03/18/2011 13:47

Image# 11990313254

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For (Other Than An A	Authorized Co	mmittee		Office Use Only
NAME OF COMMITTEE (in fu		FEC MAILING LABE YPE OR PRINT	EL Example:I over the li	f typing, type nes		
American College of	Radiology Ass	ociation Political Actio	on Committee	1 1 1 1 1		
	1 1 1 1	1 1 1 1 1	1 1 1 1 1	1 1 1 1 1	1 1 1 1	
ADDRESS (number and s	treet) 18	91 Preston White Dr	ive 			
Check if differe than previously reported. (ACC	ı Be	eston			VA L	20191
2. FEC IDENTIFICAT	ON NUMBER	~	CITY 🛕		STATE	ZIPCODE 🛋
C00343459		3	. IS THIS REPORT	NEW (N) OR	X AM	ENDED
July 15 Quarterly October 1 Quarterly January 3	Report(Q1) Report(Q2) Report(Q3) Report(YE) d-Year on-election) (MY)	(c) 12-Day PRE-Election Report for the (d) 30-Day Post -Electic Report for the	ection on Gene	May 20 (M5) Jun 20 (M6) Jul 20 (M7) ary (12P) ention (12C) ral (30G)	Sep :	in the State of
5. Covering Period	01	01 2011	th	rough 0 1	31	2011
I certify that I have exami Type or Print Name of Tr		and to the best of my OR William Herrington	_	lief it is true, correct	and complete.	
Signature of Treasurer	Electronically	Filed by DR Willia	m Herrington		Date 03	18 2011
NOTE : Submission of fa	alse, erroneous,	or incomplete inform	ation may subject t	ne person signing th	nis Report to the	penalties of 2 U.S.C 437g.
Office Use						FEC FORM 3X

FE6AN026

 $\textbf{A.} \quad \text{Form/Schedule}: \quad \textbf{F3XA}$

Transaction ID:

Had to add in a small number of contributions totalling 1,050 all together that were deposited in January 2011 but not forwarded until March 2011.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

3 / 56

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

American College of Radiology Association Political Action Committee

D D " D 0 1 0 1 2011 0.1 3 1 2011 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011 ° 678928.36 January 1 (b) Cash on Hand at 678928.36 Begining of Reporting Period 126256.33 126256.33 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 805184.69 805184.69 6(a) and 6(c) for Column B) 35633.07 35633.07 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 769551.62 769551.62 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

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

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

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 56

Write or Type Committee Name

American College of Radiology Association Political Action Committee

м м 0 1

Report Covering the Period:

From:

D D 0

Y Y W Y 2011

То:

м м 0 1 ^D 31

Y Y Y Y 2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		_
Than Political Committees (i) Itemized (use Schedule A)	109741.68	109741.68
(ii) Unitemized	16507.93	16507.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	126249.61	126249.61
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	126249.61	126249.61
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	6.72	6.72
B. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	126256.33	126256.33
). Total Federal Receipts (subtract Line 18(c) from Line 19)	126256.33	126256.33

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 56

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	0.00	0.00
Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	34000.00	34000.00
4. Independent Expenditure		
(use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
	0.00	0.00
7. Loans Made 3. Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
). Other Disbursements	1633.07	1633.07
). Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35633.07	35633.07
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	35633.07	35633.07

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	126249.61	126249.61	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	126249.61	126249.61	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

FE6AN026

SCHEDULE A (FEC Form 3X)

Any mon	metics comical from a sol Deports and Cta	stamonto mos	for each category of the Detailed Summary Page	(check only one) X 11a
or for com	nation copied from such Reports and Stanmercial purposes, other than using the new Copy (In Full) OF COMMITTEE (In Full) rican College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Dr. Do	ame (Last, First, Middle Initial) nald Allen g Address 2908 Smithfield Ct			Date of Receipt M
City		State	Zip Code	Transaction ID: 38257551
<u>Frede</u>	ericksburg	VA	22408-2059	Amount of Each Receipt this Period
	D number of contributing I political committee.	C		250.00
<u>Freder</u> Receip	of Employer logy Associates of ricksburg ot For: Primary General Other (specify) ▼	-	n ic Radiologist Year-to-Date ▼ 250.00]
B. Dr. Ma	ame (Last, First, Middle Initial) ry Kelly g Address 197 34th Ave E			Date of Receipt M
City		State	Zip Code	Transaction ID: 38259110
<u>Seatt</u>	le	WA	98112-4913	Amount of Each Receipt this Period
	D number of contributing I political committee.	C		1000.00
Radia,			ic Radiologist	
	ot For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 1000.00	
Dr. Rol	ame (Last, First, Middle Initial) bert Wood, JR g Address 9510 Chestnut St			Date of Receipt
City		State	Zip Code	0 1 0 7 2 0 1 1 Transaction ID: 38259115
Lene	xa	KS	66220-3635	Amount of Each Receipt this Period
	D number of contributing I political committee.	С		250.00
<u>s, LLC</u>		Occupation Diagnost	n ic Radiologist	
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTO	TAL of Receipts This Page (optional)		\	1500.00

A.

В.

