

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AKSM Urology Political Action Committee 'AKSM Urology PAC'

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		252405.34
(b) Cash on Hand at Beginning of Reporting Period.....	252405.34	
(c) Total Receipts (from Line 19)	64805.00	64805.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	317210.34	317210.34
7. Total Disbursements (from Line 31).....	10734.83	10734.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	306475.51	306475.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AKSM Urology Political Action Committee 'AKSM Urology PAC'

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	64805.00	64805.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	64805.00	64805.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	64805.00	64805.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. 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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	64805.00	64805.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	64805.00	64805.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3034.83	3034.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3034.83	3034.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7700.00	7700.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(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 (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10734.83	10734.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10734.83	10734.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	64805.00	64805.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64805.00	64805.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3034.83	3034.83
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3034.83	3034.83

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Gregory Adey
Full Name (Last, First, Middle Initial)

Mailing Address 10 Bridle Path

City Falmouth State ME Zip Code 04105

FEC ID number of contributing federal political committee. **C**

Name of Employer Fore River Urology Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
01 / 12 / 2016
Transaction ID : AC6110B44F2FE4B28BCC

Amount of Each Receipt this Period
125.00

Memo Item
profit distribution deduction

B. Victor Altadonna
Full Name (Last, First, Middle Initial)

Mailing Address 1535 Littiz Pike

City Lancaster State PA Zip Code 17601

FEC ID number of contributing federal political committee. **C**

Name of Employer Lancaster Urological Group Occupation Urology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A8D65F50AED43449BB3F

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Victor Altadonna
Full Name (Last, First, Middle Initial)

Mailing Address 1535 Littiz Pike

City Lancaster State PA Zip Code 17601

FEC ID number of contributing federal political committee. **C**

Name of Employer Lancaster Urological Group Occupation Urology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
02 / 04 / 2016
Transaction ID : A36DAD9D360B34B27AD7

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Victor Altadonna
 Full Name (Last, First, Middle Initial)
 Mailing Address 1535 Littiz Pike
 City Lancaster State PA Zip Code 17601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Urological Group Occupation Urology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A193ED62D0CB84D21A98
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Roger Amigo
 Full Name (Last, First, Middle Initial)
 Mailing Address 9010 Mediterra Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Surgery and Gynecology Inc. Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A3D2179C173CA4109918
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Roger Amigo
 Full Name (Last, First, Middle Initial)
 Mailing Address 9010 Mediterra Place
 City Dublin State OH Zip Code 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Surgery and Gynecology Inc. Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A1D4BCB6E5B094123945
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Roger Amigo
Full Name (Last, First, Middle Initial)

Mailing Address 9010 Mediterra Place

City Dublin State OH Zip Code 43016

FEC ID number of contributing federal political committee. **C**

Name of Employer Surgery and Gynecology Inc. Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A6AE57BFB84524F60847

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Angelo Annaloro
Full Name (Last, First, Middle Initial)

Mailing Address 6475 Overton Street

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. **C**

Name of Employer Baton Rouge Urology Group Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A11B442C05DB94AA2944

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Annath Annamraju
Full Name (Last, First, Middle Initial)

Mailing Address 1029 Stay Lit Court

City Bellbrook State OH Zip Code 45305

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ABA71CA5D72EB43A99E5

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Annath Annamraju
 Full Name (Last, First, Middle Initial)
 Mailing Address 1029 Stay Lit Court
 City Bellbrook State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Springfield Urology Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AD66E2CEA89FB4B7FB82
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Annath Annamraju
 Full Name (Last, First, Middle Initial)
 Mailing Address 1029 Stay Lit Court
 City Bellbrook State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Springfield Urology Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AFD3C1A84700549C6B69
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Luis Argueso
 Full Name (Last, First, Middle Initial)
 Mailing Address 5316 E.ast Exeter Blvd
 City Phoenix State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatric Urology Associated Ltd. Occupation Urology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ABF90D7EA91F140D795F
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Philip C Aschi
Full Name (Last, First, Middle Initial)
Mailing Address 543 Shelterglen Ct

City Lebanon	State OH	Zip Code 45036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwestern Ohio Urology	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A3F0B5BB612D64D9EBC3

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Philip C Aschi
Full Name (Last, First, Middle Initial)
Mailing Address 543 Shelterglen Ct

City Lebanon	State OH	Zip Code 45036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwestern Ohio Urology	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : AA16591650E9C48CDAF8

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Philip C Aschi
Full Name (Last, First, Middle Initial)
Mailing Address 543 Shelterglen Ct

City Lebanon	State OH	Zip Code 45036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwestern Ohio Urology	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : AEA398972C2B7477F8A6

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert Bailey
Full Name (Last, First, Middle Initial)

Mailing Address 5105 East Exeter Blvd

City Phoenix State AZ Zip Code 85018

FEC ID number of contributing federal political committee. **C**

Name of Employer Pediatric Urology Associated Ltd. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A0B19AE634BAE4C0099D

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Scott Barkin
Full Name (Last, First, Middle Initial)

Mailing Address 973 El Cliff Drive

City Westerville State OH Zip Code 43081

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A77E3924D78D643E089C

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Scott Barkin
Full Name (Last, First, Middle Initial)

Mailing Address 973 El Cliff Drive

City Westerville State OH Zip Code 43081

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AB0B43AEDE98045C4851

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Scott Barkin
Full Name (Last, First, Middle Initial)

