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### **FEC** FORM 3Y

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

TORW 3X	For Other Than An	Authorized Con	mittee		Office Use Only
1. NAME OF	TYPE OR PRINT ▼	Example:	f typing, type	12FE4M5	555 555 51nj
COMMITTEE (in full)		over the li	nes.	12FE4M5	
THE AMERICAN CC	NGRESS OF OB-	GYNS PAC (O	B-GYN PAC)		
ADDRESS (number and street)	409 12TH STREET, S	<b>W</b>			
Check if different					
than previously reported. (ACC)	WASHINGTON			DC	20024
2. FEC IDENTIFICATION	NUMBER ▼	CITY A		STATE A	ZIP CODE ▲
C C00364158		3. IS THIS REPORT	NEW (N) OR	AN (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	➤ Jul 20 (M7)	Oct :	20 (M10) Jan 31 (YE)
Quarterly Report  July 15	(C) 12-Day		y (12P)	General	(12G) Runoff (12R)
Quarterly Report October 15	Report for the	he: Conve	ntion (12C)	Special (	12S)
Quarterly Report  January 31  Year-End Report	_	Election on	M / D D /	Y   Y   Y   Y	in the State of
July 31 Mid-Year Report (Non-elec Year Only) (MY)	(d) 30-Day POST-Electi		al (30G)	Runoff (3	0R) Special (30S)
Termination Repo	Report for the	he:	M / D D /	Y . Y . Y . Y	in the
	E	Election on			State of
5. Covering Period		014 thro	ugh 06	30	2014
I certify that I have examined	this Report and to the be	est of my knowledge	and belief it is tru	ue, correct and	complete.
Type or Print Name of Treasu	ırer STACIE MONROE				
Signature of Treasurer ST	TACIE MONROE	[Electr	onically Filed]	Date 07	/ D D / Y Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
NOTE: Submission of false, erro	oneous, or incomplete inform	mation may subject t	ie person signing t	his Report to th	ue penalties of 2 U.S.C. §437g.
Office					FEC FORM 3X
Use Only					Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

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

01 2014 06 30 2014 Report Covering the Period: 06 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 300966.48 January 1, 2014 (b) Cash on Hand at 360859.81 Beginning of Reporting Period..... 379415.90 54889.33 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 415749.14 680382.38 6(a) and 6(c) for Column B)..... 67441.73 332074.97 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 348307.41 348307.41 (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) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. (	Contributions (other than loans) From:	Total Tills Feriou	Outchau Tear to Bate
(	a) Individuals/Persons Other		
	Than Political Committees	44440.00	264092.07
	(i) Itemized (use Schedule A)	44416.33	264082.07
	(ii) Unitemized(iii) TOTAL (add	10473.00	115333.83
	Lines 11(a)(i) and (ii)	54889.33	379415.90
(	b) Political Party Committees	0.00	0.00
(	c) Other Political Committees (such as PACs)	0.00	0.00
(	d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		1
	Totals to Line 33, page 5)	54889.33	379415.90
2. T	ransfers From Affiliated/Other		
F	Party Committees	0.00	0.00
· ·	III Leave Descrived	0.00	0.00
5. <i>F</i>	III Loans Received		0.00
4. L	oan Repayments Received	0.00	0.00
5. C	Offsets To Operating Expenditures		
(	Refunds, Rebates, etc.)		1
(	Carry Totals to Line 37, page 5)	0.00	0.00
6. F	Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	
to	Federal Candidates and Other	<del> </del>	1
	Political Committees	0.00	0.00
	Other Federal Receipts		
	Dividends, Interest, etc.)	0.00	0.00
-	ransfers from Non-Federal and Levin Funds		
(	a) Non-Federal Account	<del> </del>	1
	(from Schedule H3)	0.00	0.00
,	b) Lovin Funda (funna Calestida 115)	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
9. T	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))▶	54889.33	379415.9
0. T	otal Federal Receipts		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period					
Operating Expenditures:      Allegated Enders!(Non Enders!)	Total Tills I cilou	Calendar Year-to-Date				
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
(ii) New Federal Olever	0.00	0.00				
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00				
Expenditures	841.73	8154.97				
(c) Total Operating Expenditures						
(add 21(a)(i), (a)(ii), and (b)) ▶	841.73	8154.97				
2. Transfers to Affiliated/Other Party	0.00	0.00				
Committees	0.00	0.00				
Federal Candidates/Committees and Other Political Committees	66500.00	318500.00				
Independent Expenditures	0.00	0.00				
(use Schedule E)	0.00	0.00				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
(acc corrodate 1)	7					
6. Loan Repayments Made	0.00	0.00				
7. Loans Made	0.00	0.00				
3. Refunds of Contributions To:						
(a) Individuals/Persons Other Than Political Committees	100.00	1420.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00	3.55				
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))▶	100.00	1420.00				
O. Other Disbursements	0.00	4000.00				
D. Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6)						
(i) Federal Share	0.00	0.00				
(°) III II O	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add						
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
_						
. Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	67441.73	332074.97				
. Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	67441.73	332074.97				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	54889.33	379415.90
4. Total Contribution Refunds (from Line 28(d))	100.00	1420.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54789.33	377995.90
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	841.73	8154.97
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	841.73	8154.97

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

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ı	(check only one)									
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ı		13		14		15		16	6	17

Full Name (Last, First, Middle Initial) MELODY R. ADLER		Date of Receipt
Mailing Address 815 BISHOPSGATE LAN	IE	06 24 2014
City	State Zip Code	Transaction ID : SA11AI.17013
VIRGINIA BEACH	VA 23452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	†
COMPLETE WOMEN'S CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) THOMAS L. ALDERSON		Date of Receipt
Mailing Address 3664 EDINBOROUGH D	RIVE	M = M / D = D / Y = Y = Y
City	State Zip Code	06 21 2014 Transaction ID : \$414 At 16073
ROCHESTER HILLS	MI 48306	Transaction ID : SA11AI.16973  Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each Flooript this I chief
federal political committee.	C	100.00
Name of Employer	Occupation	
MCLAREN WOMEN'S HEALTH	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)	·	
KARYL L. ANDOLINA		Date of Receipt
Mailing Address 10725 INTERNATIONAL	DRIVE	06 11 2014
City	State Zip Code	Transaction ID : SA11AI.16688
RANCHO CORDOVA	CA 95670	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
KAISER PERMANENTE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General		
Other (specify) ▼	250.00	
	,	

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial)  THOMAS F. ARNOLD		Date of Receipt
Mailing Address 30 WEST 7TH STREET		06 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.16774
DICKINSON	ND 58601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer	Occupation	
ST. JOSEPH'S WOMEN'S CLINIC	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1690.00	
Full Name (Last, First, Middle Initial)  RITA K. ARONSON		Date of Receipt
Mailing Address 2322 EAST KIMBERLY ROA		06 04 2014
City	State Zip Code IA 52807	Transaction ID : SA11AI.16546
DAVENPORT	0.000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
OB/GYN SPECIALISTS	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  TAMIKA C. AUGUSTE		Date of Receipt
Mailing Address 110 IRVING STREET, NW		06 18 2014
City	State Zip Code	Transaction ID : SA11AI.16803
WASHINGTON	DC 20010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
MEDSTAR HEALTH	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	·····	1325.00
TOTAL This Period (last page this line number	only)	

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

FOI	PAGE	8	OF	65				
(check only one)								
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	13		14		15	16	6	17

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	SS OF OB-GYNS PAC (OB-GYN PA	i.C)
Full Name (Last, First, Middle Initial)  A. DAVID A. BARAM  Mailing Address 2230 PRINCETON AVEN	UE	Date of Receipt
City ST. PAUL	State Zip Code MN 55105	06 05 2014  Transaction ID : SA11Al.16724  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	430.00
Name of Employer HEALTH PARTNERS Receipt For:	Occupation PHYSICIAN	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	
Full Name (Last, First, Middle Initial)  THOMAS E. BASCO  Mailing Address 4000 COLISEUM DRIVE		Date of Receipt
City HAMPTON	State Zip Code VA 23666	Transaction ID : SA11AI.17014  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	
Full Name (Last, First, Middle Initial) ANA C. BASSO		Date of Receipt
Mailing Address 807 JAMESTOWN CRES  City	State Zip Code	06 27 2014
NORFOLK	VA 23508	Transaction ID : SA11AI.16897  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional	)	930.00
TOTAL This Period (last page this line num	ber only)	

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

FOR LINE NUMBER:						PAGE	=	9	OF	65
(check only one)										
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  A. OWEN R. BELL  Mailing Address 17400 ASHLAND DRIVE		Date of Receipt
City	State Zip Code	06 27 2014 Transaction ID : SA11Al.16899
ANCHORAGE	AK 99516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
SELF-EMPLOYED Receipt For:	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  B. PETER J. BELLER		Date of Receipt
Mailing Address 490 MAIN STREET		06 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WETHERSFIELD	State Zip Code CT 06106	Transaction ID : SA11Al.16984  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer HARTFORD HOSPITAL	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	
Full Name (Last, First, Middle Initial)  C. SIOBHAN M. BERTOLINO		Date of Receipt
Mailing Address 844 KEMPSVILLE ROAD		06 24 2014
City NORFOLK	State Zip Code VA 23502	Transaction ID : SA11AI.17015  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
TIDEWATER PHYSICIANS FOR WOMEN	PHYSICIAN	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  A. MIBHALI M. BHALALA  Mailing Address 806 CAPE COD DRIVE		Date of Receipt
City	State Zip Code	06 16 2014 Transaction ID : SA11Al.16820
REDWOOD CITY	CA 94065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	215.00
Name of Employer	Occupation	
PERMANENTE MEDICAL GROUP	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00	
Full Name (Last, First, Middle Initial)  MAY H. BLANCHARD		Date of Receipt
Mailing Address 1316 BELT STREET		06 03 _ 2014 _
City	State Zip Code	Transaction ID : SA11Al.16722
BALTIMORE	MD 21230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer UNIVERSITY OF MARYLAND	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  C. MAY H. BLANCHARD		Date of Receipt
Mailing Address 1316 BELT STREET		06 25 2014
City BALTIMORE	State Zip Code MD 21230	Transaction ID : SA11AI.16999  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
UNIVERSITY OF MARYLAND	PHYSICIAN	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify)	475.00	
SUBTOTAL of Receipts This Page (optional)		565.00
TOTAL This Period (last page this line numb	per only)	