C.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 56			
		for each category of the	(check only one)			
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
		, ,	13 14 15 16 17			
Any information copied from such Reports and State or for commercial purposes, other than using the r	atements may name and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
American College of Radiology Associa	ation Politica	al Action Committee				
Full Name (Last, First, Middle Initial) Dr. Daniel Cotten			Date of Receipt			
Mailing Address 908 Harbor Pointe Way			01 07 7 2011			
City	State	Zip Code	Transaction ID: 38259708			
Knoxville	TN	37922-4153	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		375.00			
Name of Employer LeConte Radiology	Occupation Diagnosti	c Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00				
Full Name (Last, First, Middle Initial) Dr. Timothy E. Moore			Date of Receipt			
Mailing Address Univ of Nebraska Medic 981045 Nebraska Medic			0 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: 38259709			
<u>Omaha</u>	NE	68198-0001	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
Name of Employer Univ of Nebraska Medical Ctr	Occupation Diagnosti	c Radiologist				
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼	0 0	250.00				
Full Name (Last, First, Middle Initial) Dr. James Newcomb			Date of Receipt			
Mailing Address 1425 Princeton Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: 38267176			
Allentown	PA	18104-2247	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		365.00			
Name of Employer Medical Imaging of Lehigh Valley	Occupation Diagnosti	c Radiologist				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00				
SUBTOTAL of Receipts This Page (optional)			990.00			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/56 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Reburn			Date of Receipt
Mailing Address 2708 Legacy Ct			M M / D D / Y Y Y Y O D D / 2011
City Bartlesville	State OK	Zip Code 74006-7449	Transaction ID: 38267178 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	74000-7449	500.00
Name of Employer RSI	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Kara Carlson			Date of Receipt
Mailing Address 2710 107th Ave SE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State WA	Zip Code	Transaction ID: 38267179
Beaux Arts FEC ID number of contributing federal political committee.	C	98004-7215	Amount of Each Receipt this Period 250.00
Name of Employer Radia Medical Imaging	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_ , '	Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Joshua Abramowitz			Date of Receipt
Mailing Address 72 Saint Stephens S	School Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State TX	Zip Code 78746-2524	Transaction ID: 38395377
FEC ID number of contributing federal political committee.	C	70740-2324	Amount of Each Receipt this Period
Name of Employer Austin Radiological Assoc- iates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optiona			1750.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 56 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Stephen Agatston Mailing Address 2201 Far Gallant City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates	State Zip Code TX 78746-1814 C Occupation Diagnostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 38395378 Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Aronoff Mailing Address 9609 Tobrina Ln City Austin FEC ID number of contributing	State Zip Code TX 78759-7708	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) General Other (specify) Federal political committee.	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	1000.00
Full Name (Last, First, Middle Initial) Dr. Mark Auler Mailing Address 2306 Woodlawn E	Blvd	Date of Receipt
City Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78703-2417 C	Transaction ID: 38395380 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 56 (check only one) X
(Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Associated	ciation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Sarah Avery			Date of Receipt
	Mailing Address 120 Birnam Wood Ct			01 10 7 2011
	City Austin	State TX	Zip Code 78746-4500	Transaction ID: 38395381 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Dr. William Banks Mailing Address 10909 Range View D	_ 		Date of Receipt
				01 10 2011
	City Austin	State TX	Zip Code 78730-3569	Transaction ID: 38395382 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70700 3303	1000.00
	Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_ С.	Full Name (Last, First, Middle Initial) Dr. John Barkley			Date of Receipt
	Mailing Address 1604 University Club	Dr		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Austin	State TX	Zip Code 78732-2440	Transaction ID: 38395383 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70732-2440	1000.00
	Name of Employer Baylor College of Medicine	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		3000.00
t	TOTAL This Period (last page this line numbe			

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 56 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated in the control of the	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Lori Barr Mailing Address Austin Radiological A	ASSOC		Date of Receipt
10900 Stonelake Blvd	d Ste 250		01 10 2011
City	State TX	Zip Code	Transaction ID: 38395384
Austin FEC ID number of contributing federal political committee.	C	78759-5873	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼	_ · _ ·	n ic Radiologist Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Hillel Ben-Avi Mailing Address 4501 Spanish Oak Tr	1		Date of Receipt
O:h.	Charta	7in Oada	01 10 2011
City Austin	State TX	Zip Code 78731-5217	Transaction ID: 38395385
FEC ID number of contributing federal political committee.	C	70731-3217	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Marouane Bouchareb			Date of Receipt
Mailing Address 1401 Eva St Apt 404			01 10 2011
City	State	Zip Code	Transaction ID: 38395386
Austin FEC ID number of contributing federal political committee.	C	78704-3070	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	1		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 56 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Bradley Brenner Mailing Address Austin Radiologica 10900 Stonelake B	Blvd Ste 250		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing federal political committee.	State TX	Zip Code 78759-5873	Transaction ID: 38395387 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Lauren Brown Mailing Address Austin Radiologica PO Box 4099	al Associates		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Austin</u>	State TX	Zip Code 78765-4099	Transaction ID: 38395388 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)		n ic Radiologist Year-to-Date ▼ 1000.00	1000.00
Full Name (Last, First, Middle Initial) Dr. Chris Butschek Mailing Address Austin Radiologica	al Assoc		Date of Receipt
PO Box 4099	State	Zip Code	0 1 1 0 2 0 1 1 Transaction ID: 38395389
Austin FEC ID number of contributing federal political committee.	TX	78765-4099	Amount of Each Receipt this Period
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	al)		3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 56 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Frank Chia Mailing Address Austin Radiological 10900 Stonelake Blv	d Suite 250	7'- Onde	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 Austin FEC ID number of contributing federal political committee.	State TX	Zip Code 78759-5873	Transaction ID: 38395390 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Connor Mailing Address 2603 Oakdale Ct	'		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing	State TX	Zip Code 78703-1529	Transaction ID: 38395391 Amount of Each Receipt this Period
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)		n ic Radiologist Year-to-Date ▼	1000.00
Full Name (Last, First, Middle Initial) Dr. Lawrence K. Conrad Mailing Address Austin Radiological			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State TX	Zip Code 78759-5873	Transaction ID: 38395447 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	_ , ' _ ` _ 	ic Radiologist Year-to-Date 1000.00	1000.00
SUBTOTAL of Receipts This Page (optional)		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Association	ation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Newell Dutton			Date of Receipt
Mailing Address 3400 Stratford Hills La	ne		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395448
Austin	TX	78746-4687	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupatio		7
iates		ic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Nabeel Farhataziz	l		Date of Receipt
Mailing Address 9908 Cinnabar Trl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395449
Austin	TX	78726-2425	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. David Feldman			Date of Receipt
Mailing Address Austin Radiological As: 10900 Stonelake Blvd S	soc Ste 250		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395450
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional))	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 56 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pe the name and address of any political committee sociation Political Action Committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Thomas Fletcher Mailing Address 2206 E Windsor Ro	ı	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78703-3119	Transaction ID: 38395451 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Dr. Patricia Gallagher Mailing Address 5005 Strass Dr		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing	State Zip Code TX 78731-5629	Transaction ID: 38395452 Amount of Each Receipt this Period
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	1000.00
Full Name (Last, First, Middle Initial) Dr. David Goldblatt Mailing Address PO Box 4099		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78765-4099	Transaction ID: 38395453 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify) ▼	Occupation Radiologist Aggregate Year-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional	l)	3000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 56 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Mark Gray			Date of Receipt
Mailing Address 3007 Stratford Dr			01 10 2011
City	State	Zip Code	Transaction ID: 38395454
Austin	TX	78746-4650	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupatio Radiolog		
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	- 53. vg.dic	1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Gunlock			Date of Receipt
Mailing Address 316 Dawn River Cv			0 1 1 0 2 0 1 1
City	State	Zip Code	Transaction ID: 38395455
Austin	TX	78732-1989	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Saman Hassibi			Date of Receipt
Mailing Address 1805 West 32nd St			M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 38395456
Austin	TX	78703-1304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Univ of TX Southwestern Med Ctr	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persor ng the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Larry Hill		Date of Receipt
Mailing Address Austin Radiologica PO Box 4099	al Assoc	M M / D D / Y Y Y Y Y O 1 1 0 2 0 1 1
City	State Zip Code	Transaction ID: 38395457
Austin	TX 78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Ronald Hoelscher		Date of Receipt
Mailing Address 4601 Elohi Dr	0 1 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 38395458
Austin	TX 78746-1642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. John Hogg		Date of Receipt
Mailing Address 1404 Wild Cat Ho	lw	0 1 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 38395459
Austin	TX 78746-3622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Associates	Occupation Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/56 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jody Hooten			Date of Receipt
Mailing Address 5709 Hero Dr			M M / D D / Y Y Y Y Y O D D / 2011
City Austin	State TX	Zip Code 78735-6259	Transaction ID: 38395460 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70700 0200	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Connie Hsu			Date of Receipt
Mailing Address Austin Radiological 10900 Stonelake Bl			0 1 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State TX	Zip Code 78759-5873	Transaction ID: 38395461
FEC ID number of contributing federal political committee.	C	70733-3073	Amount of Each Receipt this Period
Name of Employer Austin Radiological Assoc-	Occupation	n ic Radiologist	
iation Receipt For:	_ , '	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. Shaheen Hussaini			Date of Receipt
Mailing Address 1702 Pease Rd			0 1 1 0 2 0 1 1
City	State	Zip Code	Transaction ID: 38395462
Austin	TX	78703-3403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates		ic Radiologist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
Other (specify)		1000.00	

