	sicians IE C	Committee														
Full Name (Last, First, Middle Initial) A. Cooperative of American Physicians	S			ate of	Re	ceipt										
Mailing Address 333 S Hope St 8th Floor				м м 03	/	D 11										
City	State	Zip Code		Trans	acti	on ID :	11AI-76	AI-76								
Los Angeles	CA	90071	A	mount	of	Each F	Receipt th	is Period								
FEC ID number of contributing federal political committee.	С		650.00 In-Kind: Legal & Accounting Services													
Name of Employer	Occupation															
Receipt For: 2013 Primary General	Aggregate	Year-to-Date ▼	1													
X Other (specify) ▼ Calendar Year		815870.73	- L													
Full Name (Last, First, Middle Initial) B. Cooperative of American Physicia							Date of Receipt									
Mailing Address 333 S Hope St 8th Floor		03 31 2013														
City	Angeles CA 90071															
Los Angeles	CA	A	Amount of Each Receipt this Period													
FEC ID number of contributing federal political committee.	С				_	y		629850	.00							
Name of Employer	Occupation															
Receipt For: 2013	Aggregate	Year-to-Date ▼														
Primary General			11													
X Other (specify) ▼ Calendar Year	X Other (specify) ▼ 815870.73 Calendar Year															
Full Name (Last, First, Middle Initial) C.			D	Date of	Re	ceipt										
Mailing Address				M = M	/	D) / Y	Y Y	Y							
City	State	Zip Code	A	mount	of	Each F	Receipt th	is Period								
FEC ID number of contributing federal political committee.	ů l															
Name of Employer																
Receipt For:																
Primary General	33.532.00	Year-to-Date ▼	1.													
Other (specify)	Uther (specify)															
SUBTOTAL of Receipts This Page (optional).		······				7		630500	.00							
TOTAL This Period (last page this line number	er only)	······	Ī			,		630500	.00							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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 PAGE 7 OF

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	Mailing Address 333 S Grand Ave			03 / D D / Y FY FY FY 2013 _ 2013 _											
	City Los Angeles	State CA	Zip Code 90071	Transaction ID : 17-76-0 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С			Interest	Ear	ned			43.	10				
	Name of Employer Receipt For: 2013	Occupation Aggregate	Year-to-Date ▼	_	intereet	Lan	lica								
	Primary General Other (specify) ▼ Calendar year		65.65												
В.	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt								
	Mailing Address	Zip Code													
	City		Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С													
	Name of Employer	Occupation													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼												
<u>с.</u>	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt								
	Mailing Address				M M	_		D / Y	Y	Y	Y				
	City	State	Zip Code		Amoun	t of	Each F	Receipt t	his Pe	riod					
	FEC ID number of contributing federal political committee.	С					7								
	Name of Employer	Occupation													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼												
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)																	
	Cooperative of American Physician	IS IE CO	mmittee															
<u></u>	Full Name (Last, First, Middle Initial)		Date	of Di	churc	omor	at											
^ .	Michael Barone		M		D			Y	Y	Y								
	Mailing Address 2425 L Street, NW, #303						03 25 2013 Transaction ID : 21B-184											
	City S Washington	State DC	Zip Code 20037															
	Purpose of Disbursement		20037	_		_												
	Speaker Fee Candidate Name			C	07		Amount of Each Disbursement this Period											
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в.	Full Name (Last, First, Middle Initial) Cooperative of American Physician	าร						Date of	of Di	sburse	emer	nt						
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	Mailing Address 333 S Hope St 8th Fl					03 11 2013												
	City S Los Angeles	State CA	Zip Code 90017				Transaction ID : 21B-183											
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C.	Full Name (Last, First, Middle Initial) Cooperative of American Physician	าร						Date	of Di	sburse	emer	nt						
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	City State S	State CA	Zip Code 90071					Tran	sact	tion ID):21	B-76-	N					
	Purpose of Disbursement In-Kind: Legal & Accounting Services				-		1			_	_							
	Candidate Name		Category/ Type					Amount of Each Disbursement this Period 650.00										
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ITEMIZED DISBURSEMENTS Use separate schedul(s) break category of the category of the parages (check only one) 2 the 2	S	CHEDULE B (FEC Form 3X)			F	OR		NU	MBER:			F	AGE	9	OF 9			
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Full Name (Last, First, Middle Initial) Date of Disbursement A. Cooperative of American Physicians Date of Disbursement Mailing Address 333 S Hope St Bth Fl 001 City State Zip Code Candidate Name CA 90017 Purpose of Disbursement Its payment Core Candidate Name Disbursement For: Senate Disbursement Disbursement Receive Category Virges of Disbursement State: Disbursement For: Disbursement Disbursement For: Senate Disbursement CA 35044 Purpose of Disbursement CA 35044 Purpose of Disbursement CA 35044 Sucamento CA 35044 Purpose of Disbursement Category Socooc Office Sought: House Disbursement For: Other (specify) Office Sought: House Disbursement For: Disbursement Office Sought: House Disbursement For: Category Office Sought: House Disbursement For: Category Office Sought: <td>\backslash</td> <td></td> <td></td> <td>•••</td> <td></td>	\backslash			•••														
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Los Angeles CA 90017 Purpose of Disbursement 001 Candidate Name 001 Candidate Name 001 Category/ 506.83 Office Sought: President Disbursement For: President Other (specify) ▼ Date of Disbursement State: Disbursement Candidate Name CA State: District: Date of Disbursement City State President Disbursement For: Candidate Name CA Candidate Name CA State: District: Disbursement Consultant: State Public Policy Candidate Name CA Consultant: State Public Policy Candidate Name Category/ Office Sought: House Primpse: Disbursement For: Consultant: State Public Policy Candidate Name Category/ Office Sought: House Primary General Other (specify) State City State Purpose of Disbursement Category/ City State Disbursement Category/ Office Sought: House Primary General Other (specify) Amount of Each Disbursement this Period City State Disbursement Category/ Office Sought: House Primary General <td></td> <td>Mailing Address 333 S Hope St 8th Fl</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td colspan="11"></td>		Mailing Address 333 S Hope St 8th Fl																
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