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

FOR LINE NUMBER:						PAGE	. 1	11	OF	65
	(che	ck only	or	ne)						
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  KELLEEN M. BOSCH  Mailing Address 2432 EAST TENNYSON PL	ACE	Date of Receipt
City	State Zip Code	06 06 2014 Transaction ID : SA11AI.16728
FRESNO	CA 93730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	215.00
Name of Employer CENTRAL VALLEY WOMEN'S HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	
Full Name (Last, First, Middle Initial)  LEONARD A. BRABSON  Mailing Address 939 EAST EMERALD AVEN	UE	Date of Receipt
City KNOXVILLE	State Zip Code TN 37917	06 12 2014  Transaction ID : SA11AI.16775  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer TENNOVA HEALTHCARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial)  C. KENT R. BRADLEY		Date of Receipt
Mailing Address 9866 NORTH GROVE		06 26 2014 _
City VALLEY CENTER	State Zip Code KS 67147	Transaction ID : SA11AI.16985  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer ASSOCIATES IN WOMEN'S HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1090.00
TOTAL This Period (last page this line number	r only)	

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

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(check only one)										
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Full Name (Last, First, Middle Initial) KEITH R. BRILL Mailing Address 5502 SOUTH FORT APACH	HE ROAD	Date of Receipt
City	State Zip Code	06 16 2014
LAS VEGAS	State Zip Code NV 89148	Transaction ID : SA11AI.16794
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 65.00
Name of Employer	Occupation	_
WOMEN'S SPECIALTY CARE	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) CYNTHIA A. BRINCAT	1	Date of Receipt
Mailing Address 308 NORTH KENILWORTH		M = M / D = D / Y = Y = Y
City	State Zip Code	06 03 2014
OAK PARK	IL 60302	Transaction ID : SA11AI.16555  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer LOYOLA UNIVERSITY	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1890.00	
Full Name (Last, First, Middle Initial)		
MELISSA J. BUCHBERG		Date of Receipt
Mailing Address 728 SURFSIDE AVENUE  City	State Zip Code	06 27 2014
VIRGINIA BEACH	VA 23451	Transaction ID : SA11AI.16900  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
COMPLETE WOMEN'S CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	

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

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(check only one)											
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) A. RONALD T. BURKMAN  Mailing Address 289 ARDSLEY ROAD		Date of Receipt
City LONGMEADOW	State Zip Code MA 01106	06 16 2014  Transaction ID : SA11AI.16627  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer BAYSTATE HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial)  RONALD T. BURKMAN  Mailing Address 289 ARDSLEY ROAD		Date of Receipt
City LONGMEADOW	State Zip Code MA 01106	06 27 2014  Transaction ID : SA11AI.17067  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer BAYSTATE HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1075.00	
Full Name (Last, First, Middle Initial)  . MARY A. BURNS		Date of Receipt
Mailing Address 2635 LANDVIEW CIRCLE	7. 0. 1	06 24 2014
City VIRGINIA BEACH	State Zip Code VA 23454	Transaction ID : SA11AI.17016  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1075.00
TOTAL This Period (last page this line number	only)	

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial) A. STEPHEN H. BUSH		Date of Receipt
Mailing Address 4400 KANAWHA AVENUE		06 23 2014
City CHARLESTON	State Zip Code WV 25304	Transaction ID : SA11AI.16943
FEC ID number of contributing federal political committee.	C 25304	Amount of Each Receipt this Period
Name of Employer WEST VIRGINIA UNIVERSITY Receipt For:	Occupation PHYSICIAN	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
Full Name (Last, First, Middle Initial)  BEN H. CHEEK  Mailing Address 4000 SUMMIT REPORTS		Date of Receipt
Mailing Address 1626 SUMMIT DRIVE  City	State Zip Code	06 19 2014  Transaction ID : SA11AI.16966
COLUMBUS	GA 31906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer OB/GYN ASSOCIATES OF COLUMBUS	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1916.65	
Full Name (Last, First, Middle Initial)  MICHAEL G. CHEEK		Date of Receipt
Mailing Address 2930 WEST DEVIL'S LAKE R	ROAD	06 02 2014
City LINCOLN CITY	State Zip Code OR 97367	Transaction ID : SA11AI.16562  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
SAMARITAN HEALTH Receipt For:	PHYSICIAN	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	508.33
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial)  J. FLOYD CLINGENPEEL  Mailing Address 205 HUNTERPALE POAR		Date of Receipt
Mailing Address 305 HUNTERDALE ROAD		06 27 Y Y Y Y Y Y
City FRANKLIN	State Zip Code VA 23851	Transaction ID : SA11AI.16902  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer OB/GYN PHYSICIANS	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  JEANNE A. CONRY  Mailing Address 8204 CANTERSHIRE WAY		Date of Receipt
City GRANITE BAY	State Zip Code CA 95746	06 03 2014  Transaction ID : SA11AI.16556  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer PERMANENTE MEDICAL GROUP	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3550.00	
Full Name (Last, First, Middle Initial)  CHERI L. COYLE		Date of Receipt
Mailing Address 106 FLAG CREEK		06 24 2014
City YORKTOWN	State Zip Code VA 23693	Transaction ID : SA11AI.17017  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		600.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial)  A. MONIQUE S. CRABB		Date of Receipt
Mailing Address 2625 BOMBAY LANDING		06 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.16904
VIRGINIA BEACH	VA 23456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
MID-ATLANTIC WOMEN'S CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  JON L. CROCKFORD		Date of Receipt
Mailing Address 2951 BALTIC AVENUE		06 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.16905
VIRGINIA BEACH	VA 23451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
THE GROUP FOR WOMEN	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  STELLA DANTAS		Date of Receipt
Mailing Address 6906 SOUTHWEST WINDEN		06 26 2014
City PORTLAND	State Zip Code OR 97225	Transaction ID : SA11AI.17064  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
NORTHWEST PERMANENTE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	800.00	
SUBTOTAL of Receipts This Page (optional)		800.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) THOMAS S. DARDARIAN  Mailing Address 108 CETON COURT		Date of Receipt
City BROOMAIL	State Zip Code PA 19008	06 16 2014  Transaction ID : SA11AI.16795  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer  MAIN LINE WOMEN'S HEALTH CARE Receipt For:	Occupation PHYSICIAN	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  750.00	
Full Name (Last, First, Middle Initial)  ROBERT H. DEBBS  Mailing Address 2 SASSAFRAS COURT		Date of Receipt
City VOORHEES	State Zip Code NJ 08043	Transaction ID : SA11AI.16667  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	209.00
Name of Employer UNIVERSITY OF PENNSYLVANIA	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1136.00	
Full Name (Last, First, Middle Initial)  MARK S. DEFRANCESCO	•	Date of Receipt
Mailing Address 35 TERRELL FARM PLAC		06 03 2014
City CHESHIRE	State Zip Code CT 06410	Transaction ID : SA11AI.16557  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer WOMEN'S HEALTH CONNECTICUT	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	
SUBTOTAL of Receipts This Page (optional).		534.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  NATHANIEL DENICOLA  Mailing Address 2121 PINE STREET		Date of Receipt
City	State Zip Code	06 23 2014 Transaction ID : SA11Al.16981
PHILADELPHIA  FEC ID number of contributing federal political committee.	PA 19103	Amount of Each Receipt this Period 209.00
Name of Employer UNIVERSITY OF PENNSYLVANIA	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1254.00	
Full Name (Last, First, Middle Initial)  MARYBETH R. DIXON  Mailing Address 510 CARLISLE WAY		Date of Receipt
City NORFOLK	State Zip Code VA 23505	06 27 2014  Transaction ID : SA11AI.16906  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  DARLA EISENHOWER	•	Date of Receipt
Mailing Address 1500 SOUTH 48TH STRE		06 19 2014
City LINCOLN	State Zip Code NE 68506	Transaction ID : SA11AI.16967  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer  GYNECOLOGY & FERTILITY, PC	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	)	959.00
TOTAL This Period (last page this line num	ber only)	

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	ng the name and address of any political committee	
THE AMERICAN CONGRE	SS OF OB-GYNS PAC (OB-GYN PAC)	AC)
Full Name (Last, First, Middle Initial)  DENISE M. ELSER		Date of Receipt
Mailing Address 5716 WEST 95TH STRI		06 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code IL 60453	Transaction ID : SA11AI.16725
OAK LAWN	IL 60453	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
WOMEN'S HEALTH INSTITUTE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial)  STEVEN FARBER		Date of Receipt
Mailing Address 213 MCCLANAHAN STI	M = M / D = D / Y = Y = Y = Y	
City	State Zip Code	06 22 2014 Transaction ID : SA11AI.16978
ROANOKE	VA 24014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
CARILION CLINIC	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  BENIGNO FEDERICI		Date of Receipt
Mailing Address 5026 RIVERFRONT DR	RIVE	M = M / D = D / Y = Y = Y = Y = Y = 06 27 2014
City	State Zip Code	Transaction ID : SA11AI.16907
SUFFOLK	VA 23434	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	251.00
Name of Employer	Occupation	
SPECIALISTS FOR WOMEN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	251.00	
SUBTOTAL of Receipts This Page (option	nal)	801.00
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TOTAL This Period (last page this line nu	mber only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  DOUGLAS K. FENTON  Mailing Address 2921 MANAGUA PLACE		Date of Receipt
City CARLSBAD  FEC ID number of contributing federal political committee.	State Zip Code CA 92009	06 12 2014  Transaction ID : SA11AI.16778  Amount of Each Receipt this Period  209.00
Name of Employer  SCRIPPS COASTAL MEDICAL GROUP  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1254.00	
Full Name (Last, First, Middle Initial)  MARTHA T. FERNANDEZ  Mailing Address 1308 LITCHFIELD COURT		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City VIRGINIA BEACH FEC ID number of contributing	State Zip Code VA 23452	Transaction ID : SA11AI.16908  Amount of Each Receipt this Period  250.00
Receipt For:  Primary  Other (specify)   General	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  JOSEPH FINKELSTEIN  Mailing Address 936 5TH AVENUE		Date of Receipt  06 18 2014
City NEW YORK  FEC ID number of contributing federal political committee.	State Zip Code NY 10021	Transaction ID : SA11AI.16804  Amount of Each Receipt this Period  1000.00
Name of Employer  SELF-EMPLOYED  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1000.00	
SUBTOTAL of Receipts This Page (optional)		1459.00
TOTAL This Period (last page this line numbe	r only)	

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	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) ROBERT F. FLORA		Date of Receipt
Mailing Address 22668 BECKENHAM COUR	Т	06 10 2014
City	State Zip Code	Transaction ID : SA11AI.16668
NOVI	MI 48374	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
ST. JOHN PROVIDENCE HEALTH	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
Full Name (Last, First, Middle Initial) ARLENE J. FONTANARES		Date of Receipt
Mailing Address 1013 SAW PEN POINT TRA	IL	M = M / D = D / Y = Y = Y
City	State Zip Code	06 27 2014
VIRGINIA BEACH	VA 23455	Transaction ID : SA11AI.16909  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer TIDEWATER PHYSICIANS FOR WOMEN	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)		
DAVID A. FORSTEIN		Date of Receipt
Mailing Address 890 WEST FARIS ROAD  City	State Zip Code	06 21 2014
GREENVILLE	SC 29605	Transaction ID : SA11AI.16975  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
GREENVILLE HEALTH SYSTEM	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	300.00	
		600.00