Mailing Address 973 El Cliff Drive

City Westerville State OH Zip Code 43081

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : A266194E714244A26AC2

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

B. Robert Barsky
Full Name (Last, First, Middle Initial)

Mailing Address 5 Southwood Drive

City Cherry Hill State NJ Zip Code 08003

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : A88EEFCA0C4248C4801

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

C. Edward Barton
Full Name (Last, First, Middle Initial)

Mailing Address 3525 Maxwell Court

City Bloomfield Hills State MI Zip Code 48301

FEC ID number of contributing federal political committee. **C**

Name of Employer Edward E. Barton MD PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A4219B3F47087400D9E5

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	585.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert Bates
Full Name (Last, First, Middle Initial)

Mailing Address 1468 High Pointe Drive

City Zeeland State MI Zip Code 49464

FEC ID number of contributing federal political committee. **C**

Name of Employer Holland Hospital Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A3D895749AA39474E988

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Jeffrey Becker
Full Name (Last, First, Middle Initial)

Mailing Address 20 Galloping Hill Rd

City Cherry Hill State NJ Zip Code 08003

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 08 / 2016
Transaction ID : A4B9F39415AB34063941

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

C. Jack Benson
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1475

City Carefee State AZ Zip Code 85377

FEC ID number of contributing federal political committee. **C**

Name of Employer Phoenix Urological Surgeions Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : AD657F6638DD34A61A2A

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Berstein
Full Name (Last, First, Middle Initial)

Mailing Address 25 Cameo Dr

City State Zip Code
Cherry Hill NJ 08003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Delaware Valley Urology, LLC Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 08 / 2016
Transaction ID : A595F00C963B548B602

Amount of Each Receipt this Period
250.00

Memo Item profit distribution deduction

B. Glenn Betrus
Full Name (Last, First, Middle Initial)

Mailing Address 2848 Bardamar Drive

City State Zip Code
Fort Gratiot MI 48059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Comprehensive Medical Center PLLC Urologist/Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A9C2989DFC20D4CAB804

Amount of Each Receipt this Period
250.00

Memo Item profit distribution deduction

C. Kevin Bigelow
Full Name (Last, First, Middle Initial)

Mailing Address 8925 East Ann Way

City State Zip Code
Scottsdale AZ 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Center for Urological Services Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A076E1EE08022424DB40

Amount of Each Receipt this Period
250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Gregor W. Blix
 Full Name (Last, First, Middle Initial)
 Mailing Address 4002 Lakeside Drive
 City Kalamazoo State MI Zip Code 49008
 Name of Employer Healthcare Midwest Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A17DA22357F8D4B4A94D
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. William Bloch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2756 Dale Avenue
 City Bexley State OH Zip Code 43209
 Name of Employer COUG Occupation MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A504CD7DE244B40AED2
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. William Bloch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2756 Dale Avenue
 City Bexley State OH Zip Code 43209
 Name of Employer COUG Occupation MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A5BE7F54F8B8641C2BED
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. William Bloch
Full Name (Last, First, Middle Initial)

Mailing Address 2756 Dale Avenue

City Bexley State OH Zip Code 43209

FEC ID number of contributing federal political committee. **C**

Name of Employer COUG Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A71B17AAF13C84E5A8F4

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Kenneth M. Blue III
Full Name (Last, First, Middle Initial)

Mailing Address 13719 Oakley Lane

City St. Francisville State LA Zip Code 70775

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Urology, LLC Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A6D5D7ADF37764369A87

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. John Boline
Full Name (Last, First, Middle Initial)

Mailing Address 7122 Fox Meadow Dr

City Hummelstown State PA Zip Code 17036

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology of Central PA Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AB097C18F6D8B4777A98

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paul Bombino
Full Name (Last, First, Middle Initial)

Mailing Address 11415 W. Yearling Road

City Peoria State AZ Zip Code 85383

FEC ID number of contributing federal political committee. **C**

Name of Employer Sun Valley Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A0734AFCBC9DE478E9F3

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

B. Irvin Bonder
Full Name (Last, First, Middle Initial)

Mailing Address 7 Old Wood Lane S

City Randolph State NJ Zip Code 07869

FEC ID number of contributing federal political committee. **C**

Name of Employer Garden State Urology Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AE9B1F949ABAA4839A93

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

C. Jason Bonslaver
Full Name (Last, First, Middle Initial)

Mailing Address 180 Tuscarora Dr

City York State PA Zip Code 17403

FEC ID number of contributing federal political committee. **C**

Name of Employer York Towne Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AADC660B716E44E58B3A

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jason Bonslaver
Full Name (Last, First, Middle Initial)
Mailing Address 180 Tuscarora Dr
City York State PA Zip Code 17403
FEC ID number of contributing federal political committee. **C**
Name of Employer York Towne Urology PC Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A177B46FAAB504A8EA8B
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Jason Bonslaver
Full Name (Last, First, Middle Initial)
Mailing Address 180 Tuscarora Dr
City York State PA Zip Code 17403
FEC ID number of contributing federal political committee. **C**
Name of Employer York Towne Urology PC Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AD833DEF89E7C4CFF888
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. James B. Bour
Full Name (Last, First, Middle Initial)
Mailing Address 2301 Lorraine Avenue
City Kalamazoo State MI Zip Code 49008
FEC ID number of contributing federal political committee. **C**
Name of Employer Healthcare Midwest Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A32A7D1988EAA40A1A84
Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Emmett Boyle Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7860 Old Sycamore Lane

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genito - Urinary Surgeon, Inc. Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt
01 / 12 / 2016

Transaction ID : A749A430BDC A444B0823

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

B. Emmett Boyle Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7860 Old Sycamore Lane

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genito - Urinary Surgeon, Inc. Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt
02 / 04 / 2016

Transaction ID : ABE9BDED416F245B09D4

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

C. Emmett Boyle Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7860 Old Sycamore Lane

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genito - Urinary Surgeon, Inc. Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt
03 / 08 / 2016