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 56 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)			n for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Ass	ociation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kent Ibanez			Date of Receipt
Mailing Address 10900 Stoneland Bl	vd Ste 250		01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395463
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation	c Radiologist	
iates Receipt For:	_ ' ' 	Year-to-Date Vear-to-Date	\dashv
Primary General Other (specify) ▼	Aggregate	1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Jaimes			Date of Receipt
Mailing Address 2110 Griswold Ln			0 1 1 0 2 0 1 1
City	State	Zip Code	Transaction ID: 38395464
Austin	TX	78703-3010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Ravi Jhaveri			Date of Receipt
Mailing Address Austin Radiological 10900 Stonelake Bh			M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 38395465
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnosti	n c Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	33 13	1000.00	
SUBTOTAL of Receipts This Page (optional			3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 56 (check only one) X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology A	ng the name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Charles E. Johnson Mailing Address 13337 Brightsky (Overlook		Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
City Austin FEC ID number of contributing	State TX	Zip Code 78732-2393	Transaction ID: 38395466 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	Occupation Diagnostic	Radiologist /ear-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. Gregory Karnaze Mailing Address Austin Radiologic 10900 Stonelake		Zip Code	Date of Receipt M
Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For:		78759-5873 Radiologist /ear-to-Date ▼	Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. John Kish Mailing Address 3608 Travis Coun	try Circle	1000.00	Date of Receipt
City Austin FEC ID number of contributing federal political committee.	State TX	Zip Code 78735-6106	Transaction ID: 38395469 Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Radiologist /ear-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 56 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Brandon Langlinais			Date of Receipt
Mailing Address 707 North Tumbleweed	d Trail		M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 38395470
Austin	TX	78733-3240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation		7
iates Receipt For:		c Radiologist	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Lava	1		Date of Receipt
Mailing Address 4701 Ridge Oak Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395471
Austin	TX	78731-4723	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnosti	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. John Leahy			Date of Receipt
Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S	sociation Ste 100		M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 38395472
Austin	TX	78759-5826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnosti	c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 56 (check only one) X
,	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation Politic	al Action Committee	
۱.	Full Name (Last, First, Middle Initial) Dr. David Leake	D.		Date of Receipt
	Mailing Address 6114 Mountainclimb			01 10 2011
	City Austin	State TX	Zip Code 78731-3824	Transaction ID: 38395473 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70701 0021	1000.00
	Name of Employer Austin Radiological Assoc- iates	Occupation	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Marcus Lines Mailing Address 7 Ehrlich Road	_ L		Date of Receipt
				01 10 2011
	City Austin	State TX	Zip Code 78746-3110	Transaction ID: 38395474 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70740 0110	1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Dr. Gael Joan Lonergan			Date of Receipt
	Mailing Address 9008 Bell Mountain D	DR		0 1 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 38395475
	Austin FEC ID number of contributing federal political committee.	C	78730-2701	Amount of Each Receipt this Period 1000.00
	Name of Employer Austin Radiological Assoc- iation	_, ' _ 	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			3000.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. John Manning			Date of Receipt
	Mailing Address Austin Radiological As 10900 Stonelake Blvd	ssoc Ste 100		01 10 2011
	City	State	Zip Code	Transaction ID: 38395476
	Austin	TX	78759-5826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
- З.	Full Name (Last, First, Middle Initial) Dr. Michael Martin			Date of Receipt
	Mailing Address 4201 Green Cliffs Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 38395477
	Austin	TX	78746-1242	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Anthony Masaryk			Date of Receipt
	Mailing Address Austin Radiological As PO Box 4099	SSOC		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 38395478
	Austin	TX	78765-4099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Radiolog		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
ſ	SUBTOTAL of Receipts This Page (optional)			3000.00
\vdash				

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 56 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	not be sold or used by any persol dress of any political committee to	
American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Curtis McClurg			Date of Receipt
Mailing Address 2607 Stratford Dr			01 10 2011
City	State	Zip Code	Transaction ID: 38395479
Austin	TX	78746-4622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation	n ic Radiologist	
iates Receipt For:		Year-to-Date ▼	_
Primary General Other (specify) ▼	riggrogate	1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark McLelland			Date of Receipt
Mailing Address PO Box 4099			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395480
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. lan McLoughlin			Date of Receipt
Mailing Address 3120 Wild Canyon	Loop		0 1 1 0 2 0 1 1
City	State	Zip Code	Transaction ID: 38395481
Austin	TX	78732-1948	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For:		Year-to-Date ▼	7
Primary General Other (specify) ▼	35 0	1000.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 56 (check only one) X
or for commercial purposes, other than usi	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology A	association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Gunar G. Mezaraups		Date of Receipt
Mailing Address Austin Radiologic PO Box 4099	cal Assoc	0 1
City	State Zip Code	Transaction ID: 38395482
Austin	TX 78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Robert Milman		Date of Receipt
Mailing Address 6409 Williams Ri	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 38395483
Austin	TX 78731-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Elizabeth Moorehead		Date of Receipt
Mailing Address 4308 Palladio Dr		01 10 2011
City Austin	State Zip Code TX 78731-1801	Transaction ID: 38395484
FEC ID number of contributing	C 78731-1801	Amount of Each Receipt this Period 1000.00
federal political committee.		
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optic	onal)	3000.00