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or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JAMES H. GADDY Mailing Address 4502 OLD PASS ROAD		Date of Receipt
City	State Zip Code	06 12 2014 Transaction ID : SA11AI.16779
GULFPORT	MS 39501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
GULFPORT OB/GYN	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) . ROBERT H. GAITHER	'	Date of Receipt
Mailing Address 602 EAST STREET		M = M / D = D / Y = Y = Y
City	State Zip Code	06 10 2014
ALBEMARLE	NC 28001	Transaction ID : SA11AI.16669  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)	<u>'</u>	5. (5
CANDICE GEARY		Date of Receipt
Mailing Address 635 HIDDEN FALLS LAI	NE .	06 27 2014
City	State Zip Code	Transaction ID : SA11AI.16910
CHESAPEAKE	VA 23320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
VIRGINIA CENTER FOR WOMEN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (options	al)	1000.00
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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  JENNIFER GEORGE WARD  Mailing Address 1029 BOBOLINK DRIVE		Date of Receipt
City VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code VA 23451  C Occupation	06 27 2014  Transaction ID : SA11AI.16912  Amount of Each Receipt this Period  250.00
COMPLETE WOMEN'S CARE  Receipt For: Primary General Other (specify)	PHYSICIAN  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  3. JAMES N. GILHAM  Mailing Address 715 SOUTH 3RD STREET		Date of Receipt  06 02 2014
City  MONTROSE  FEC ID number of contributing federal political committee.	State Zip Code CO 81401	Transaction ID : SA11AI.16565  Amount of Each Receipt this Period  250.00
Name of Employer ALPINE OB/GYN  Receipt For: Primary General	Occupation PHYSICIAN Aggregate Year-to-Date ▼	
Other (specify)   Full Name (Last, First, Middle Initial)	250.00	
Mailing Address 4000 COLISEUM DRIVE  City	State Zip Code	Date of Receipt  06 24 2014  Transaction ID : SA11AI.17019
HAMPTON  FEC ID number of contributing federal political committee.	VA 23666	Amount of Each Receipt this Period 250.00
Name of Employer  MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General  Other (specify)	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional).	<b></b>	750.00
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	g the name and address of any political committee	
	SS OF OB-GYNS PAC (OB-GYN P	AC)
Full Name (Last, First, Middle Initial)  ILENE B. GOLDSTEIN		Date of Receipt
Mailing Address 921 ATLANTIC AVENUE		06 27 2014
City VIRGINIA BEACH	State Zip Code VA 23451	Transaction ID : SA11AI.16914
FEC ID number of contributing federal political committee.	C 23431	Amount of Each Receipt this Period  250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  ELIZABETH B. GOLPIRA		Date of Receipt
Mailing Address 1702 CLONCURRY ROA	D	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NORFOLK	State Zip Code VA 23505	06 27 2014  Transaction ID : SA11AI.16915  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  PETER GREENSPAN		Date of Receipt
Mailing Address 3601 NORTHWEST WIN	DING WOODS DRIVE	06 13 2014
City LEE'S SUMMIT	State Zip Code MD 64064	Transaction ID : SA11AI.17049  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
UNIVERSITY PHYSICIANS	PHYSICIAN	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	550.00	
SUBTOTAL of Receipts This Page (optional	l)	750.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  LAURIE C. GREGG  Mailing Address 1846 BOCKWOOD DRIVE		Date of Receipt
Mailing Address 1846 ROCKWOOD DRIVE		06 15 2014
City SACRAMENTO	State Zip Code CA 95864	Transaction ID : SA11Al.16819
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  85.00
Name of Employer  SELF-EMPLOYED  Receipt For:  Primary  General	Occupation PHYSICIAN  Aggregate Year-to-Date ▼	
Other (specify) ▼	2585.00	
Full Name (Last, First, Middle Initial)  CECIL D. GROVES  Mailing Address 109 HARBOR WATCH DRIV	/E	Date of Receipt  06 24 _ 2014
City CHESAPEAKE	State Zip Code VA 23320	Transaction ID : SA11AI.17020  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer THE GROUP FOR WOMEN	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  NEIL A. HAMILL		Date of Receipt
Mailing Address 3882 SOUTH 177TH AVEN	JE	06 09 2014 _
City OMAHA	State Zip Code NE 68130	Transaction ID : SA11AI.16653  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer  METHODIST HOSPITAL	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	·····	435.00
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THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC  Full Name (Last, First, Middle Initial)  LISBET M. HANSON  Mailing Address 1501 MCCULLOUGH LANE  City State Zip Code  VIRGINIA BEACH VA 23454  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Receipt For:  Aggregate Year-to-Date	Date of Receipt  06 24 2014  Transaction ID: SA11AI.17021  Amount of Each Receipt this Period  250.00
Primary General Other (specify) ▼ 250.00	
Full Name (Last, First, Middle Initial)  DENISE L. HARRIS  Mailing Address 424 PEACE HAVEN DRIVE  City State Zip Code NORFOLK VA 23502  FEC ID number of contributing federal political committee.  Name of Employer THE GROUP FOR WOMEN  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06 27 2014  Transaction ID : SA11AI.16916  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  RUTH E. HASKINS  Mailing Address 3444 SMOKEY MOUNT CIRCLE  City State Zip Code ELDORADO HILLS CA 95762  FEC ID number of contributing federal political committee.  Name of Employer Occupation SELF-EMPLOYED PHYSICIAN  Receipt For: Aggregate Year-to-Date  Other (specify)  215.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)	715.00

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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle Initial)  CYNTHIA R. HAYES  Mailing Address 2427 FM IS AVENUE		Date of Receipt
Mailing Address 2127 ELLIS AVENUE	7: 0.1	06 29 2014
City BOISE	State Zip Code ID 83702	Transaction ID : SA11AI.17069
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  300.00
Name of Employer ST. LUKE'S REGIONAL MEDICAL	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  RICHARD W. HENDERSON		Date of Receipt
Mailing Address 1709 CLEAVER LANE		06 10 _2014 _
City WILMINGTON	State Zip Code DE 19803	Transaction ID : SA11AI.16670  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	625.00
Name of Employer ST. FRANCIS HOSPITAL	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1290.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2810 LILLINGTON DRIVE		06 09 _2014 _
City SUMTER	State Zip Code SC 29150	Transaction ID : SA11AI.16732  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
TUOMEY HEALTHCARE	PHYSICIAN	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	950.00	
SUBTOTAL of Receipts This Page (optional).	·····	1225.00
TOTAL This Period (last page this line numb	er only)	

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

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  A. ROBERT M. HILL  Mailing Address 10101 PAINFOW POAD		Date of Receipt
Mailing Address 10101 RAINBOW ROAD  City	06 27 2014 Transaction ID : SA11Al.16917	
CARROLLTON	VA 23314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
HAMPTON ROADS OB/GYN	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  LA FLOYD H. HOBBS		Date of Receipt
Mailing Address P.O. BOX 280		M M / D D / Y Y Y Y Y
City	State Zip Code	06 09 2014 Transaction ID : SA11AI.16654
LANDRUM	SC 29356	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  NAVED A. JAFRI		Date of Receipt
Mailing Address 4000 COLISEUM DRIVE		06 24 2014
City HAMPTON	State Zip Code VA 23666	Transaction ID : SA11AI.17022  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
OB/GYN ASSOCIATES OF HAMPTON	PHYSICIAN	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional).	•	750.00
TOTAL This Period (last page this line number	er only)	

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	g the name and address of any political committee	
	SS OF OB-GYNS PAC (OB-GYN P	AC)
Full Name (Last, First, Middle Initial)  OBAID H. JAFRI		Date of Receipt
Mailing Address 4000 COLISEUM DRIVE		06 24 2014
City HAMPTON	State Zip Code VA 23666	Transaction ID : SA11AI.17023
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  250.00
Name of Employer OB/GYN ASSOCIATES OF HAMPTON	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  MARIE JOHANTGEN		Date of Receipt
Mailing Address 3115 31ST COURT		M M / D D / Y Y Y Y Y
City OLYMPIA	State Zip Code WA 98501	06 14 2014  Transaction ID : SA11AI.16818  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	215.00
Name of Employer GROUP HEALTH COOPERATIVE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 27 OXFORD BOULEVAR		06 27 2014
City PLEASANT RIDGE	State Zip Code MI 48069	Transaction ID : SA11AI.16918  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	_
WOMEN FIRST OB/GYN CENTER Receipt For:	PHYSICIAN  Aggregate Veer to Date	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)	965.00
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TOTAL This Period (last page this line nun	nber only) 🕨	

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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.					
/	SS OF OB-GYNS PAC (OB-GYN P	AC)					
Full Name (Last, First, Middle Initial)  PETER J. KEMP		Date of Receipt					
Mailing Address 925 OXFORD DRIVE							
City	State Zip Code	Transaction ID : SA11AI.17024					
VIRGINIA BEACH	VA 23452	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation						
MID-ATLANTIC WOMEN'S CARE	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General							
Other (specify)	250.00						
Full Name (Last, First, Middle Initial)  JIMMY P. KHANDALAVALA		Date of Receipt					
Mailing Address 2721 SOUTH 100TH ST	M = M / D = D / Y = Y = Y = Y						
City	State Zip Code	06					
OMAHA	NE 68124	Amount of Each Receipt this Period					
FEC ID number of contributing		T					
federal political committee.	C	500.00					
Name of Employer	Occupation	_					
ALEGENT CREIGHTON CLINIC	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	, 1540.00						
Full Name (Last, First, Middle Initial)  RAEGAN N. KOTSKO		Date of Receipt					
Mailing Address 1608 BOHNHOFF DRIV	/E	06 24 2014					
City	State Zip Code	Transaction ID : SA11AI.17026					
VIRGINIA BEACH	VA 23454	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	+					
VIRGINIA BEACH OB/GYN	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General							
Other (specify) ▼	250.00						
SUBTOTAL of Receipts This Page (option	al)	1000.00					
TOTAL This Period (last page this line nu	mber only)						