Transaction ID : A91978A9B2C654511997

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Caleb Bozeman
 Full Name (Last, First, Middle Initial)
 Mailing Address #6 Woodstock Ct
 City Little Rock State AR Zip Code 72227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arkansas Urology Occupation MD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A7BF492258E04470F8DC
 Amount of Each Receipt this Period **500.00**
 Memo Item profit distribution deduction

B. Gene Braga
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Caledonia Drive
 City Ocean View State NJ Zip Code 08230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pagnani, Braga & Kimmel Urologic Assoc Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : A78C1B40899B84B8BBED
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

c. Charlie Bridges
 Full Name (Last, First, Middle Initial)
 Mailing Address 4104 Lake Limestone
 City Baton Rouge State LA Zip Code 70816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : AA830543F69E64A4684F
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **1000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. C Gilberto Brito
 Full Name (Last, First, Middle Initial)
 Mailing Address 8544 N 58th Pl
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AUS Occupation Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AA466CF2404174DF68A7
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

B. John Brizzolara
 Full Name (Last, First, Middle Initial)
 Mailing Address 5032 E Crestwood Drive
 City Little Rock State AR Zip Code 72107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arkansas Urology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AF0B0C3193A844F9BB05
 Amount of Each Receipt this Period
 500.00
 Memo Item
 profit distribution deduction

C. David Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 7307 Roycroft Ct.
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Premier Urology Corp Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AB92AC904E4F7476BBC4
 Amount of Each Receipt this Period
 85.00
 Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 835.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. David Brown
Full Name (Last, First, Middle Initial)

Mailing Address 7307 Roycroft Ct.

City Dublin	State OH	Zip Code 43017
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Premier Urology Corp	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	04	/	2016

Transaction ID : AA4769D7BA75E4D57BD2

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. David Brown
Full Name (Last, First, Middle Initial)

Mailing Address 7307 Roycroft Ct.

City Dublin	State OH	Zip Code 43017
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Premier Urology Corp	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	08	/	2016

Transaction ID : A2AF22FD01A744B0BB80

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Roy Brown
Full Name (Last, First, Middle Initial)

Mailing Address 2604 Sherwood Road

City Bexley	State OH	Zip Code 43209
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer COUG	Occupation Urologist
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	12	/	2016

Transaction ID : A605CA93E8B494B94B8B

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Roy Brown
Full Name (Last, First, Middle Initial)
Mailing Address 2604 Sherwood Road
City Bexley State OH Zip Code 43209
FEC ID number of contributing federal political committee. **C**
Name of Employer COUG Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A6B182BD907B9461F8F0
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Roy Brown
Full Name (Last, First, Middle Initial)
Mailing Address 2604 Sherwood Road
City Bexley State OH Zip Code 43209
FEC ID number of contributing federal political committee. **C**
Name of Employer COUG Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A67FE9EDBFED84909B6C
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

c. John Burgers
Full Name (Last, First, Middle Initial)
Mailing Address 10236 Windsor Way
City Powell State OH Zip Code 43065
FEC ID number of contributing federal political committee. **C**
Name of Employer Central Ohio Urology Group Occupation Physician - Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A2384AC8EA9E046C2AB5
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... 255.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. John Burgers
Full Name (Last, First, Middle Initial)

Mailing Address 10236 Windsor Way

City Powell State OH Zip Code 43065

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AC96CCB79DC3343F9895

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. John Burgers
Full Name (Last, First, Middle Initial)

Mailing Address 10236 Windsor Way

City Powell State OH Zip Code 43065

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A453EF54E0DDE4316BB0

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Charles Burns
Full Name (Last, First, Middle Initial)

Mailing Address 18 Highwoods Road

City Wyoming State PA Zip Code 18644

FEC ID number of contributing federal political committee. **C**

Name of Employer Riverview Urology Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A143C9049C1F44F869DE

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Rajen Butani
Full Name (Last, First, Middle Initial)

Mailing Address 140 Fellswood Drive

City Moorestown State NJ Zip Code 08057

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AB78BACA89ED54472BB6

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Stephen Campanella
Full Name (Last, First, Middle Initial)

Mailing Address 910 Fox Chapel Road

City Pittsburgh State PA Zip Code 15238

FEC ID number of contributing federal political committee. **C**

Name of Employer Stept Arnheim Urologic Associates Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A56B4FC85031D40399C7

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Stephen Campanella
Full Name (Last, First, Middle Initial)

Mailing Address 910 Fox Chapel Road

City Pittsburgh State PA Zip Code 15238

FEC ID number of contributing federal political committee. **C**

Name of Employer Stept Arnheim Urologic Associates Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A1E71E17F380347C79D1

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Stephen Campanella
 Full Name (Last, First, Middle Initial)
 Mailing Address 910 Fox Chapel Road
 City Pittsburgh State PA Zip Code 15238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stept Arnheim Urologic Associates Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A74CFE60081D4476FBDA
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Jeff Carey
 Full Name (Last, First, Middle Initial)
 Mailing Address 698 Bay Drive
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Ohio Urology Group Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ACFF2582426384CE287D
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Jeff Carey
 Full Name (Last, First, Middle Initial)
 Mailing Address 698 Bay Drive
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Ohio Urology Group Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AC9C19F5922114E8692E
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... 255.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jeff Carey
Full Name (Last, First, Middle Initial)

Mailing Address 698 Bay Drive

City Westerville State OH Zip Code 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A3DD20351F90744C38C0

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. John Carroll
Full Name (Last, First, Middle Initial)

Mailing Address 165 Gideon Lawton Lane

City Portsmouth State RI Zip Code 02871

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Inc. Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A4B47BCC1B4184C2EBCC

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. William Castle
Full Name (Last, First, Middle Initial)