ation copied from such Reports and hercial purposes, other than using the DF COMMITTEE (In Full) and College of Radiology Assortine (Last, First, Middle Initial) in Naples Address Austin Radiological APO Box 4700 number of contributing political committee. Employer Radiological Assoctions (Specify) The (Last, First, Middle Initial) in Nichols Address 4507 River Wood Countributing contributions	e name and address ciation Political Association State TX C Occupation Diagnostic Aggregate Y	ess of any political committee	Date of Receipt Date of Receipt Transaction ID: 38395486 Date of Receipt Date of Receipt Transaction ID: 38395486
an College of Radiology Associate (Last, First, Middle Initial) Naples Address Austin Radiological A PO Box 4700 number of contributing political committee. Employer Radiological Assoc- For: imary General her (specify) ne (Last, First, Middle Initial) Nichols Address 4507 River Wood Co	State TX C Occupation Diagnostic Aggregate Y	Zip Code 78765-4700 Radiology /ear-to-Date 1000.00	Date of Receipt Date of Receipt Date of Rec
Address Austin Radiological A PO Box 4700 number of contributing political committee. Employer Radiological Assoctionary General her (specify) The (Last, First, Middle Initial) Address 4507 River Wood Co	State TX C Occupation Diagnostic Aggregate Y	78765-4700 Radiology /ear-to-Date ▼ 1000.00	Date of Receipt Date of Receipt Date of Rec
PO Box 4700 number of contributing political committee. Employer Radiological Assoctionary General her (specify) ne (Last, First, Middle Initial) Nichols Address 4507 River Wood Co	State TX C Occupation Diagnostic Aggregate Y	78765-4700 Radiology /ear-to-Date ▼ 1000.00	Date of Receipt Date of Receipt Date of Rec
Employer Radiological Assoc- For: imary General her (specify) ne (Last, First, Middle Initial) d Nichols Address 4507 River Wood Co	Occupation Diagnostic Aggregate Y	78765-4700 Radiology /ear-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Employer Radiological Assoc- For: imary General her (specify) ne (Last, First, Middle Initial) d Nichols Address 4507 River Wood Co	Occupation Diagnostic Aggregate Y	Radiology ∕ear-to-Date ▼ 1000.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Employer Radiological Assoc- For: imary General her (specify) ne (Last, First, Middle Initial) d Nichols Address 4507 River Wood Co	Occupation Diagnostic Aggregate Y	/ear-to-Date ▼ 1000.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
For: imary General her (specify) ne (Last, First, Middle Initial) d Nichols Address 4507 River Wood Co	Diagnostic Aggregate Y	/ear-to-Date ▼ 1000.00	0 1 1 0 2 0 1 1 Transaction ID: 38395486
imary General her (specify) ne (Last, First, Middle Initial) d Nichols Address 4507 River Wood Co	Aggregate Y urt State	/ear-to-Date ▼ 1000.00	0 1 1 0 2 0 1 1 Transaction ID: 38395486
imary General her (specify) ne (Last, First, Middle Initial) d Nichols Address 4507 River Wood Co	urt	1000.00	0 1 1 0 2 0 1 1 Transaction ID: 38395486
Address 4507 River Wood Co	State	Zip Code	0 1 1 0 2 0 1 1 Transaction ID: 38395486
	State	Zip Code	0 1 1 0 2 0 1 1 Transaction ID: 38395486
number of contributing		Zip Code	
number of contributing	TX		
number of contributing		78731-4518	Amount of Each Receipt this Period
political committee.	С		1000.00
Employer Radiological Assoc-	Occupation Diagnostic	: Radiologist	
		rear-to-Date ▼	
imary ☐ General her (specify) ♥	0 0	1000.00	
ne (Last, First, Middle Initial) a Pennington			Date of Receipt
Address PO Box 160610			M M / D D / Y Y Y Y Y Y Y Y 1 1 0 2 0 1 1
	State	Zip Code	Transaction ID: 38395487
	TX	78716-0610	Amount of Each Receipt this Period
number of contributing olitical committee.	С		1000.00
Employer Radiological Assoc-	Occupation Diagnostic	: Radiologist	
For:	_ 	z	
imoru Conorol	0 0	1000.00	
lmary General her (specify) ♥			
	Employer Radiological Assoc- For: imary General	rumber of contributing political committee. Employer Radiological Assoction Diagnostic For: Image: Aggregate Visite of Committee and Committ	C C C C C C C C C C C C C C C C C C C

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 56 (check only one) X				
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements and address of any political committee to					
American College of Radiology Asso	ociation Political Action Committee					
Full Name (Last, First, Middle Initial) Dr. F Pfeifer, II	Dr. F Pfeifer, II					
Mailing Address 8029 Muley Dr		01 10 2011				
City	State Zip Code	Transaction ID: 38395488				
Austin	TX 78759-6900	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	7				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	1000.00					
Full Name (Last, First, Middle Initial) Dr. Mark Poag	<u> </u>	Date of Receipt				
Mailing Address 15401 Bat Hawk Cir		01 / 10 / 2011				
City	State Zip Code	Transaction ID: 38395489				
Austin	TX 78738-6865	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist					
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General Other (specify) ▼	1000.00]				
Full Name (Last, First, Middle Initial) Dr. Wilbert Polson	Date of Receipt					
Mailing Address 2403 Camino Alto	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID: 38395490				
Austin	TX 78746-2406	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	1				
□ Other (Specify) ▼		1				
		3000.00				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 29 / 56 (check only one) X 11a	
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated the NAME of College of Radiology	e name and address	of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Dr. Russell Putnam Mailing Address 12243 Trautwein Rd City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)			Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 0 2 0 1 1 Transaction ID: 38395491 Amount of Each Receipt this Period 1000.00	
Full Name (Last, First, Middle Initial) Dr. Yvonne Queralt Mailing Address Austin Radiological As 10900 Stonelake Blvd City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)	Ste 100 State		Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 0 2 0 1 1 Transaction ID: 38395492 Amount of Each Receipt this Period 1000.00	
Full Name (Last, First, Middle Initial) Dr. Murali Ranjithan Mailing Address 1115 Kinney Ave Apt City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	State 2		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 (optional) .			3000.00	