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee	to solicit contributions from such committee.
/	S OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle Initial)  STEPHEN A. KULL		Date of Receipt
Mailing Address 7 PAGE HILL ROAD	06 18 2014	
City	State Zip Code	Transaction ID : SA11AI.16808
BERLIN	NH 03570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
ANDROSCOGGIN VALLEY HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  3. FENNEY KWAN		Date of Receipt
Mailing Address 4545 COMMERCE STREI	ET	06 24 _2014 _
City	State Zip Code	Transaction ID : SA11AI.17027
VIRGINIA BEACH	VA 23462	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
MID-ATLANTIC WOMEN'S CARE	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  ZENETTE M. LEAO		Date of Receipt
Mailing Address 1608 BEARDSLY COURT	Г 	06 24 2014
City CHESAPEAKE	State Zip Code VA 23322	Transaction ID : SA11AI.17028  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
GYNECOLOGY SPECIALISTS	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	)	1000.00
TOTAL This Pariod (last page this line num)	her only)	
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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  JANICE LEVIN  Mailing Address 2100 CHAMBERLING KEY	,	Date of Receipt
City VIRGINIA BEACH	State Zip Code VA 23454	06 27 2014 Transaction ID : SA11AI.16919
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  250.00
Name of Employer  COMPLETE WOMEN'S CARE  Receipt For:	Occupation PHYSICIAN	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  PAUL I. LINDNER  Mailing Address 1100 KENNEDY TRAIL		Date of Receipt
City CHESAPEAKE	State Zip Code VA 23322	7 Transaction ID : SA11AI.17029  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer TOTAL CARE FOR WOMEN Receipt For:	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  LINDA M. LONG		Date of Receipt
Mailing Address 3072 FALMOUTH DRIVE	Ctata 7in Cada	06 27 2014
City CHESAPEAKE	State Zip Code VA 23321	Transaction ID : SA11AI.16920  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer  GYNECOLOGY SPECIALISTS  Descript Form	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAG	C)				
Full Name (Last, First, Middle Initial)  JAMES A. MACER  Mailing Address 10 CONGRESS STREET		Date of Receipt				
City PASADENA	State Zip Code CA 91105	06 10 2014  Transaction ID : SA11AI.16733  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	750.00				
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00					
Full Name (Last, First, Middle Initial)  PETER C. MANNING  Mailing Address 10 CALY HOLLOW ROAD		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 KENNEBUNK	State Zip Code ME 04043	Transaction ID : SA11AI.16657  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	250.00				
Name of Employer SOUTHERN MAINE HEALTH CARE	Occupation PHYSICIAN					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)  . WILLIAM L. MARTIN		Date of Receipt				
Mailing Address 452 LINKHORN DRIVE	7.0.1	06 24 2014				
City VIRGINIA BEACH	State Zip Code VA 23451	Transaction ID : SA11AI.17030  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer MID-ATLANTIC WOMEN'S CARE	Occupation PHYSICIAN					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1250.00				
TOTAL This Period (last page this line number	only)					

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  STEWART W. MASON  Mailing Address 1374 EAST ALLUVIAL AVE	NUE	Date of Receipt
City FRESNO	State Zip Code CA 93720	06 04 2014  Transaction ID: SA11AI.16723  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	215.00
CENTRAL VALLEY WOMEN'S HEALTH  Receipt For:  Primary General Other (specify)	PHYSICIAN  Aggregate Year-to-Date ▼  215.00	
Full Name (Last, First, Middle Initial)  LINDA MATHISON-EZIEME  Mailing Address 816 FOREST GLADE DRIV	E	Date of Receipt  06 27 2014
City CHESAPEAKE	State Zip Code VI 23322	Transaction ID : SA11AI.16921  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer VIRGINIA CENTER FOR WOMEN	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  . RICHARD A. MCCAULEY	•	Date of Receipt
Mailing Address 1605 KINGSLEY AVENUE		06 16 2014
City ORANGE PARK	State Zip Code FL 32073	Transaction ID : SA11AI.16634  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer  NORTH FLORIDA OB/GYN  Receipt For:	Occupation PHYSICIAN	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).		1465.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  M. CATHLEEN MCCOY  Mailing Address 1840 AMHERST STREET	Date of Receipt	
City WINCHESTER	State Zip Code VA 22601	06 10 2014  Transaction ID : SA11AI.16672  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer SHENANDOAH MATERNAL FETAL	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  MICHAEL J. MCCOY  Mailing Address 5020 FERRES LANE		Date of Receipt
City BURLINGTON	State Zip Code IA 52601	06 05 2014  Transaction ID : SA11AI.16726  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	515.00
Name of Employer GREAT RIVER WOMEN'S HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1515.00	
Full Name (Last, First, Middle Initial)  C. MARYANNE MCDONNELL		Date of Receipt
Mailing Address 19 MAPLE VALLEY ROAD		06 28 2014
City BOSTON	State Zip Code CT 06043	Transaction ID : SA11AI.17068  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer OB/GYN GROUP	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (optional)		940.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	.C)				
Full Name (Last, First, Middle Initial)  JOHN P. MCHUGH		Date of Receipt				
Mailing Address P.O. BOX 157		06 24 2014				
City	State Zip Code CA 92625	Transaction ID : SA11AI.16946				
CORONA DEL MAR	CA 92025	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	215.00				
Name of Employer	Occupation					
OB HOSPITALIST GROUP	PHYSICIAN	-				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 515.00					
Full Name (Last, First, Middle Initial)  JEANNINE M. MCMAHON		Date of Receipt				
Mailing Address 11436 LAKEWOOD STREE	ĒT	06 21 _2014 _				
City	State Zip Code	Transaction ID : SA11AI.16976				
CROWN POINT	IN 46207	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	125.00				
Name of Employer	Occupation	-				
CROWN POINT OB/GYN	PHYSICIAN					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  375.00					
Full Name (Last, First, Middle Initial)  C. AASTA MEHTA		Date of Receipt				
Mailing Address 201 NORTH 8TH STREET		06 10 2014				
City PHILADELPHIA	State Zip Code PA 19106	Transaction ID : SA11AI.16676				
	PA 19106	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	209.00				
Name of Employer	Name of Employer Occupation					
DREXEL UNIVERSITY	PHYSICIAN					
Receipt For:  Primary  General	Aggregate Year-to-Date ▼					
Other (specify)	1026.00					
SUBTOTAL of Receipts This Page (optional).		549.00				
TOTAL This Period (last page this line numb	er only)					

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	ng the name and address of any political committee	
	SS OF OB-GYNS PAC (OB-GYN P	AC)
Full Name (Last, First, Middle Initial) PATRICIA M. MILLER  Mailing Address OF MILLAGE PROCKLA	AND	Date of Receipt
Mailing Address 25 VILLAGE BROOK LA		06 06 7 2014
City DERRY	State Zip Code NH 03038	Transaction ID : SA11AI.16730
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)  OWEN C. MONTGOMERY		Date of Receipt
Mailing Address 450 CHAPEL HEIGHTS	ROAD	06 05 2014 _
City	State Zip Code	Transaction ID : SA11AI.16727
SEWELL	NJ 08080	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer DREXEL UNIVERSITY	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1370.00	
Full Name (Last, First, Middle Initial)  C. OWEN C. MONTGOMERY		Date of Receipt
Mailing Address 450 CHAPEL HEIGHTS	ROAD	06 06 2014
City SEWELL	State Zip Code NJ 08080	Transaction ID : SA11AI.16650  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	209.00
Name of Employer	Occupation	_
DREXEL UNIVERSITY	PHYSICIAN	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1579.00	
SUBTOTAL of Receipts This Page (option	al)	709.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  ALETHIA E. MORGAN  Mailing Address 2075 COUTH PIPOLI CIPE	<del>-</del>	Date of Receipt
Mailing Address 3075 SOUTH BIRCH STREE	I	06 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City DENVER	State Zip Code CO 80222	Transaction ID : SA11AI.16785
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 625.00
Name of Employer  COPIC  Receipt For:	Occupation  PHYSICIAN  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
Full Name (Last, First, Middle Initial)  FRANKLIN G. MORGAN  Mailing Address 1444 CLONCURRY ROAD		Date of Receipt  06 27 2014
City NORFOLK	State Zip Code VA 23505	Transaction ID : SA11AI.16922  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer TIDEWATER PHYSICIANS FOR WOMEN	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  . IVAN K. MUHLENDORF		Date of Receipt
Mailing Address 800 SOUTH SPIGEL DRIVE		06 27 2014 _
City VIRGINIA BEACH	State Zip Code VA 23454	Transaction ID : SA11AI.16925  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MID-ATLANTIC IMAGING CENTERS	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	·····	1125.00
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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  ANTOINE A. NAIM  Mailing Address 90 FIDDLER RIDGE ROAL	n	Date of Receipt
City	State Zip Code	06 16 2014 Transaction ID : SA11Al.16635
WESTON	WV 26542	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
STONEWALL JACKSON HOSPITAL Receipt For:	PHYSICIAN	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  LYDIA D. NIGHTINGALE		Date of Receipt
Mailing Address 9501 PROSPER DRIVE		06 13 2014
City OKLAHOMA CITY	State Zip Code OK 73151	Transaction ID : SA11AI.17055
OKLAHOMA CITY  FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	500.00
Name of Employer	Occupation	
UNIVERSITY OF OKLAHOMA  Receipt For:	PHYSICIAN	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  C. DANIEL L. NOFFSINGER	·	Date of Receipt
Mailing Address 627 LYNN SHORES ROAL	)	06 24 2014 _
City VIRGINIA BEACH	State Zip Code VA 23452	Transaction ID : SA11AI.17031
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  250.00
Name of Employer	Occupation	
THE GROUP FOR WOMEN	PHYSICIAN	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  TIMOTHY A. O'CONNELL		Date of Receipt
Mailing Address 68 COLUMBIA DRIVE		06 24 2014
City NEWPORT NEWS	State Zip Code VA 23608	Transaction ID : SA11AI.17032  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer  MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General  Other (specify) ▼	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  FRANCINE A. OLDS  Mailing Address 1080 FIRST COLONIAL RO	AD State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
VIRGINIA BEACH	VA 23454	Transaction ID : SA11AI.17033  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer WOMEN'S HEALTH CHOICE	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  TODD A. PANKRATZ		Date of Receipt
Mailing Address 2115 NORTH KANSAS AVE	NUE	06 26 2014 _
City HASTINGS	State Zip Code NE 68901	Transaction ID : SA11AI.17065  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	430.00
Name of Employer  OBSTETRICIANS & GYNECOLOGISTS  Receipt For:	Occupation PHYSICIAN	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1630.00	
SUBTOTAL of Receipts This Page (optional)		930.00
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  MOHAMAD PARVA  Mailing Address 880 BISHOPS GATE LANE		Date of Receipt
City VIRGINIA BEACH	State Zip Code VA 23452	06 27 2014  Transaction ID : SA11AI.16927  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer THE GROUP FOR WOMEN	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  AMIT I. PATEL  Mailing Address 3822 BOWSER AVENUE		Date of Receipt  06 03 2014
City DALLAS	State Zip Code TX 75219	Transaction ID : SA11AI.16559  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer MODERN GYNECOLOGY	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  JAMES J. PEREZ		Date of Receipt
Mailing Address 193 LAKE BLUFF DRIVE	7. 0.	06 21 2014
City COLUMBUS	State Zip Code OH 43235	Transaction ID : SA11AI.16977  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer DOCTORS HOSPITAL OHIO HEALTH	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	470.00
TOTAL This Period (last page this line numbe	r only)	