Mailing Address 5747 Balls Neck Road

City Kilnarnook State VA Zip Code 22482

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Specialists of VA Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AACFB70BAF443420EB6C

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 148
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Roger Cercone
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 Carriage Drive
 City Wexford State PA Zip Code 15090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 3 Rivers Urology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AE421B45D8EA1435490C
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Roger Cercone
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 Carriage Drive
 City Wexford State PA Zip Code 15090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 3 Rivers Urology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A2D255A2391704281B0A
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Roger Cercone
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 Carriage Drive
 City Wexford State PA Zip Code 15090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 3 Rivers Urology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A5AB2FB4111894CC4B5F
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Aubrey Chung
Full Name (Last, First, Middle Initial)

Mailing Address 15216 N. 15th Drive

City Phoenix State AZ Zip Code 85023

FEC ID number of contributing federal political committee. **C**

Name of Employer Sun Valley Urology PC Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A0A81E0703B704EF0907

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Kevin Claybrook
Full Name (Last, First, Middle Initial)

Mailing Address 12 Black Bear Ct.

City Little Rock State AR Zip Code 72223

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A58BF420597894C2D8D3

Amount of Each Receipt this Period 500.00

Memo Item profit distribution deduction

C. Lucy Coccimiglio
Full Name (Last, First, Middle Initial)

Mailing Address 3872 S Shoreline Dr

City Milford State MI Zip Code 48381

FEC ID number of contributing federal political committee. **C**

Name of Employer MHP Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD581DFFA14154066ACC

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Scott Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 1520 Ridgeway Rd

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer Kettering Medical Center Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AFF207B171F124C31BA7

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Scott Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 1520 Ridgeway Rd

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer Kettering Medical Center Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A86BCE9BCEFAC4A41906

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Scott Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 1520 Ridgeway Rd

City Dayton State OH Zip Code 45419

FEC ID number of contributing federal political committee. **C**

Name of Employer Kettering Medical Center Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A6635D981DBC1412EAAA

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Daniel Cole
Full Name (Last, First, Middle Initial)

Mailing Address 426 McKinney Raod

City Wexford State PA Zip Code 15090

FEC ID number of contributing federal political committee. **C**

Name of Employer Three Rivers Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : **AE30298B2680F499AA69**

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

B. Daniel Cole
Full Name (Last, First, Middle Initial)

Mailing Address 426 McKinney Raod

City Wexford State PA Zip Code 15090

FEC ID number of contributing federal political committee. **C**

Name of Employer Three Rivers Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt **02 / 04 / 2016**
Transaction ID : **AD70ED7B3C1714CEAA72**

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

C. Daniel Cole
Full Name (Last, First, Middle Initial)

Mailing Address 426 McKinney Raod

City Wexford State PA Zip Code 15090

FEC ID number of contributing federal political committee. **C**

Name of Employer Three Rivers Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : **A4C8889D4E1D24BE5A9C**

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **255.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Lawrence Collins
Full Name (Last, First, Middle Initial)
Mailing Address 150 Oakhurst Road

City Pittsburgh	State PA	Zip Code 15215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Three Rivers Urology PC	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : ABA0A7133EEA74BBB8EF

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Lawrence Collins
Full Name (Last, First, Middle Initial)
Mailing Address 150 Oakhurst Road

City Pittsburgh	State PA	Zip Code 15215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Three Rivers Urology PC	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : A8CDE8238CD5E4D8989F

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Lawrence Collins
Full Name (Last, First, Middle Initial)
Mailing Address 150 Oakhurst Road

City Pittsburgh	State PA	Zip Code 15215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Three Rivers Urology PC	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : AB3B6CB79363D44878A5

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Giovanni Colombo
Full Name (Last, First, Middle Initial)

Mailing Address 924 W. Bennett

City Dunlap	State IL	Zip Code 61525
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Urological	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AED8E78D81EDA4CD7873

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

B. Giovanni Colombo
Full Name (Last, First, Middle Initial)

Mailing Address 924 W. Bennett

City Dunlap	State IL	Zip Code 61525
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Urological	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : ACAB9B5763DB048CCAFB

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

C. Giovanni Colombo
Full Name (Last, First, Middle Initial)

Mailing Address 924 W. Bennett

City Dunlap	State IL	Zip Code 61525
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Urological	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : AEFD6F96123B94C2B981

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Roberto Concepcion
 Full Name (Last, First, Middle Initial)
 Mailing Address 1478 Eagle Way
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Smith Clinic Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **85.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : AF951C96445A14169BE4
 Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

B. Thomas Coury
 Full Name (Last, First, Middle Initial)
 Mailing Address 4079 Pure Ridge Drive
 City Fort Gratiot State MI Zip Code 48059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Assoc of Port Huron Occupation Urologist/Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A2F1AA9561A674E61936
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

C. David Coussens
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Longwell Loop
 City Little Rock State AR Zip Code 72211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arkansas Urology Occupation Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : AD2B3151D5306413B9FB
 Amount of Each Receipt this Period **500.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **835.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 35 OF 148
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. David Cunningham
Full Name (Last, First, Middle Initial)
Mailing Address 1150 SW 43rd Place

City Ocala	State FL	Zip Code 34471
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Florida Urology Specialists	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A71F9C3B34C80423F95A

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

B. James Daitch
Full Name (Last, First, Middle Initial)
Mailing Address 6061 East Bar - Z Lane

City Paradise Valley	State AZ	Zip Code 85253
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Arizona Urology Specialists	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A04B49A0CF5EC4197BF7

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

c. Charles Dalton
Full Name (Last, First, Middle Initial)
Mailing Address 626 Blue Spring Lane