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 56 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Andrew Reifsnyder			Date of Receipt
Mailing Address Austin Radiological A 10900 Stonelake Blvo	ssoc Ste A250		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395494
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Richards			Date of Receipt
Mailing Address Austin Radiological A PO Box 4099	SSOC		01 / 10 / 2011
City	State	Zip Code	Transaction ID: 38395495
Austin FEC ID number of contributing	TX	78765-4099	Amount of Each Receipt this Period 1000.00
federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Radiolog		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. Dan Richardson			Date of Receipt
Mailing Address 8616 Mendocino Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395496
Austin	TX	78735-1423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Austin Radiological Assoc- iation	_	ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	1		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 56 (check only one) X	
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to ssociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Dr. William Rodriguez Mailing Address 1036 Liberty Park	Dr Apt 53	Date of Receipt M M D D Y Y Y Y Y Y Y Y	
City Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78746-7025	Transaction ID: 38395497 Amount of Each Receipt this Period 1000.00	
Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologists Aggregate Year-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) Dr. John Rutledge Mailing Address Austin Radiologic PO Box 4099		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 Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78765-4099	Transaction ID: 38395593 Amount of Each Receipt this Period 1000.00	
Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00		
Full Name (Last, First, Middle Initial) Dr. Amy Salinas Mailing Address 2504 Keating Ln		Date of Receipt	
City Austin FEC ID number of contributing federal political committee.	State Zip Code TX 78703-2318	Transaction ID: 38395594 Amount of Each Receipt this Period 1000.00	
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optic	nal)	3000.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the Cricck Grilly Gric)
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be sold or used by the name and address of any political co	r any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Rodney Schmidt		Date of Receipt
Mailing Address 1938 Holly Hill Dr	Apt 13	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 38395595
Austin	TX 78746-7653	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	50 0	-1-1
Other (specify)	100	0.00
Full Name (Last, First, Middle Initial) Dr. Rajeev Shah		Date of Receipt
Mailing Address 1907 Lakeshore D		0 1 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 38395596
Austin	TX 78746-2904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) Dr. Sandeep Shah	Date of Receipt	
Mailing Address 7804 Texas Plume	0 1 1 0 2 0 1 1	
City	State Zip Code	Transaction ID: 38395597
Austin	TX 78759-6030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	100	0.00
		3000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 56 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and the commercial purposes.	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Shaw Mailing Address 10900 Stonelake Blvd	d Ste 250A		Date of Receipt
City	State TX	Zip Code	0 1 1 0 2 0 1 1 Transaction ID: 38395829
Austin FEC ID number of contributing federal political committee.	C	78759-5795	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	<u>-</u> -	n ic Radiologist Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Sheneman Mailing Address 10703 Winchelsea Dr			Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395831
Austin FEC ID number of contributing federal political committee.	C	78750-4039	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iates	,	ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Swanson			Date of Receipt
Mailing Address 1104 Blanco St			M M / D D / Y Y Y Y Y O D D / 2 0 1 1
City	State	Zip Code	Transaction ID: 38395833
Austin FEC ID number of contributing federal political committee.	C	78703-4920	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iation	_ · · · ·	ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	1		3000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 56 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Dr. Ghulam Thaver	Date of Receipt		
	Mailing Address 7950 N Stadium Dr Ap	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 38395834
	Houston FEC ID number of contributing federal political committee.	C	77030-4420	Amount of Each Receipt this Period 1000.00
	Name of Employer Austin Radiological Associates Receipt For: ☐ Primary ☐ General Other (specify) ▼	,	tic Radiologist e Year-to-Date ▼ 1000.00	
. –	Full Name (Last, First, Middle Initial) Dr. Gabrielle Theriault Mailing Address 402 Vale St	Date of Receipt		
	City	0 1 1 0 2 0 1 1 Transaction ID: 38395835		
	Rollingwood	State TX	Zip Code 78746-5731	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Dr. Eugene Tong	Date of Receipt		
	Mailing Address 11405 Cedarcliffe Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 38395866
	Austin	TX	78750-3612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	, ' 	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35/56 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Anthony Trevino			Date of Receipt
Mailing Address 6712D Valburn Dr	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State TX	Zip Code	Transaction ID: 38395867
Austin FEC ID number of contributing federal political committee.	C	78731-1802	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Simon Trubek Mailing Address 5523 Wigton Rd	-		Date of Receipt
City	State	Zip Code	0 1 1 0 2 0 1 1 Transaction ID: 38395868
Houston	TX	77096-4007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupatio Diagnost	n ic Radiologist	
<u>iation</u> Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. Binh Truong	Date of Receipt		
Mailing Address Austin Radiological PO Box 4099	M M / D D / Y Y Y Y Y O D D / 2011		
City	State	Zip Code 78765-4099	Transaction ID: 38395869
Austin TX FEC ID number of contributing federal political committee.		76765-4099	Amount of Each Receipt this Period
Name of Employer Austin Radiological Assoc- iates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	.0		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 56 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politic	al Action Committee	
/			
Full Name (Last, First, Middle Initial) Dr. John Williams			Date of Receipt
Mailing Address 2902 Clearview Dr			M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 38395870
Austin	TX	78703-2847	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupatio	n	
Austin Radiological Assoc- iates	Diagnost	ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. J Andrew Andrew Williamson			Date of Receipt
Mailing Address Austin Radiological Ass PO Box 4700	sociation		M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 38395897
Austin	TX	78765-4700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. James P. Willis	Date of Receipt		
Mailing Address 139 Birnam Wood Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38395898
Austin	TX	78746-4500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 56 (check only one) X 11a
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Politic	al Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Mary Winsett			Date of Receipt
	Mailing Address 3405 Northwood Cir			01 10 7 2011
	City Austin	State TX	Zip Code 78703-1004	Transaction ID: 38395899 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Charles Wiseman	1		Date of Receipt
	Mailing Address Austin Radiological A 10900 Stonelake Blvc			0 1
	City Austin	State TX	Zip Code 78759-5873	Transaction ID: 38395900
	FEC ID number of contributing federal political committee.	C	76/39-36/3	Amount of Each Receipt this Period
	Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. Stephen Young			Date of Receipt
	Mailing Address 7122 Las Ventanas D	r		01 10 2011
	City	State	Zip Code	Transaction ID: 38395901
	Austin FEC ID number of contributing federal political committee.	C	78731-1814	Amount of Each Receipt this Period 1000.00
	Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		3000.00