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	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  JOANNE L. PERRON		Date of Receipt
Mailing Address 3017 SLOAT ROAD		06 11 2014
City	State Zip Code	Transaction ID : SA11AI.16816
PEBBLE BEACH	CA 93953	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. 199. 394.0 Total to Bato ¥	
Other (specify) ▼	345.00	
Full Name (Last, First, Middle Initial) JOHN C. PFEFFER		Date of Receipt
Mailing Address 1400 FLORIDA AVENUE		06 20 _2014 _
City	State Zip Code	Transaction ID : SA11AI.16971
MODESTO	CA 95350	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
MODESTO ARTS MEDICAL GROUP	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		Data of Bassist
HOLLY S. PURITZ		Date of Receipt
Mailing Address 7940 NORTH SHORE ROAD		06 09 7 2014
NORFOLK	State Zip Code VA 23505	Transaction ID : SA11AI.16661  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	245.00
Name of Employer	Occupation	
THE GROUP FOR WOMEN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggiogate four to Bate ₹	
Other (specify) ▼	1035.00	
		645.00

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or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.					
/	SS OF OB-GYNS PAC (OB-GYN P	AC)					
Full Name (Last, First, Middle Initial) PAMELA G. PYLE		Date of Receipt					
Mailing Address 1304 KINGFISHER COL	URT	06 27 2014					
City	City State Zip Code						
VIRGINIA BEACH	VA 23541	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation						
VIRGINIA BEACH OB/GYN	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General  Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial)  GEORGE RECTOR	1	Date of Receipt					
Mailing Address 608 FORDSMERE ROAI	0	M = M / D = D / Y = Y = Y					
City	State Zip Code	06 24 2014 Transaction ID : \$444 A147035					
CHESAPEAKE	VA 23322	Transaction ID : SA11AI.17035  Amount of Each Receipt this Period					
FEC ID number of contributing		, another of East Hoodpt this i criot					
federal political committee.	C	250.00					
Name of Employer	Occupation						
MID-ATLANTIC WOMEN'S CARE	PHYSICIAN						
Receipt For:  Primary  General	Aggregate Year-to-Date ▼						
Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial)		Date of Receipt					
Mailing Address 16995 PRINCETON RO	AD	06 04 2014					
City	State Zip Code	Transaction ID : SA11AI.16550					
ADAMS	NE 68301	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	209.00					
Name of Employer	Occupation						
UNIVERSITY OF NEBRASKA	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General  Other (specify) ▼	877.00						
SUBTOTAL of Receipts This Page (options	al)	709.00					
TOTAL This Period (last page this line nur	nber only)						

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	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) NATALIE N. RODGERS		Date of Receipt
Mailing Address 3504 BRANNON DRIVE		06 27 2014
City	State Zip Code	Transaction ID : SA11AI.16930
VIRGINIA BEACH	VA 23456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
VIRGINIA BEACH OB/GYN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) JOSEPH A. ROJAS		Date of Receipt
Mailing Address 9120 WEST POST ROAD		06 04 _2014 _
City	State Zip Code	06 04 2014 Transaction ID : SA11AI.16551
LAS VEGAS	NV 89148	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	
MEADOWS WOMEN'S CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		Data of Bassini
VICKI SELLER	TUE A O T	Date of Receipt
Mailing Address 633 JASON STREET NOR	I HEAST	06 25 _ 2014 _
City	State Zip Code	Transaction ID : SA11AI.17010
SALEM	OR 97301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
SELF-EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	200.00	
Other (specify)	300.00	

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  SHARON L. SHEFFIELD  Mailing Address P.O. BOX 1066		Date of Receipt
City FRANKLIN	State Zip Code VA 23851	06 27 2014  Transaction ID : SA11AI.16931  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	250.00
OB/GYN PHYSICIANS Receipt For:	PHYSICIAN  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  SARAH SHEPHERD  Mailing Address 2532 EAST 26TH STREE	Γ	Date of Receipt  06 13 2014
City TULSA	State Zip Code OK 74114	Transaction ID : SA11AI.17059  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer TULSA OB/GYN Receipt For:	Occupation PHYSICIAN	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  290.00	
Full Name (Last, First, Middle Initial)  SUSAN M. SHERIDAN		Date of Receipt
Mailing Address 150 NORTH MELROSE  City	State Zip Code	06 03 2014 Transaction ID : SA11Al.16560
CASPER	WY 82601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer CASPER OB/GYN ASSOCIATES	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	1500.00
TOTAL This Period (last page this line number	per only)	

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or for commercial purposes, other	r than using the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In F THE AMERICAN CO	ull) DNGRESS OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle VIRGINIA A. SIEGFRIEI  Mailing Address 518 GARDEN	)	Date of Receipt
City SANTA BARBARA FEC ID number of contributing	State Zip Code CA 93101	06 06 2014  Transaction ID : SA11AI.16731  Amount of Each Receipt this Period
federal political committee.  Name of Employer  PLANNED PARENTHOOD	Occupation PHYSICIAN	215.00
Receipt For:  Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  215.00	
Full Name (Last, First, Middle  LAURA SIROTT  Mailing Address 249 SOUTH E		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PASADENA FEC ID number of contributing	State Zip Code CA 91107	Transaction ID : SA11Al.16678  Amount of Each Receipt this Period
federal political committee.  Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	625.00
Receipt For:  Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle PATRICIA H. SMITH Mailing Address 738 FONTAIR		Date of Receipt
City ALEXANDRIA	State Zip Code VA 22302	06 09 2014  Transaction ID : SA11AI.16662  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer  GWU MEDICAL FACULTY AS  Receipt For:		-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Pa	ge (optional)	1090.00
TOTAL This Period (last page the	nis line number only)	

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Full Name (Last, First, Middle Initial)  MARK R. SPENCE  Mailing Address 1190 NORTHWEST 9	5TH STREET	Date of Receipt
		06 23 2014
City	State Zip Code	Transaction ID : SA11AI.16982
MIAMI	FL 33150	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
FULL CIRCLE HEALTH CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General  Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) EDWARD C. SPOON	'	Date of Receipt
Mailing Address 624 CANYON GREEN	M = M / D = D / Y = Y = Y	
City	06 27 2014	
LAS VEGAS	State Zip Code NV 89144	Transaction ID : SA11AI.16932  Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lacif Necelpt tills Fellod
federal political committee.	C	250.00
Name of Employer	Occupation	
LAS VEGAS OB/GYN WOMEN'S CARE	PHYSICIAN	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) ROBERT R. STERLING	·	Date of Receipt
Mailing Address 1268 REDWOOD FAR	RM COURT	06 24 2014
City VIRGINIA BEACH	State Zip Code VA 23452	Transaction ID : SA11AI.17036  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
MID-ATLANTIC WOMEN'S CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify)	250.00	1

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  KIMBERLY J. STOCKMASTER  Mailing Address 1329 SYCAMORE ROAD		Date of Receipt
City VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General Other (specify) ▼	State Zip Code VA 23452  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.16934  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  ANGELA R. STOEHR  Mailing Address 5875 95TH AVENUE NORT  City PINELLAS PARK  FEC ID number of contributing federal political committee.  Name of Employer EASTERN IOWA HEALTH CENTER  Receipt For: Primary General Other (specify)	H  State Zip Code FL 33782  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  280.00	Date of Receipt  06 14 2014  Transaction ID : SA11AI.16793  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  DANA G. STONE  Mailing Address 1730 HUNTINGTON AVEN  City OKLAHOMA CITY  FEC ID number of contributing federal political committee.  Name of Employer  SELF-EMPLOYED  Receipt For:  Primary General Other (specify)   Other (specify)	State Zip Code OK 73116  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1257.00	Date of Receipt  06 09 2014  Transaction ID : SA11AI.16664  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	470.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee	to solicit contributions from such committee.
/	S OF OB-GYNS PAC (OB-GYN P.	AC)
Full Name (Last, First, Middle Initial)  DANA G. STONE		Date of Receipt
Mailing Address 1730 HUNTINGTON AVE	NUE	06 13 2014
City	State Zip Code	Transaction ID : SA11AI.17063
OKLAHOMA CITY	OK 73116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	7
SELF-EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1267.00	
Full Name (Last, First, Middle Initial)  JANETTE H. STRATHY		Date of Receipt
Mailing Address 3209 GALLERIA		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	06 16 2014 Transaction ID : SA11AI.16639
EDINA	MN 55435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
PARK NICOLLET HEALTH SERVICES	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 3423 COLONEL VANDER	RHORST CIRCLE	06 26 _ 2014 _
City MT. PLEASANT	State Zip Code SC 29466	Transaction ID : SA11AI.17066  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	
MEDICAL UNIVERSITY OF SC	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	275.00	
SUBTOTAL of Receipts This Page (optional	)	685.00
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.
THE AMERICAN CONGRES  Full Name (Last, First, Middle Initial)  LINDA T. SWAN  Mailing Address 3097 DRESDEN ROAD  City  ZANESVILLE  FEC ID number of contributing federal political committee.  Name of Employer  GENESIS PRIMARY CARE  Receipt For:  Primary General	State Zip Code OH 43701  C  Occupation PHYSICIAN  Aggregate Year-to-Date   600.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial)  BRWIN G. SZELA  Mailing Address 600 WEST LAKE COOK  City		Date of Receipt  06 09 2014  Transaction ID: SA11AI.16665
BUFFALO GROVE  FEC ID number of contributing federal political committee.  Name of Employer  WOMEN'S HEALTH FIRST  Receipt For:  Primary  General	C Occupation PHYSICIAN Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  REENA TALREJA-PELAEZ  Mailing Address 1713 SOUTH WOODHO  City  VIRGINIA BEACH  FEC ID number of contributing	State Zip Code VA 23454	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee.  Name of Employer  VIRGINIA BEACH OB/GYN  Receipt For:  Primary General  Other (specify)	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  250.00	250.00
SUBTOTAL of Receipts This Page (options	ıl)	1850.00
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or for commercial purposes, other than usi	ng the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRE	SS OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  JANICE TILDON-BURTON  Mailing Address 1700 TALLEY ROAD		Date of Receipt
City WILMINGTON  FEC ID number of contributing federal political committee.  Name of Employer  SELF-EMPLOYED  Receipt For:  Primary General  Other (specify)	State Zip Code DE 19803  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  927.00	Transaction ID : SA11AI.16567  Amount of Each Receipt this Period  209.00
Full Name (Last, First, Middle Initial)  B. ERIN E. TRACY  Mailing Address 5 HIGH STREET  City  STONEHAM  FEC ID number of contributing federal political committee.  Name of Employer  MASS GENERAL PHYSICIANS  Receipt For:  Primary General  Other (specify)	State Zip Code MA 02180  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1254.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) ERIC R. VERA  Mailing Address 403 PERMIAN WAY  City VILLA RICA  FEC ID number of contributing federal political committee.  Name of Employer SELF-EMPLOYED Receipt For: Primary General Other (specify)	State Zip Code GA 30180  C  Occupation PHYSICIAN  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	1418.00
TOTAL This Period (last page this line nu	mber only)	