City Boalsburg	State PA	Zip Code 16827
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mount Nittany Medical Center	Occupation Urologist
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A483D9B1146F74218AA5

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	585.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Charles Dalton
Full Name (Last, First, Middle Initial)

Mailing Address 626 Blue Spring Lane

City Boalsburg State PA Zip Code 16827

FEC ID number of contributing federal political committee. **C**

Name of Employer Mount Nittany Medical Center Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : ADB2DE43E1ED74C1C9B2

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Charles Dalton
Full Name (Last, First, Middle Initial)

Mailing Address 626 Blue Spring Lane

City Boalsburg State PA Zip Code 16827

FEC ID number of contributing federal political committee. **C**

Name of Employer Mount Nittany Medical Center Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : AD3C9F0B6BC17492FB0C

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Frank D'amico
Full Name (Last, First, Middle Initial)

Mailing Address 1163 Edgewood Dr

City Hummelstown State PA Zip Code 17036

FEC ID number of contributing federal political committee. **C**

Name of Employer UCPA Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A6E02D5AE775F43CC8D4

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. William Davidson
Full Name (Last, First, Middle Initial)

Mailing Address 16665 Lyonhurst Circle

City Northville	State MI	Zip Code 48168
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Arnkoff-Weigler, P.C.	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A5810E4C5764E4C90A9A

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. William Defoor
Full Name (Last, First, Middle Initial)

Mailing Address 3452 Aultwoods Lane

City Cincinnati	State OH	Zip Code 45208
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Cincinnati Children's Hospital	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A0CDD35F577504B04997

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. William Defoor
Full Name (Last, First, Middle Initial)

Mailing Address 3452 Aultwoods Lane

City Cincinnati	State OH	Zip Code 45208
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Cincinnati Children's Hospital	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : A1818C60061774AFFB42

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. William Defoor
Full Name (Last, First, Middle Initial)

Mailing Address 3452 Aultwoods Lane

City Cincinnati State OH Zip Code 45208

FEC ID number of contributing federal political committee. **C**

Name of Employer Cincinnati Children's Hospital Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A74CBA9F78AF44EF585F

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Michael Del Terzo
Full Name (Last, First, Middle Initial)

Mailing Address 1411 Hillcrest Road

City Lancaster State PA Zip Code 17603

FEC ID number of contributing federal political committee. **C**

Name of Employer Urological Association of Lancaster Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A8E7D49410CA14F46B92

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Michael Del Terzo
Full Name (Last, First, Middle Initial)

Mailing Address 1411 Hillcrest Road

City Lancaster State PA Zip Code 17603

FEC ID number of contributing federal political committee. **C**

Name of Employer Urological Association of Lancaster Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A2A652D6CDF1542C3A0E

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Del Terzo
 Full Name (Last, First, Middle Initial)
 Mailing Address 1411 Hillcrest Road
 City Lancaster State PA Zip Code 17603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urological Association of Lancaster Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A4EA592AE91FC4CDDA9C
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Walter DelGaudio
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 Wakefuley Rd
 City Shavertown State PA Zip Code 18708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Assoc Kingston Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AEA1DFC5D8C984D6C862
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. Mark Dersch
 Full Name (Last, First, Middle Initial)
 Mailing Address 5508 SE 8th Street
 City Ocala State FL Zip Code 34480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Florida Urology Specialists Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2016
Transaction ID : ABCC6ADB2762F4194B91
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paresh Desai
Full Name (Last, First, Middle Initial)

Mailing Address 507 NW 9th Avenue

City Crystal River State FL Zip Code 34428

FEC ID number of contributing federal political committee. **C**

Name of Employer CEFUS Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : AE6E7DF1140304F55940

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

B. Michael Desautel
Full Name (Last, First, Middle Initial)

Mailing Address 2837 S. Circle Drive

City Inverness State FL Zip Code 34450

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Florida Urology Specialists Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A961D4FEB58CE45A283C

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

C. Edwin Diaz
Full Name (Last, First, Middle Initial)

Mailing Address 24 Equennes Drive

City Little Rock State AR Zip Code 72223

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Physician/Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A75EA5EF2262142E3974

Amount of Each Receipt this Period
 500.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Keith Dowling
Full Name (Last, First, Middle Initial)

Mailing Address 56 Penzanie Road

City Hershey	State PA	Zip Code 17033
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FEC ID number of contributing federal political committee. **C**

Name of Employer UCPA	Occupation Physician
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : A4FD928EE8E354FE1816

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Brian Drabik
Full Name (Last, First, Middle Initial)

Mailing Address 6615 W. Falmouth Rd.

City McBain	State MI	Zip Code 49601
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Urologist
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : AEB2B7B84233E4F2C99E

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

C. Patrick Dugan
Full Name (Last, First, Middle Initial)

Mailing Address 1124 Windsor Drive

City Mineral Wells	State WV	Zip Code 26150
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mid Ohio Valley Medical Group, Inc.	Occupation Physician - Urologist
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : A1662713F59E34C98B26

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Patrick Dugan
Full Name (Last, First, Middle Initial)

Mailing Address 1124 Windsor Drive

City Mineral Wells State WV Zip Code 26150

FEC ID number of contributing federal political committee. **C**

Name of Employer Mid Ohio Valley Medical Group, Inc. Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A5DF15DD0BF5F4B16894

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Patrick Dugan
Full Name (Last, First, Middle Initial)

Mailing Address 1124 Windsor Drive

City Mineral Wells State WV Zip Code 26150

FEC ID number of contributing federal political committee. **C**

Name of Employer Mid Ohio Valley Medical Group, Inc. Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A778927AF30C5422797A

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Andrew Dussinger
Full Name (Last, First, Middle Initial)