any information copied from such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes, other than using the such Reports and or for commercial purposes.		13 14 15 16 1
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Nancy A. Ellerbroek		Date of Receipt
Mailing Address Valley Radiotherapy 1500 Rosecrans Ave		0 1 1 4 2 0 1 1
City	State Zip Code	Transaction ID: 38396205
Manhattan Beach	CA 90266-3754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Valley Radiology Associat- es	Occupation Radiation Oncologist	7
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Margaret Bazarnic		Date of Receipt
Mailing Address West Reading Radio 301 S 7th Ave Ste 1		0 1
City	State Zip Code	Transaction ID: 38396207
West Reading	PA 19611-1422	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer West Reading Radiology As- soc	Occupation Diagnostic Radiologist	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Weissberg		Date of Receipt
Mailing Address 1131 Country Hills [)r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 38396208
Santa Ana	CA 92705-2386	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MRD, Inc.	Occupation Diagnostic Radiologist	7
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sci for each category Detailed Summa	of the
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and S or for commercial purposes, other than using the S or for commercial purposes.	e name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Stuart Braverman Mailing Address 232 Constance Ln City Santa Barbara FEC ID number of contributing federal political committee. Name of Employer Santa Barbara Radiology Med Group, Inc Receipt For: Primary General Other (specify)	State Zip Code CA 93105-3520 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Dr. Julia Muskie Mailing Address 3909 Underwood St City Chevy Chase FEC ID number of contributing federal political committee. Name of Employer Drs. Groover, Christie and Merritt Receipt For: Primary General Other (specify)	State Zip Code MD 20815-5029 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D D / Y Y Y Y Y O 1 1 4 2 0 1 1 Transaction ID: 38396244 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Dr. W Dennis Foley Mailing Address Froedtert Hospital Eas 9200 W Wisconsin Av City Milwaukee FEC ID number of contributing federal political committee. Name of Employer Medical College of Wisconsin Receipt For: Primary General Other (specify)	State Zip Code WI 53226-3522 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 56 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee t sociation Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Lenobel Mailing Address 8030 Peregrine Ln City Cincinnati FEC ID number of contributing federal political committee. Name of Employer Professional Radiology	State Zip Code OH 45243-2714 C Occupation Diagnostic Radiologist	Date of Receipt O 1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Dumler Mailing Address 15910 Arkdale Ct		Date of Receipt Date of Receipt
City Spring FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 77379-6806 C Occupation	Transaction ID: 38396252 Amount of Each Receipt this Period 500.00
Houston Radiology Associates Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Gary Spoto Mailing Address 14151 Palisades D	rive	Date of Receipt
City Poway FEC ID number of contributing federal political committee.	State Zip Code CA 92064-3841	0 1 1 4 2 0 1 1 Transaction ID: 38396253 Amount of Each Receipt this Period 1000.00
Name of Employer Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	1)	1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 56 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any person dress of any political committee to	
American College of Radiology Associ	iation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Thomas Pugh, JR			Date of Receipt
Mailing Address 3547 Lakeshore Dr			0 1 1 4 2 0 1 1
City	State	Zip Code	Transaction ID: 38396254
Kingsport	TN	37663-3372	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Blue Ridge Radiology	Occupation	n ic Radiologist	
Receipt For:	,	e Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate	300.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Thompson	•		Date of Receipt
Mailing Address PO Box 1296			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38396255
<u>Dyersburg</u>	TN	38025-1296	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer Independent Radiology Ass- ociates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Elizabeth McFarland			Date of Receipt
Mailing Address 1833 Winter Run			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38396256
Chesterfield	MO	63017-5674	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Center of Diagnostic Imag- ing	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			850.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42/56 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Asso	ociation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kambiz Shamlou			Date of Receipt
Mailing Address 1507 Oak Forest Dr		7: 0.1	01 15 2011
City	State	Zip Code	Transaction ID: 38433463
Ormond Beach	FL	32174-3409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates	Occupation Diagnost	n c Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	35 15411	250.00	
Full Name (Last, First, Middle Initial) Dr. Douglas Wester, JR			Date of Receipt
Mailing Address 2405 Covemont Dr S	SE		0 1 1 5 2 0 1 1
City	State	Zip Code	Transaction ID: 38433464
<u>Huntsville</u>	AL	35801-2260	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Radiology Associates of Huntsville	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Michael George			Date of Receipt
Mailing Address 1620 John St S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38433519
Salem	OR	97302-5110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Salem Radiology Consultan- ts	Occupation Diagnosti	c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 56 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Rickards Mailing Address 1266 NW Country:	side Ct		Date of Receipt
City McMinnville FEC ID number of contributing	State OR	Zip Code 97128-9528	0 1 1 5 2 0 1 1 Transaction ID: 38433521 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer McMinnville Imaging Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 250.00	230.00
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen Mailing Address 6612 Cliffbrook Dr			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	Transaction ID: 38434208	
<u>Dallas</u>	TX	75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.34
Name of Employer Southwest Imaging & Inter- ven specialis Receipt For: Primary Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 208.34	
Full Name (Last, First, Middle Initial) Dr. Kevin Smith			Date of Receipt
Mailing Address Regional Diagnost 1406 6th Ave N	ic Radiology		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38434222
Saint Cloud FEC ID number of contributing federal political committee.	C	56303-1900	Amount of Each Receipt this Period 208.34
Name of Employer Regional Diagnostic Radio- logy Receipt For:	- '	n ic Radiologist Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.34]
SUBTOTAL of Receipts This Page (option	nal)		666.68