					PAGE	 52	OF	65	
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or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	he name and address of any political committee	
, , ,	S OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle Initial) JEFFREY M. WENTWORTH		Date of Receipt
Mailing Address 332 BAY DUNES DRIVE		06 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.16939
NORFOLK	VA 23503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
THE GROUP FOR WOMEN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  ELMER C. WERNER		Date of Receipt
Mailing Address 11588 VIA RANCHO SAN D	06 10 2014	
City	State Zip Code	Transaction ID : SA11AI.16682
EL CAJON	CA 92019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)	•	Date of Receipt
Mailing Address 55 FERNCREST AVENUE		06 07 2014
City	State Zip Code	Transaction ID : SA11AI.16651
CRANSTON	RI 02905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
PROVIDENCE COMMUNITY HEALTH	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	er only)	

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(check only one)											
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			13		14		15		16	,	17

Full Name (Last, First, Middle Initial)  LENA R. WILEY  Mailing Address 2115 WEST CRYSTAL STREET  City State Zip Code CHICAGO IL 60622  FEC ID number of contributing federal political committee.  Name of Employer LOYOLA UNIVERSITY MEDICAL Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City State Zip Code VIRGINIA BEACH VA 23454  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  ROBERT YELVERTON	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code  CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer  LOYOLA UNIVERSITY MEDICAL  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City State Zip Code  VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  C  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  PHYSICIAN  Aggregate Year-to-Date ▼  PHYSICIAN  Aggregate Year-to-Date ▼  PHYSICIAN  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  PHYSICIAN  Aggregate Year-to-Date ▼  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  PHYSICIAN	Date of Receipt  Description of the control of the
CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer  LOYOLA UNIVERSITY MEDICAL  Receipt For:  Primary  Other (specify) ▼  Pull Name (Last, First, Middle Initial)  FUIL Name of Employer  VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Primary  General  Occupation  Aggregate Year-to-Date ▼  240.00  State Zip Code  VA 23454  C  C  City  VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Primary  General  Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary  General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Amount of Each Receipt this Period 40.00  Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer  LOYOLA UNIVERSITY MEDICAL  Receipt For:  Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial)  HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City State Zip Code VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  C  Code  VA 23454  C  C  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  PHYSICIAN  Aggregate Year-to-Date ▼  PHYSICIAN  Aggregate Year-to-Date ▼  PHYSICIAN  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  PHYSICIAN  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  PHYSICIAN	Date of Receipt
Name of Employer  LOYOLA UNIVERSITY MEDICAL  Receipt For:  Primary  Other (specify) ▼  Pull Name (Last, First, Middle Initial)  PHYSICIAN  Aggregate Year-to-Date ▼  240.00  Full Name (Last, First, Middle Initial)  State Zip Code  VIRGINIA BEACH  VA 23454  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Primary  Other (specify) ▼  Coccupation  PHYSICIAN  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary  Other (specify) ▼  250.00  Full Name (Last, First, Middle Initial)	Date of Receipt
LOYOLA UNIVERSITY MEDICAL  Receipt For:  Primary Other (specify) ▼  Aggregate Year-to-Date ▼  240.00  Full Name (Last, First, Middle Initial) B. HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  250.00  Full Name (Last, First, Middle Initial)	M = M / D = D / Y = Y = Y
Receipt For:  Primary Other (specify) ▼  Pull Name (Last, First, Middle Initial) B. HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City VIRGINIA BEACH VA 23454  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Cocupation PHYSICIAN  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  250.00	M = M / D = D / Y = Y = Y
Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial) HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City State Zip Code VIRGINIA BEACH VA 23454  FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  Primary General Other (specify) ▼  Aggregate real to bate ▼  240.00  Cupation PHYSICIAN  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	M = M / D = D / Y = Y = Y
Other (specify) ▼  Full Name (Last, First, Middle Initial)  HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City  VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Primary  Other (specify) ▼  C  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	M = M / D = D / Y = Y = Y
HUGH D. WOLCOTT  Mailing Address 1202 YANCEY CIRCLE  City State Zip Code  VIRGINIA BEACH VA 23454  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	M = M / D = D / Y = Y = Y
City  VIRGINIA BEACH  VA  23454  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Primary  Other (specify) ▼  C  Occupation  PHYSICIAN  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	
VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	06 27 2014
VIRGINIA BEACH  FEC ID number of contributing federal political committee.  Name of Employer  MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	T (1 ID 611111111111
FEC ID number of contributing federal political committee.  Name of Employer MID-ATLANTIC WOMEN'S CARE  Receipt For: Primary Other (specify)   Full Name (Last, First, Middle Initial)	Transaction ID : SA11AI.16940  Amount of Each Receipt this Period
Name of Employer MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)	
MID-ATLANTIC WOMEN'S CARE  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  250.00  Full Name (Last, First, Middle Initial)	250.00
Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  250.00  Full Name (Last, First, Middle Initial)	
Primary General Other (specify) ▼ 250.00  Full Name (Last, First, Middle Initial)	
Other (specify) ▼ 250.00  Full Name (Last, First, Middle Initial)	
	Date of Receipt
Mailing Address 2526 JETTON AVENUE	06 10 2014 _
City State Zip Code	Transaction ID : SA11AI.16683
TAMPA FL 33629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	70.00
Name of Employer Occupation	
SELF-EMPLOYED PHYSICIAN	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 280.00	
SUBTOTAL of Receipts This Page (optional)	

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

TOTAL TROMBETT					PAGE		54	OF	65
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16		17

or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial)  EDWARD R. YEOMANS  Mailing Address 3601 4TH STREET		Date of Receipt
City LUBBOCK	State Zip Code TX 79430	06 12 2014  Transaction ID : SA11AI.16787  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer TEXAS TECH UNIVERSITY	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  MARILYN SAU YING YOUNG  Mailing Address 9009 LIGON COURT		Date of Receipt  06 02 2014
City FORT MYERS	State Zip Code FL 33908	Transaction ID : SA11AI.16568  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
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	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional).		1250.00
TOTAL This Period (last page this line number	er only)	44416.33

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SCHEDULE B (FEC Form 3X)		FOR LINE	E NUMBER: PAGE 55 OF 65			
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	Check only	NOMBER:			
II EIVIIZED DISDURSEIVIEN IS	for each category of the	X 21b	22 23 24 25 26			
	Detailed Summary Page	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Statem	nents may not be sold or us	sed by any nerso	on for the nurpose of soliciting contributions			
or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
THE AMERICAN CONGRESS OF	OB-GYNS PAC (O	B-GYN PAG	C)			
			- <i>,</i>			
Full Name (Last, First, Middle Initial)						
A. AMERICAN EXPRESS			Date of Disbursement			
Mailing Address B.O. BOY 50050			M M / D D / Y Y Y Y			
Mailing Address P.O. BOX 53852			06 05 2014			
City	State Zip Code					
•	AZ 85072		Transaction ID : SB21B.16535			
Purpose of Disbursement		$\overline{}$				
CREDIT CARD TRANSACTION FEES			Amount of Each Disbursement this Period			
Candidate Name		Category/	217.21			
Office Sought: House Disbursem	aont For:	Туре				
	Primary General					
	Other (specify)					
State: District:	- √-1:-2· <del></del> :: <b>J</b> / <b>▼</b>					
Full Name (Last, First, Middle Initial)						
B. AMERICAN EXPRESS			Date of Disbursement			
			M = M / D = D / Y = Y = Y			
Mailing Address P.O. BOX 53852			06 30 2014			
01	7. 0. 1		<del></del>			
,	State Zip Code AZ 85072		Transaction ID : SB21B.17039			
Purpose of Disbursement	05012					
CREDIT CARD TRANSACTION FEES			Amount of Each Disbursement this Period			
Candidate Name		Category/	7.7			
		Type	7.95			
Office Sought: House Disbursem						
	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)  C FIRST NATIONAL MEDCHANT SC	N LITIONS		Date of Disbursement			
c. FIRST NATIONAL MERCHANT SC	JLU HONS					
Mailing Address 1620 DODGE STREET			06 03 2014			
•	State Zip Code		Transaction ID : SB21B.16536			
***************************************	NE 68197					
Purpose of Disbursement CREDIT CARD TRANSACTION FEES		· · · · · ·				
Candidate Name		البييا	Amount of Each Disbursement this Period			
		Category/ Type	561.27			
Office Sought: House Disbursem	nent For:	1,700				
	Primary General					
President	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		······	786.43			

SCHEDULE B (FEC Form 3X)			INIT N	LIMDED				PAGE	56	OF	65								
	EMIZED DISBURSEMENTS	Use separate schedule(	s)   (	-		IE NUMBER: PAGE 56 Inly one)			- 50	3. 00									
11	LIVIIZED DISDUNSEIVIEN IS	for each category of the	)   `	X 21b		1 '		1 '		`		22		23	2	1 [	25		26
		Detailed Summary Page	,		27	28a		28b	2	3c	29		30b						
Ar	y information copied from such Reports and Staten	nents may not be sold or	used h	/ anv	persor	for the	nur	nose o	of solic	itina c	ontrib	ution	s						
	for commercial purposes, other than using the nam												Ü						
$\vdash$	NAME OF COMMITTEE (In Full)																		
$  \rangle$	THE AMERICAN CONGRESS OF	OR-GYNS PAC (	OR-G	VΝ	PΔC	2)													
/	THE / WIETGO WIT CONSTRESS OF	0) 0110170 (0	<i>)</i>	114	1 / (	')													
	Full Name (Last, First, Middle Initial)																		
A.	SQUARE, INC.					Date of	f Dis	sburse	ment										
	<u> </u>					M = M	/	D	D /	Υ	YY	I Y							
	Mailing Address 901 MISSION STREET					06	ш	1:	3	2	2014								
	Other	75.0.4.																	
	,	State Zip Code CA 94103				Trans	acti	ion ID	: SB2	B.170	041								
	SAN FRANCISCO Purpose of Disbursement	CA 94103																	
	CREDIT CARD TRANSACTION FEES					Amoun	t of	Fach	Dishur	semei	nt this	Peri	od						
	Candidate Name		⊣ اــــــــــــــــــــــــــــــــــــ		_	71110011	. 0.	Laon	Diobai	3011101		1 011							
				tegory Type	y/	١.		/m			_ 5	2.00							
	Office Sought: House Disbursen	nent For:		Турс				7		7									
		Primary General																	
		Other (specify) ▼																	
	State: District:	•																	
	Full Name (Last, First, Middle Initial)																		
В.	SQUARE, INC.					Date of	f Dis	sburse	ment										
						M = M	1	D	D /	Υ	Y Y	Y							
	Mailing Address 901 MISSION STREET					06		1	4		2014								
	,	State Zip Code				Trans	acti	ion ID	: SB2	B.17	040								
	SAN FRANCISCO Purpose of Disbursement	CA 94103																	
	CREDIT CARD TRANSACTION FEES					Amoun	t of	Each	Dichur	como	nt thic	Pori	od						
	Candidate Name		با ا	_		Amoun	. 01	Lacii	Disbui	SCITICI	11 1113	1 011	ou						
				tegory Type	y/	Ι.						3.30	<u>.                                    </u>						
	Office Sought: House Disbursen	nent For:		турс				7		7									
		Primary General																	
		Other (specify) ▼																	
	State: District:	· · · · · · · · · · · · · · · · · · ·																	
	Full Name (Last, First, Middle Initial)																		
C.	,					Date of	f Dis	sburse	ment										
						M M	1	D	D /	Υ	YY	I Y							
	Mailing Address							L.		L.									
	City	State Zip Code																	
	Purpose of Disbursement																		
	Fulpose of Disbulsement																		
	Candidate Name					Amoun	t of	Each	Disbur	semer	nt this	Peri	od						
	Candidate Name			tegory	y/								п.						
	Office Sought: House Disbursen	nent For:		Туре	-	_	-	7		7			_						
		Primary General																	
		Other (specify)																	
	State: District:	- (-i)/ <b>\</b>																	
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۱,	UBTOTAL of Disbursements This Page (optional)					1	_		-	_	- 5	5.30							
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-	OTAL This Period (last page this line number only)							_	_	_	84	1.73							