Mailing Address 2420 Hume Lane

City Enola State PA Zip Code 17025

FEC ID number of contributing federal political committee. **C**

Name of Employer Carlisle Regional Medical Center Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A4FF45E807D734B1D951

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Eric MD Espinosa
Full Name (Last, First, Middle Initial)

Mailing Address 5110 Brookshire Lane

City Springfield State OH Zip Code 45502

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A2E6F7D4F7D86463E839

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

B. Eric MD Espinosa
Full Name (Last, First, Middle Initial)

Mailing Address 5110 Brookshire Lane

City Springfield State OH Zip Code 45502

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : A54F18101FCD34C87AAC

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

C. Eric MD Espinosa
Full Name (Last, First, Middle Initial)

Mailing Address 5110 Brookshire Lane

City Springfield State OH Zip Code 45502

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : A929FD22E865F49079D1

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Eufernio
 Full Name (Last, First, Middle Initial)
 Mailing Address 2225 Su Hon Drive
 City Stroudsburg State PA Zip Code 18360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Associates of the Poconos Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A37858C58E5E04313A18
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

B. Mark Fallick
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Shingle Oak Drive
 City Voorhees State NJ Zip Code 08043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Delaware Valley Urology, LLC Occupation MD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : AE919004DE13B472B977
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

C. Kevin Feber
 Full Name (Last, First, Middle Initial)
 Mailing Address 10404 Ludlow
 City Huntington Woods State MI Zip Code 48020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Comprehensive Urology Occupation Pediatric Urology
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : AFC23BBCE80DA47C4A22
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **750.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert Fiorelli
Full Name (Last, First, Middle Initial)

Mailing Address 1190 Timber Grove Rd

City Shavertown State PA Zip Code 18708

FEC ID number of contributing federal political committee. **C**

Name of Employer: Fiorelli Urology Occupation: Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 12 / 2016
Transaction ID : ABAD8F6F5EC61407EB1C

Amount of Each Receipt this Period: 250.00

Memo Item profit distribution deduction

B. David Fitkin
Full Name (Last, First, Middle Initial)

Mailing Address 1645 Meyers Road

City Marion State OH Zip Code 43302

FEC ID number of contributing federal political committee. **C**

Name of Employer: Smith Clinic Occupation: Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt: 01 / 12 / 2016
Transaction ID : AA8FD7E5B79C34825A4D

Amount of Each Receipt this Period: 85.00

Memo Item profit distribution deduction

C. David Fitkin
Full Name (Last, First, Middle Initial)

Mailing Address 1645 Meyers Road

City Marion State OH Zip Code 43302

FEC ID number of contributing federal political committee. **C**

Name of Employer: Smith Clinic Occupation: Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt: 02 / 04 / 2016
Transaction ID : A2EECB5A29000468A9BB

Amount of Each Receipt this Period: 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. David Fitkin
Full Name (Last, First, Middle Initial)

Mailing Address 1645 Meyers Road

City Marion State OH Zip Code 43302

FEC ID number of contributing federal political committee. **C**

Name of Employer Smith Clinic Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : A510BEC7C0D6E40F4805

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

B. Bruce Frantz
Full Name (Last, First, Middle Initial)

Mailing Address 855 Pinehurst Road

City York State PA Zip Code 17402

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Pennsylvania Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A3DE0142089EA4F7EACC

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

C. Bruce Frantz
Full Name (Last, First, Middle Initial)

Mailing Address 855 Pinehurst Road

City York State PA Zip Code 17402

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Pennsylvania Urology PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : A5BE2034CB19B4BF0BE7

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Bruce Frantz
Full Name (Last, First, Middle Initial)

Mailing Address 855 Pinehurst Road

City York State PA Zip Code 17402

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Pennsylvania Urology PC Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AA75A1944ECCD4B12A32

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Lawrence Friedman
Full Name (Last, First, Middle Initial)

Mailing Address 9 Crumwell Drive

City Chester State NJ Zip Code 07930

FEC ID number of contributing federal political committee. **C**

Name of Employer Garden State Urology Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD4AAEDEB49524A9C8D8

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Louis Galdieri
Full Name (Last, First, Middle Initial)

Mailing Address 4 Quaker Ridge Road

City Morristown State NJ Zip Code 07860

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Group of New Jersey Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AE720FEF118BA4935942

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Louis Galdieri
Full Name (Last, First, Middle Initial)

Mailing Address 4 Quaker Ridge Road

City State Zip Code
Morristown NJ 07860

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Urology Group of New Jersey Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A31DA406893E64D4C8DA

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Louis Galdieri
Full Name (Last, First, Middle Initial)

Mailing Address 4 Quaker Ridge Road

City State Zip Code
Morristown NJ 07860

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Urology Group of New Jersey Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
02 / 04 / 2016
Transaction ID : A61F7DA8221B94E98924

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Louis Galdieri
Full Name (Last, First, Middle Initial)

Mailing Address 4 Quaker Ridge Road

City State Zip Code
Morristown NJ 07860

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Urology Group of New Jersey Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
03 / 08 / 2016
Transaction ID : AC6EFB294F55148EAA84

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Dennis Garvin
Full Name (Last, First, Middle Initial)

Mailing Address 5230 Ponderosa Dr

City Roanoke State VA Zip Code 24019

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AF4D3FFF5639E4568B3D

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Bernard Gburek
Full Name (Last, First, Middle Initial)

Mailing Address 7852 East Aster Drive

City Scottsdale State AZ Zip Code 85260

FEC ID number of contributing federal political committee. **C**

Name of Employer Arizona Urology Specialists Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A8703FBEF58AF41A1906

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. William Gianakopoulos
Full Name (Last, First, Middle Initial)