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 56 (check only one) X
or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
F	ull Name (Last, First, Middle Initial) br. Scott Truhlar			Date of Receipt
_	failing Address 221 E College St #120			01 21 2011
	ity owa City	State IA	Zip Code	Transaction ID: 38437205
F	EC ID number of contributing ederal political committee.	C	52240-1757	Amount of Each Receipt this Period 2500.00
<u>e</u>	lame of Employer ladiologic Medical Servic- s, P.C. leceipt For: Primary General Other (specify)	, i — -	tic Radiologist e Year-to-Date ▼ 2500.00	
3. <u>D</u>	ull Name (Last, First, Middle Initial) or. Mark Fritze failing Address 804 Bramerton St			Date of Receipt
_				01 21 2011
	hity Andover	State KS	Zip Code 67002-9241	Transaction ID: 38437258
F	EC ID number of contributing ederal political committee.	C	07002-3241	Amount of Each Receipt this Period 250.00
N K	lame of Employer ansas Imaging Center	Occupatio Diagnost	n tic Radiologist	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) br. George Howard, III			Date of Receipt
N	failing Address Onslow Radiology Ctr 299 Doctors Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity	State	Zip Code	Transaction ID: 38437259
F	acksonville EC ID number of contributing ederal political committee.	NC C	28546-6321	Amount of Each Receipt this Period 500.00
N C	lame of Employer Inslow Radiology Center	Occupatio Diagnost	n tic Radiologist	
R	ecceipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 500.00	
SUE	BTOTAL of Receipts This Page (optional)			3250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports an	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 45 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Rinaldi Mailing Address 9756 Cobblestone D)r	Date of Receipt 0 1 2 1 2 0 1 1
City Clarence	State Zip Code NY 14031-2443	Transaction ID: 38437262 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Chesapeake General Hospit- al Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Edward Farmlett Mailing Address 33 Round Bay Rd		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	Transaction ID: 38437268
Laconia FEC ID number of contributing federal political committee.	NH 03246-2650	Amount of Each Receipt this Period 250.00
Name of Employer Seacoast Radiology, P.A. Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Huss Mailing Address 4838 W Corsican P	ine Dr	Date of Receipt 0 1 2 1 2 0 1 1
City	State Zip Code	Transaction ID: 38437270
Appleton FEC ID number of contributing federal political committee.	WI 54913-6509	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Appleton Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional	l)	750.00
TOTAL This Period (last page this line num)	per only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 56 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Hector Ramirez, JR Mailing Address 7179 SE 94th Ln City Ocala FEC ID number of contributing federal political committee. Name of Employer Advanced Radiology Consulting Receipt For: Primary General Other (specify)	State Zip Code FL 34472-9245 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y O 1 2 1 2 0 1 1 Transaction ID: 38437564 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Joshua Sapire Mailing Address 91 Deer Run Rd City Woodbridge FEC ID number of contributing federal political committee. Name of Employer Advanced Radiology Consultants Receipt For: Primary General	State Zip Code CT 06525-1908 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 1 2 0 1 1 Transaction ID: 38437565 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Bruce Shevlin Mailing Address 3905 Stone Bridge F City Springfield FEC ID number of contributing federal political committee. Name of Employer University Radiologists	State Zip Code IL 62707-8160 C Occupation	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Radiation Oncologist Aggregate Year-to-Date ▼ 250.00	750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 56 (check only one) X
or fo	information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
F	Full Name (Last, First, Middle Initial) Dr. Mandar Pattekar			Date of Receipt
_	Mailing Address 3121 W War Memoria			01 21 2011
	City Peoria	State IL	Zip Code	Transaction ID: 38437625
F	FEC ID number of contributing ederal political committee.	C	61615-2617	Amount of Each Receipt this Period 250.00
<u> </u>	Name of Employer Central Illinois Radiology Association Receipt For: Primary General Other (specify)	, <u> </u>	n ic Radiologist e Year-to-Date ▼ 250.00	
B. <u> </u>	Full Name (Last, First, Middle Initial) Dr. Gary Dillehay Mailing Address 5555 N Sheridan Rd, A	Apt 1402		Date of Receipt
-	Dity	State	Zip Code	01 21 2011
	Chicago	IL	60640-1636	Transaction ID: 38437626 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C		1500.00
<u>1</u>	Name of Employer Northwestern Medical Facu- ty Foundatio Receipt For:	, '	n ic Radiologist y Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	1500.00]
	Full Name (Last, First, Middle Initial) Dr. Kate Feinstein			Date of Receipt
_	Mailing Address University of Chicago I 5841 S Maryland Ave,		t	01 21 2011
	Dity	State	Zip Code	Transaction ID: 38437627
F	Chicago FEC ID number of contributing ederal political committee.	C	60637-1447	Amount of Each Receipt this Period 600.00
\$	Name of Employer Jniversity of Chicago Hos- pital	,	ic Radiologist	
F	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
SU	BTOTAL of Receipts This Page (optional)	1		2350.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 56 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	is and Statements may not be sold or used by any personsing the name and address of any political committee to Association Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. W Ross Stevens Mailing Address Reliant Radiolog 23309 Robbins		Date of Receipt M M D D 2 1 2 0 1 1
Springfield FEC ID number of contributing federal political committee.	IL 62704	Amount of Each Receipt this Period 250.00
Name of Employer Reliant Radiology Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00]
Full Name (Last, First, Middle Initial) Dr. Charles Tate, III Mailing Address 1090 SW 15th S	St	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	Transaction ID: 38437631
Boca Raton	FL 33486-6858	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiologists of N. Ft. La- uderdale, PA Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Dr. David Sparks		Date of Receipt
Mailing Address 131C W Gallow	<u>, </u>	0 1 2 1 2 0 1 1
City	State Zip Code TN 37659-3558	Transaction ID: 38437633
Jonesborough FEC ID number of contributing federal political committee.	TN 37659-3558	Amount of Each Receipt this Period 1000.00
Name of Employer Blue Ridge Radiology, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUPTOTAL of Possints This Page (ent	ional)	1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 56 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Mark Malley			Date of Receipt
Mailing Address 630 NW Englewood Ro	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38437635
Kansas City	MO	64118-3973	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Imaging for Women LLC	Occupation Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)			Date of Pagaint
Dr. Charles Tate, III Mailing Address 1090 SW 15th St			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38609479
Boca Raton	FL	33486-6858	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Radiologists of N. Ft. La- uderdale. PA	Occupation	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Dr. William Herrington			Date of Receipt
Mailing Address 1110 Laurel PI			01 31 2011
City	State	Zip Code	Transaction ID: 38609493
Athens	GA	30606-5789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer Athens Radiology Associat- es	Occupation Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 625.00	
SUBTOTAL of Receipts This Page (optional)			1375.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 56 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation Politic	cal Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. James Webb			Date of Receipt
	Mailing Address 9132 E 101st PI			01 31 2011
	City Tulsa	State OK	Zip Code 74133-6912	Transaction ID: 38609583
	FEC ID number of contributing federal political committee.	C	74133-0912	Amount of Each Receipt this Period 250.00
	Name of Employer Univ of Oklahoma Health Sci Ctr	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
_ В.	Full Name (Last, First, Middle Initial) Dr. Michael Workman	1		Date of Receipt
	Mailing Address 3257 W Windward Pa	ass		01 31 2011
	City	State	Zip Code	Transaction ID: 38751208
	Springfield FEC ID number of contributing federal political committee.	MO C	65810-1965	Amount of Each Receipt this Period 300.00
	Name of Employer Springfield Neurological and Spine	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
_ C.	Full Name (Last, First, Middle Initial) Dr. Gregory Albright			Date of Receipt
	Mailing Address 121 N Monroe St Apt	Ph1		M M / D D / Y Y Y Y Y Y Y X Y X Y X Y X Y X Y X Y
	City	State	Zip Code	Transaction ID: 38751209
	Tallahassee FEC ID number of contributing federal political committee.	FL C	32301-1532	Amount of Each Receipt this Period 1000.00
	Name of Employer Radiology Associates of Tallahassee, P		tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			1550.00
r	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 56 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As:	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Durden Mailing Address Radiology Assoc o	f Tallahasasa		Date of Receipt
PO Box 12219 City	State	Zip Code	0 1 3 1 2 0 1 1 Transaction ID: 38751210
Tallahassee FEC ID number of contributing federal political committee.	FL C	32317-2219	Amount of Each Receipt this Period 1000.00
Name of Employer Radiology Associates of Tallahassee, P Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Sergio Ginaldi Mailing Address Rad Assoc of Talla 1600 Phillips Rd	ahassee		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	Transaction ID: 38751211
Tallahassee	FL	32308-5304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Radiology Associates of Tallahassee, P Receipt For: Primary General Other (specify)		n ic Radiologist e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen	L		Date of Receipt
Mailing Address 6612 Cliffbrook Dr			0 1 3 0 2 0 1 1
City	State	Zip Code	Transaction ID: 38752134
<u>Dallas</u> FEC ID number of contributing federal political committee.	C	75254-8613	Amount of Each Receipt this Period 10.00
Name of Employer Southwest Imaging & Inter- ven specialis Receipt For:		n ic Radiologist • Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	218.34	
SUBTOTAL of Receipts This Page (options	al)		2010.00

Dr. Eva Statz

Gloucester

sociates Receipt For:

City

A.

В.

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

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

Name of Employer Commonwealth Radiology As-

Other (specify)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

Name of Employer New England Medical Center

Other (specify)

federal political committee.

General

General

C

Occupation

Diagnostic Radiologist

Aggregate Year-to-Date

500.00

federal political committee.