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PA				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	v one)			
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b			
		27				
Any information copied from such Reports and State or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full)	name and address of any point		o denot continuations with each committee.			
THE AMERICAN CONGRESS (	OF OR-GYNS PAC (O	B-GYN PA	C)			
/ THE / WIERIO/ IN CONCRECC	0) 00 011101710 (0	DOINTA	0)			
Full Name (Last, First, Middle Initial)						
A. BARBARA LEE FOR CONGRES	SS		Date of Disbursement			
Mailing Address 409 13TH STREET			06 16 2014			
Walling Address 409 131H STREET			00 10 2014			
City	State Zip Code		T			
OAKLAND	CA 94612		Transaction ID: SB23.16770			
Purpose of Disbursement CONTRIBUTION						
Candidate Name			Amount of Each Disbursement this Period			
BARBARA LEE		Category/ Type	2500.00			
	rsement For: 2014	туре				
Senate	Primary Seneral					
President	Other (specify)					
State: CA District: 13						
Full Name (Last, First, Middle Initial)						
B. BENISHEK FOR CONGRESS			Date of Disbursement			
Mailing Address P.O. BOX 108			06 25 2014			
Mailing Address P.O. BOX 108			00 23 2014			
City	State Zip Code		Transaction ID : SB23.16894			
GLADSTONE	MI 49837		11aiisaction iD . 3B23.10094			
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period			
Candidate Name			Amount of Each dispulsement this Period			
DANIEL J. BENISHEK		Category/ Type	1000.00			
	rsement For: 2014	.,,,,	,			
Senate	Y Primary General					
President	Other (specify) ▼					
State: MI District: 01						
Full Name (Last, First, Middle Initial)			Data of Bishamanant			
C. BERA FOR CONGRESS			Date of Disbursement			
Mailing Address P.O. BOX 582496			06 25 2014			
City	State Zip Code		Transaction ID : SB23.16896			
ELK GROVE	CA 95758		114115461161115 : 6526.16656			
Purpose of Disbursement CONTRIBUTION						
Candidate Name		0.11	Amount of Each Disbursement this Period			
AMERISH BERA		Category/ Type	1000.00			
Office Sought:	rsement For: 2014	,,,				
Senate	Primary General					
President	Other (specify) ▼					
State: CA District: 07						
			4500.00			
SUBTOTAL of Disbursements This Page (optional	al)	·····•	4000.00			
TOTAL This Period (last page this line number o	nlv)					
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 58 OF 65
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	nents may not be sold or used the and address of any politica	d by any person I committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
THE AMERICAN CONGRESS OF	OB-GYNS PAC (OB	-GYN PAC	D)
Full Name (Last, First, Middle Initial)  A. BILL FLORES FOR CONGRESS			Date of Disbursement
Mailing Address P.O. BOX 6207			06 16 2014
BRYAN	State Zip Code TX 77805		Transaction ID : SB23.16747
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name BILL FLORES		Category/ Type	2500.00
Senate President	nent For: 2014  Primary		
State: TX District: 17  Full Name (Last, First, Middle Initial)  B. DUCKWORTH FOR CONGRESS  Mailing Address P.O. BOX 59568			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City S SCHAUMBURG	State Zip Code IL 60159		Transaction ID : SB23.16745
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name  L. TAMMY DUCKWORTH		Category/ Type	3000.00
Senate	nent For: 2014  Primary		
Full Name (Last, First, Middle Initial)  FRIENDS OF BOB JOHNSON			Date of Disbursement
Mailing Address P.O. BOX 16401			06 09 2014
•	State Zip Code GA 31416		Transaction ID : SB23.16544
CONTRIBUTION  Candidate Name	[		Amount of Each Disbursement this Period
ROBERT E. JOHNSON	nent For: 2014	Category/ Type	5000.00
Senate	Primary ☐ General  Other (specify) ▼  Runoff		
SUBTOTAL of Disbursements This Page (optional)			10500.00

SCH	EDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 59 OF 65					
ITEN	MIZED DISBURSEMENTS		rate schedule(s) ategory of the	(orlook orliy orlo)						
			Summary Page	21b	22 28a	X 23 28b	24 28c	25 29	26 30b	
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	commercial purposes, other than using the name									
\ NA	ME OF COMMITTEE (In Full)									
$ \rangle$ T	HE AMERICAN CONGRESS OF	OB-GYN	NS PAC (OI	B-GYN PA	C)					
<u></u>	Il Name (Last, First, Middle Initial)									
_	RIENDS OF DAN MAFFEI				Date o	f Disbursem	ent			
_					M M	/ D D	/ Y Y	YY	7	
Ма	illing Address P.O. BOX 230				06	09	20	)14		
Cit	V	State	Zip Code							
	RACUSE	NY	13201		Trans	saction ID :	SB23.16543			
	rpose of Disbursement ONTRIBUTION									
_	ndidate Name				Amoun	t of Each D	isbursement	this Pe	riod	
	ANIEL B. MAFFEI			Category/ Type				4000.0	0	
		nent For: 20	014	1,400		7	7			
	Senate	Primary	X General							
0.	President O.4	Other (speci	ify) 🔻							
	ate: NY District: 24									
	RIENDS OF JOHN BOEHNER				Date o	f Disbursem	ent			
_				M = M / D = D / Y = Y =				Y Y	1	
Ma	iling Address 7908 CINCINNATI DAYTON ROA	)			06	16	20	014		
Cit		State OH	Zip Code		Trans	saction ID :	SB23.16739	,		
	EST CHESTER rpose of Disbursement	OI I	45069							
	ONTRIBUTION				Amoun	t of Each D	isbursement	this Pe	riod	
	ndidate Name			Category/				2500.0	00	
	OHN A. BOEHNER  ice Sought:   House   Disbursen	nent For: 2	014	Туре			7		_	
Oil		Primary	General							
		Other (speci								
	ate: OH District: 08									
	II Name (Last, First, Middle Initial)				Doto o	f Disbursem	ent			
<b>∪.</b> ⊢	RIENDS OF RENTERIA				M M	/ D D		YYY	-	
Ma	illing Address P.O. BOX 655				06	16		)14		
Cit		State	Zip Code		Trans	saction ID ·	SB23.16756			
	NGER rpose of Disbursement	CA	93657		lians		JJ_5.10750	•		
	ONTRIBUTION				Amoun	t of Each D	isbursement	this Pa	riod	
	ndidate Name			Category/	Amoun	. or Lacii D			-	
	MANDA RENTERIA			Type			-	2500.0	U	
Off		nent For: 20 Primary	014 General							
	President	Other (speci								
Sta	ate: CA District: 21	(-10	·/ •							
	-								-	
SUB	TOTAL of Disbursements This Page (optional)							9000.00	0	
TOT	M. This Pariod (last page this line number exten									
1 '0'	<b>AL</b> This Period (last page this line number only)						-			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 60 OF 65					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b				
Any information copied from such Reports and State	ments may not be sold or us						
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
$ \hspace{.05cm} \rangle$ THE AMERICAN CONGRESS OF	FOB-GYNS PAC (O	B-GYN PAG	C)				
Full Name (Last, First, Middle Initial)							
A. JOHN FOUST FOR CONGRESS			Date of Disbursement				
Mailing Address P.O. BOX 962			06 09 2014				
Mailing Address 1.0. Box 302			00 03 2014				
City	State Zip Code		Transaction ID : SB23.16545				
MCLEAN Purpose of Disbursement	VA 22101						
CONTRIBUTION		L	Amount of Each Disbursement this Period				
Candidate Name		Category/	5000.00				
JOHN FOUST		Type	5000.00				
Office Sought: House Disburse Senate	ement For: 2014  Primary Seneral						
President	Other (specify)						
State: VA District: 10	1						
Full Name (Last, First, Middle Initial)			Data of Bishamanan				
B. KUSTER FOR CONGRESS			Date of Disbursement				
Mailing Address P.O. BOX 1498			06 16 2014				
City CONCORD	State Zip Code NH 03302		Transaction ID : SB23.16750				
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period				
Candidate Name		Category/					
ANN MCLANE KUSTER		Type	5000.00				
	ement For: 2014						
Senate President	Primary						
State: NH District: 02							
Full Name (Last, First, Middle Initial)							
C. MARSHA BLACKBURN FOR CO	NGRESS, INC.		Date of Disbursement				
Mailing Address P.O. BOX 3750			06 16 2014				
City BRENTWOOD	State Zip Code TN 37024		Transaction ID : SB23.16737				
Purpose of Disbursement	37024						
CONTRIBUTION			Amount of Each Disbursement this Period				
Candidate Name MARSHA BLACKBURN	Category/	2000.00					
	ement For: 2014	Туре					
Senate	Primary General						
President	Other (specify) ▼						
State: TN District: 07							
SUBTOTAL of Disbursements This Page (optional).			12000.00				
2227 Tile C. Bisbursonicino Tilis Lago (optional).							
TOTAL This Period (last page this line number only	/)						