Mailing Address 115 S. Columbia Ave

City Columbus State OH Zip Code 43209

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A1EC09DE547EE4085946

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. William Gianakopoulos
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 S. Columbia Ave
 City Columbus State OH Zip Code 43209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Ohio Urology Group Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **170.00**

Date of Receipt **02 / 04 / 2016**
Transaction ID : AFAF4B58DC2BE42EEBEI
 Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

B. William Gianakopoulos
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 S. Columbia Ave
 City Columbus State OH Zip Code 43209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Ohio Urology Group Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **255.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : A0CE5C43594EA4DC49E3
 Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

C. Jerald Gilbert
 Full Name (Last, First, Middle Initial)
 Mailing Address 589 Lily Lake Road
 City Dalton State PA Zip Code 18414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Delta Medix Urology Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A8AE4BFDBC53E405087A
 Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Charles B. Gillock
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Crescent Dr
 City Staunton State VA Zip Code 24401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Ridge Urology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A0A2C744524B742CFAE0
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Sity Girgis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1233 Copperwood Drive
 City Bloomfield Hills State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sity M. Girgis MD, PC Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A02864F1C29B842B89C7
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. Glenn Gmyrek
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 Park Avenue
 City Midland Park State NJ Zip Code 07432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Specialty Care Occupation Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ABC7B0A93ABD34209886
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Sam Goldenberg
Full Name (Last, First, Middle Initial)

Mailing Address 11 Pepperbusch Ln

City Moorestown State NJ Zip Code 08057

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : A2057645ADBC9427DBE5

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

B. Kenneth A Goldman
Full Name (Last, First, Middle Initial)

Mailing Address 6722 E Knollwood circle

City West Bloomfield State MI Zip Code 48322

FEC ID number of contributing federal political committee. **C**

Name of Employer Cophrensive Urology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : AFA2F0463A79745D2A29

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

C. Ian Goldman
Full Name (Last, First, Middle Initial)

Mailing Address 10198 E. Winter Sun Drive

City Scottsdale State AZ Zip Code 85262

FEC ID number of contributing federal political committee. **C**

Name of Employer Ian L. Goldman, MD PC Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A25D5EE25B8B74E759B8

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 53 OF 148
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jose Gonzalez
Full Name (Last, First, Middle Initial)
Mailing Address 3655 York Court
City Bloomfield Hills State MI Zip Code 48301
FEC ID number of contributing federal political committee. **C**
Name of Employer Comprehensive Urology Occupation Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A88A8DDCD03AB4D3895E
Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

B. Timothy C Goodson
Full Name (Last, First, Middle Initial)
Mailing Address 1908 N. Spruce
City Little Rock State AR Zip Code 72207
FEC ID number of contributing federal political committee. **C**
Name of Employer Arkansas Urology Occupation Urologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A986EC5C8D69F48E9B99
Amount of Each Receipt this Period **500.00**
 Memo Item profit distribution deduction

C. Barry Gordon
Full Name (Last, First, Middle Initial)
Mailing Address 8003 S Michele Lane
City Tempe State AZ Zip Code 85284
FEC ID number of contributing federal political committee. **C**
Name of Employer Self/Urologic Consultants, PC Occupation Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A6DFAC8A1807245B8837
Amount of Each Receipt this Period **250.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **1000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Sam Graham
Full Name (Last, First, Middle Initial)

Mailing Address 1306 Old Logan Road

City Manakin Sabot State VA Zip Code 23103

FEC ID number of contributing federal political committee. **C**

Name of Employer HCA Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : A1630F9978E93443F9FB

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

B. Frank Greco
Full Name (Last, First, Middle Initial)

Mailing Address 105 Hickory Hill Road

City Philadelphia State PA Zip Code 19154

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology and Ultrasound Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : A953BD393689D46BF9D8

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

C. Frank Greco
Full Name (Last, First, Middle Initial)

Mailing Address 105 Hickory Hill Road

City Philadelphia State PA Zip Code 19154

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology and Ultrasound Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 02 / 04 / 2016
Transaction ID : AB288D4B56A41427E802

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Frank Greco
Full Name (Last, First, Middle Initial)

Mailing Address 105 Hickory Hill Road

City Philadelphia State PA Zip Code 19154

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology and Ultrasound Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AE59B1238555B4C85818

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Richard Greco Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 38 Tall Oaks Drive

City Pottsville State PA Zip Code 17901

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Medical Group Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A0E83EA0E723B4D64846

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Richard Greco Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 38 Tall Oaks Drive

City Pottsville State PA Zip Code 17901

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Medical Group Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : ADAC05FD5F7304B64836

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Richard Greco Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 38 Tall Oaks Drive

City Pottsville State PA Zip Code 17901

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Medical Group Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A8100762BEF8343C5AE0

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Robert T Grissom
Full Name (Last, First, Middle Initial)

Mailing Address 419 Woodgate Blvd.

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Urology, LLC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A3E2412E7CC5A420FBC6

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Bruce Gronkiewicz
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Stratford Dr

City Carlisle State PA Zip Code 17013

FEC ID number of contributing federal political committee. **C**

Name of Employer Watershed Urology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A64D3277F102B4B858F2

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. David Grossklaus
Full Name (Last, First, Middle Initial)

Mailing Address 3229 E. Enrose St

City Mesa State AZ Zip Code 85213

FEC ID number of contributing federal political committee. **C**

Name of Employer David J. Grossklaus, MD PC Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A3FEB57E0956F4576AD0

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Ira C Grossman
Full Name (Last, First, Middle Initial)

Mailing Address 280 Oldfield Road

City Shavertown State PA Zip Code 18708

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Associates of Kingston Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AAE04DA1D35A948EFB43

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Michael Hallet
Full Name (Last, First, Middle Initial)

Mailing Address 4658 Tensweep

City New Albany State OH Zip Code 43054

FEC ID number of contributing federal political committee. **C**

Name of Employer Michael B. Hallet MD, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AE9EFC2AAFE5A479F84B

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Hallet
Full Name (Last, First, Middle Initial)

Mailing Address 4658 Tensweep

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Michael B. Hallet MD, Inc.	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : AA4B2D03970FD444FB39

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Michael Hallet
Full Name (Last, First, Middle Initial)

Mailing Address 4658 Tensweep

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Michael B. Hallet MD, Inc.	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : AD77B79BBE00645D5A05

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Sammy Hamway
Full Name (Last, First, Middle Initial)

Mailing Address 400 Claxton Glen Ct.