Primary

Dr. Julie Stiles

City

Boston

Receipt For:

Primary

PAGE 52/56 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. American College of Radiology Association Political Action Committee Date of Receipt Mailing Address 14 Ocean Highlands 0.1 05 2011 Zip Code State Transaction ID: 39276810 MA 01930-5210 Amount of Each Receipt this Period 300.00 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 300.00 Date of Receipt Mailing Address 250 Beacon St Apt 5 0 1 05 2011 State Zip Code Transaction ID: 39276811 MA 02116-1203 Amount of Each Receipt this Period

		900.00
SUBTOTAL of Receipts This Page (optional)		800.00
TOTAL This Period (last page this line number only)	•	109741.68

500.00

	Use separate schedule(s)		FOR LINE (check only			NUMBER: PAGE 53 / 5						56
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	2	:3 !8b	24 280		25 29	
	y Information copied from such Reports and State for commercial purposes, other than using the na											;
	NAME OF COMMITTEE (In Full) American College of Radiology Associati	on Political Action Comm	ittee									
<u></u>	Full Name (Last, First, Middle Initial) Matheson For Congress					Date	of Disl	ourse				
	Mailing Address P.O. Box 521048 Suite A					0 ^M 1	M /	^D 2	8 /	ž	0 1 1	Y
	City Salt Lake City	State Zip Code UT 84152				Amou	ınt of E	Each	Disburs			-
	Purpose of Disbursement			01 ⁻	ı,					50	00.00	
	Candidate Name Rep. James D. Matheson		ı	ateg Typ	-							
	X	sement For: 2012 Continuous Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) America's New Majority PAC						saction of Dist	ourse		35744		
	Mailing Address 228 S. WASHINGTON SUITE 115	STREET				0 ^M 1	M /	^D 0	^D /	Ý Ž	0 1 1	Y
	City ALEXANDRIA	State Zip Code VA 22314				Amou	ınt of E	Each	Disburs	semen	t this F	Period
	Purpose of Disbursement			01		L.				50	00.00	
	Candidate Name		ı	ateg Typ	ory/ e							
	Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼	•									
	Full Name (Last, First, Middle Initial) Becerra For Congress					Date	of Disl	ourse				V
	Mailing Address P.O. Box 261060					0 ^M 1	M /	^D 2	9 ′	, 2	0 1 1	<u> </u>
	City Los Angeles	State Zip Code CA 90026				Amou	ınt of E	Each	Disburs			-
	Purpose of Disbursement			01		L.				50	00.00	
	Candidate Name Rep. Xavier Becerra			ateg Typ								
	, <u>, , , , , , , , , , , , , , , , , , </u>	sement For: 2012 Other (specify)										
_	2.00.00.01											

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	check only	NUMBER: PAGE 54 / 56 / one) 22
ny Information copied from such Reports and State r for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)		by any person f	or the purpose of soliciting contributions
American College of Radiology Association	on Political Action Committ	ee	
Full Name (Last, First, Middle Initial) Tuesday Group PAC			Transaction ID: 38490101 Date of Disbursement
Mailing Address P.O. Box 40385			$\begin{bmatrix}\begin{smallmatrix}M&M\\0&1\end{smallmatrix}\end{bmatrix}^{M} \begin{bmatrix}\begin{smallmatrix}D&D\\2&6\end{smallmatrix}\end{bmatrix}^{M} \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}\end{bmatrix}^{Y}$
City Washington	State Zip Code DC 20016		Amount of Each Disbursement this Period
Purpose of Disbursement		011	3500.00
Candidate Name Tuesday Group PAC		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial) Tuesday Group PAC			Transaction ID: 38490255 Date of Disbursement
Mailing Address P.O. Box 40385			$\begin{bmatrix}\begin{smallmatrix}M&1&M\\0&1&\end{smallmatrix}\end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}D&2&D\\2&5\end{bmatrix} / \begin{bmatrix}\begin{smallmatrix}Y&&Y&Y&Y\\&2&0&1&1\end{smallmatrix}$
City Washington	State Zip Code DC 20016		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1500.00
Candidate Name Tuesday Group PAC		Category/ Type	
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Republican Main Street Partnership PAC			Transaction ID: 38490829 Date of Disbursement
Mailing Address c/o G&W 2201 Wiscon Suite 320	sin Ave. NW		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ D & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & O & 1 & 1 \end{bmatrix} $
City Washington	State Zip Code DC 20007		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2500.00
Candidate Name Republican Main Street Partnership PAC		Category/ Type	
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional	n		7500.00
Optional of Disputsements This Page (optional		<u>\</u>	1.500.00

SCHEDULE B (FEC FOI	,		rate schedule(s)			LINE k only	NUMBE one)	R:		PA	GE 5	55 / 56
TEMIZED DISBURSEME		Detailed S	ategory of the Summary Page		2 2	1b 7	22 28a	X 23	3b	24 28c		25 29
Any Information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full)												
American College of Radiolog	y Association F	Political <i>F</i>	Action Commi	ttee								
Full Name (Last, First, Middle Initia Great Land PAC)						Date	action of Disb	urseme			V - V
Mailing Address 607 14th Stu Suite 800	eet, NW						0 1		^D 2 6		20	1 1 °
City Washington	Sta D0		Zip Code 20005				Amou	nt of E	ach Dis	sburser		
Purpose of Disbursement					011		L.				2500	0.00
Candidate Name Great Land PAC					ategory Type	/						
Office Sought: House Senate President		ent For: rimary ther (spec	General									
State: District: Full Name (Last, First, Middle Initia	<u> </u>											
Benishek For Congress	,						Date	action of Disb	urseme			
Mailing Address 802 Pentoga	Trail						0 ^M 1	M /	26	/ Y	ž 0	11 °
City Crystal Falls	Sta Mi		Zip Code 49920				Amou	nt of E	ach Dis	sburser	nent t	his Pei
Purpose of Disbursement 2010 Primary Debt Retirement					011		L.				5000	0.00
Candidate Name Mr. Daniel Benishek					ategory Type	/						
Office Sought: X House Senate President		rimary ther (spec					2010 ent	Prima	ry Del	ot Ret	irem-	
State: MI District: 01 Full Name (Last, First, Middle Initia Rehberg For Congress	Primary D	iebi 2010	J				Date	action of Disb			808	
Mailing Address PO Box 159	7						0 ^M 1	M /	^D 2 6	/ Y	ž 0	1 1 °
City Helena	Sta M		Zip Code 59624				Amou	nt of E	ach Dis	sburser	nent t	his Pe
Purpose of Disbursement				Г	011	\exists	L.				4000	0.00
Candidate Name Rep. Dennis R. Rehberg				Ca	ategory Type	/						
Office Sought: X House Senate President		ent For: rimary ther (spec	2012 General		<u> </u>							
State: MT District: 01												
SUBTOTAL of Disbursements This F	age (optional)			<u></u>		<u> </u>			·	1	1500	0.00
TOTAL This Period (last page this lin	e number only)					_				.3	4000	0.00

SCHEDULE B (FEC Form 3X)		E NUMBER: PAGE 56 / 56
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page (check or 21b)	22 23 24 25 26 28a 28b 28c X 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) American College of Radiology Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 27025		Transaction ID: 38785245 Date of Disbursement O 1
•	State Zip Code VA 23261-7025	Amount of Each Disbursement this Period 1633.07
Candidate Name	Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼	Bank Fees
State: District:		

SUBTOTAL of Disbursements This Page (optional)	•	1633.07
TOTAL This Period (last page this line number only)	•	1633.07