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 61 OF 65					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)					
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b				
Any information copied from such Reports and State	tements may not be sold or us						
or for commercial purposes, other than using the n							
NAME OF COMMITTEE (In Full)							
$ \; angle$ THE AMERICAN CONGRESS O	F OB-GYNS PAC (O	B-GYN PA	C)				
Full Name (Last, First, Middle Initial)		1					
A. PAUL TONKO FOR CONGRESS			Date of Disbursement				
	•		M M / D D / Y Y Y Y				
Mailing Address 911 CENTRAL AVENUE			06 09 2014				
City	State Zip Code						
ALBANY	NY 12206		Transaction ID : SB23.16537				
Purpose of Disbursement CONTRIBUTION			[				
CONTRIBUTION  Candidate Name			Amount of Each Disbursement this Period				
PAUL D. TONKO		Category/ Type	1000.00				
	sement For: 2014	1,400					
Senate	Primary General						
President Pictriot: 20	Other (specify) ▼						
State: NY District: 20  Full Name (Last, First, Middle Initial)							
B. PAUL TONKO FOR CONGRESS	3		Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 911 CENTRAL AVENUE			06 16 2014				
City	State Zip Code		Transaction ID : SB23.16736				
ALBANY Purpose of Disbursement	NY 12206						
CONTRIBUTION			Amount of Each Disbursement this Period				
Candidate Name		Category/	1500.00				
PAUL D. TONKO Office Sought:	noment For: 0044	Type	1500.00				
	sement For: 2014  Primary General						
President	Other (specify)						
State: NY District: 20							
Full Name (Last, First, Middle Initial)							
C. PEOPLE FOR PATTY MURRAY			Date of Disbursement				
Mailing Address P.O. BOX 3662			06 16 2014				
City	State Zip Code		Transaction ID: SB23.16754				
SEATTLE Purpose of Disbursement	WA 98124						
CÓNTRIBUTION		Amount of Each Disbursement this Period					
Candidate Name	Category/	2500.00					
PATTY MURRAY	noment For: 0040	Type	2300.00				
Office Sought: House Disburs	sement For: 2016  Primary General						
President	Other (specify)						
State: WA District: 00							
			5000.00				
SUBTOTAL of Disbursements This Page (optional	)	·····•	5000.00				
TOTAL This Period (last page this line number on	ly)						
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 62 OF 65					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b				
Any information copied from such Reports and State	ments may not be sold or us						
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
THE AMERICAN CONGRESS OF	OB-GYNS PAC (OF	B-GYN PAG	C)				
Full Name (Last, First, Middle Initial)		ı					
A. RICHARD HANNA FOR CONGRE	SS COMMITTEE		Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address P.O. BOX 118			06 16 2014				
City	State Zip Code						
UTICA	NY 13503		Transaction ID : SB23.16748				
Purpose of Disbursement							
CONTRIBUTION			Amount of Each Disbursement this Period				
Candidate Name RICHARD HANNA		Category/	2500.00				
	ment For: 2014	Туре					
Senate	Primary Seneral						
President	Other (specify) ▼						
State: NY District: 22							
Full Name (Last, First, Middle Initial)  B. RON BARBER FOR CONGRESS			Date of Disbursement				
- NON DARDER FOR CONGRESS			M M / D D / Y Y Y Y				
Mailing Address P.O. BOX 57715			06 30 2014				
City	State Zip Code		Transaction ID : SB23.16965				
TUCSON  Purpose of Dishurament	AZ 85732		11411345tion ID . 0023.10303				
Purpose of Disbursement CONTRIBUTION		· · · ]	Amount of Each Disbursement this Period				
Candidate Name		Category/					
RONALD BARBER		Type	1000.00				
	ment For: 2014						
Senate President	Primary General						
State: AZ District: 02	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C. STEVE COHEN FOR CONGRESS	3		Date of Disbursement				
Matter Address of the second o			M M / D D / Y Y Y Y				
Mailing Address 349 KENILWORTH PLACE			06 16 2014				
City	State Zip Code		Transaction ID - CD22 46744				
MEMPHIS	TN 38112		Transaction ID: SB23.16741				
Purpose of Disbursement CONTRIBUTION							
Candidate Name		Catanini	Amount of Each Disbursement this Period				
STEPHEN I. COHEN	Category/ Type	2500.00					
Office Sought: House Disburse	ment For: 2014						
Senate	Primary General						
State: TN District: 09	Other (specify) ▼						
State: TN District: 09							
SUBTOTAL of Disbursements This Page (optional)			6000.00				
age (opinia).							
TOTAL This Period (last page this line number only	)		1				

SCHEDULE B (FEC Form 3X)		FOR LINE	E NUMBER: PAGE 63 OF 65			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b	22 X 23 24 25 28 28c 29	26		
	<u> </u>	27		30b		
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NAME OF COMMITTEE (In Full)	and address or any points	55.111111100 10	22 Sommand nom Such Sommitte	٠.		
THE AMERICAN CONGRESS OF	OB-GYNS PAC (OF	3-GYN PA	C)			
	CD CTIVOT AC (OI		<del>,</del>			
Full Name (Last, First, Middle Initial)						
A. TOM REED FOR CONGRESS			Date of Disbursement			
Mailing Address D.O. DOV 004			M M / D D / Y Y Y Y Y	Y		
Mailing Address P.O. BOX 391			06 09 2014			
City	State Zip Code					
GENEVA	NY 14456		Transaction ID : SB23.16541			
Purpose of Disbursement CONTRIBUTION						
			Amount of Each Disbursement this Pe	eriod		
Candidate Name		Category/	2000.0	00		
THOMAS W. REED, II  Office Sought:  House Disburse	ment For: 2014	Туре				
Senate	Primary Seneral					
President	Other (specify)					
State: NY District: 23	, , , , ,					
Full Name (Last, First, Middle Initial)						
B. TOM REED FOR CONGRESS			Date of Disbursement			
			M M / D D / Y Y Y Y	Y		
Mailing Address P.O. BOX 391			06 09 2014			
City	State Zip Code		Transaction ID : SB23.16542			
GENEVA Purpose of Disbursement	NY 14456					
CONTRIBUTION			Amount of Each Disbursement this Pe	eriod		
Candidate Name		Category/				
THOMAS W. REED, II		Type	3000.0	00		
	ment For: 2014					
	Primary General					
President President	Other (specify) ▼					
State: NY District: 23						
Full Name (Last, First, Middle Initial)  C. UPTON FOR ALL OF US			Date of Disbursement			
S. UPTON FOR ALL OF US			M M / D D / Y Y Y Y	V		
Mailing Address P.O. BOX 490			06 09 2014			
City	State Zip Code		Transaction ID : SB23.16538			
ST. JOSEPH Purpose of Disbursement	MI 49085					
CONTRIBUTION			Amount of Each Disbursement this Pe	- u! al		
Candidate Name		Catanamil	Amount of Each Dispursement this Pe	erioa		
FREDERICK S. UPTON		Category/ Type	1500.0	00		
Office Sought: House Disburse	ment For: 2014		, , , , , , , , , , , , , , , , , , , ,			
Senate	Primary General					
President	Other (specify) ▼					
State: MI District: 06						
			6500.6	20		
SUBTOTAL of Disbursements This Page (optional).		······	6500.0	JU		
TOTAL This Davied (last page this line assets)	<u> </u>					
TOTAL This Period (last page this line number only	J					

SCHEDULE B (FEC Form 3X)		NUMBER: PAGE 64 OF 6	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any information copied from such Reports and Staten	nents may not be sold or use		
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
$ \; angle$ THE AMERICAN CONGRESS OF	<b>OB-GYNS PAC (OB</b>	3-GYN PAC	C)
Full Name (Last, First, Middle Initial)		<u> </u>	
A. UPTON FOR ALL OF US			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 490			06 09 2014
City	State Zip Code		
ST. JOSEPH	MI 49085		Transaction ID: SB23.16539
Purpose of Disbursement CONTRIBUTION			
CONTRIBUTION  Candidate Name			Amount of Each Disbursement this Period
FREDERICK S. UPTON		Category/ Type	5000.00
	nent For: 2014	1,700	
Senate	Primary Seneral		
President District: 00	Other (specify) ▼		
State: MI District: 06  Full Name (Last, First, Middle Initial)			
B. VOLUNTEERS FOR SHIMKUS			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address P.O. BOX 661			06 16 2014
City S COLLINSVILLE	State Zip Code IL 62234		Transaction ID : SB23.16763
Purpose of Disbursement	02234		
CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
JOHN M. SHIMKUS  Office Sought:	nent For: 2014	Туре	
	Primary General		
	Other (specify) ▼		
State: IL District: 15			
Full Name (Last, First, Middle Initial)			Date of Disbursement
c. WALORSKI FOR CONGRESS			Man / Dad / Yayayay
Mailing Address P.O. BOX 954			06 16 2014
0.1	7' 0 '		
City S MISHAWAKA	State Zip Code IN 46546		Transaction ID: SB23.16766
Purpose of Disbursement			
CONTRIBUTION			Amount of Each Disbursement this Period
Candidate Name JACKIE WALORSKI SWIHART		Category/	1000.00
	nent For: 2014	Туре	
Senate Sissansi	Primary Seneral		
President	Other (specify) ▼		
State: IN District: 02			
CURTOTAL of Disharasanta Tita Day ( 15 15			8500.00
SUBTOTAL of Disbursements This Page (optional)			333.00

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 65 OF 65
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 24 28a 28b 28	
Any information copied from such Reports and State	nents may not be sold or use			
or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
$ \hspace{.05cm} \rangle$ THE AMERICAN CONGRESS OF	OB-GYNS PAC (OF	B-GYN PAG	C)	
Full Name (Last, First, Middle Initial)				
A. WELCH FOR CONGRESS			Date of Disbursement	
Mailing Address P.O. BOX 1682			06 16	2014
Mailing Address P.O. BOX 1002			00 10	2014
,	State Zip Code		Transaction ID : SB23	16761
BURLINGTON Purpose of Disbursement	VT 05402		Transaction is 1 0520	
CONTRIBUTION			Amount of Each Disburs	sement this Period
Candidate Name		Category/		2000.00
PETER WELCH		Type		2000.00
Office Sought: House Disburse	ment For: 2014 Primary General			
President	Other (specify) ▼			
State: VT District: 00				
Full Name (Last, First, Middle Initial)			Data of Dishurasment	
B. WHITFIELD FOR CONGRESS CO	DIMIMITTEE		Date of Disbursement	Y
Mailing Address P.O. BOX 391			06 16	2014
	State Zip Code KY 42241		Transaction ID : SB23	3.16769
HOPKINSVILLE Purpose of Disbursement	KY 42241			
CONTRIBUTION		: :	Amount of Each Disburs	sement this Period
Candidate Name		Category/		2500.00
WAYNE E. WHITFIELD  Office Sought:   House   Disburse	ment For: 2014	Туре		
Senate	Primary Seneral			
President	Other (specify) ▼			
State: KY District: 01				
Full Name (Last, First, Middle Initial)  C.			Date of Disbursement	
			M = M / D = D /	Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
·		Amount of Each Disburs	sement this Period	
Candidate Name		Category/ Type		
	ment For:			
Senate President	Primary General			
State: District:	Other (specify) ▼			
21.150				
SUBTOTAL of Disbursements This Page (optional)				4500.00
				66500.00
TOTAL This Period (last page this line number only	)			00000.00