City Dayton	State OH	Zip Code 45429
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer South Dayton Urological	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A30FE5009A3304C48A62

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 59 OF 148
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Sammy Hamway
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Claxton Glen Ct.
 City Dayton State OH Zip Code 45429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer South Dayton Urological Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AA18CFDB39B55497281D
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Sammy Hamway
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Claxton Glen Ct.
 City Dayton State OH Zip Code 45429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer South Dayton Urological Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : ABFE30E25763B47C1893
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. John Hansen Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 W. Carribbean Lane
 City Phoenix State AZ Zip Code 85023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sun Valley Urology PC Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A32515CAAA2A943E989E
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. David L. Harold
 Full Name (Last, First, Middle Initial)
 Mailing Address 2346 Walnut Lane Road
 City West Bloomfield State MI Zip Code 48341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer David L. Harold M.D., PC Occupation Physician/Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A1A552D9FAB4C4578ADA
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Victor Hartanto
 Full Name (Last, First, Middle Initial)
 Mailing Address 507 Crankshaw Place
 City Wycoff State NJ Zip Code 07481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Group of PA Occupation Information Requested
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AEC047807BB714758ACD
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. David Hastings
 Full Name (Last, First, Middle Initial)
 Mailing Address 442 Highland Crossing
 City Baton Rouge State LA Zip Code 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LA Urology Occupation MD
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AEB048F1A5A9D4769BA4
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **750.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. John Heffernan
 Full Name (Last, First, Middle Initial)
 Mailing Address 262 Seaside Drive
 City Jamestown State RI Zip Code 02835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Associates Inc Occupation Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A5396B927FBB345F28C1
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Marlou Heiland
 Full Name (Last, First, Middle Initial)
 Mailing Address 1346 N. Riata
 City Gilbert State AZ Zip Code 85234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urologic Health Associates Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A8057EC54A76B4096A2C
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. Christopher Hicks
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 17
 City Huddleston State VA Zip Code 24104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urologic Surgery Occupation MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AE5977C5CD9804FDA830
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial) A. Marc Hodroff		Date of Receipt MM / DD / YYYY 01 / 12 / 2016
Mailing Address 222 Bradley Street		Transaction ID : A7368AC8E9B144AB3BB3
City Portland	State ME	Zip Code 04103
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 125.00	
Name of Employer Mercy Hospital	Occupation Information Requested	<input type="checkbox"/> Memo Item profit distribution deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	

Full Name (Last, First, Middle Initial) B. Henry Hollier		Date of Receipt MM / DD / YYYY 01 / 12 / 2016
Mailing Address 7909 Old Hammond		Transaction ID : A69F562057EF642FA8B8
City Baton Rouge	State LA	Zip Code 70809
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Baton Rouge Urology Group	Occupation Physician	<input type="checkbox"/> Memo Item profit distribution deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Robert Hong		Date of Receipt MM / DD / YYYY 01 / 12 / 2016
Mailing Address 155 River Drive		Transaction ID : AAC7C4716402349049C2
City Lancaster	State PA	Zip Code 17603
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 85.00	
Name of Employer Urol Assoc Lancaster	Occupation Urologist	<input type="checkbox"/> Memo Item profit distribution deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 85.00	

SUBTOTAL of Receipts This Page (optional).....▶	460.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert Hong
Full Name (Last, First, Middle Initial)

Mailing Address 155 River Drive

City Lancaster State PA Zip Code 17603

FEC ID number of contributing federal political committee. **C**

Name of Employer Urol Assoc Lancaster Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A20259F40E9194A3480F

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Robert Hong
Full Name (Last, First, Middle Initial)

Mailing Address 155 River Drive

City Lancaster State PA Zip Code 17603

FEC ID number of contributing federal political committee. **C**

Name of Employer Urol Assoc Lancaster Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A1B6A79E44955495AB60

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Carin Hopps
Full Name (Last, First, Middle Initial)

Mailing Address 8967 Summerfield Rd

City Lambertville State MI Zip Code 48144

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Specialists of NW Ohio Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A731C1B2AFA96473EBDA

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Carin Hopps
Full Name (Last, First, Middle Initial)

Mailing Address 8967 Summerfield Rd

City Lambertville State MI Zip Code 48144

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Specialists of NW Ohio Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A07B2047038E94CB0B79

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Carin Hopps
Full Name (Last, First, Middle Initial)

Mailing Address 8967 Summerfield Rd

City Lambertville State MI Zip Code 48144

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Specialists of NW Ohio Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AD1E038A10B884148B6B

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Mark Hourschorn
Full Name (Last, First, Middle Initial)

Mailing Address 17 Squier Lane

City Kennebunkport State ME Zip Code 04046-6763

FEC ID number of contributing federal political committee. **C**

Name of Employer York County Urology Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AB9D43B57CDC54FA6B8A

Amount of Each Receipt this Period 125.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Patrick Hurley
Full Name (Last, First, Middle Initial)

Mailing Address 21838 Chase Drive

City State Zip Code
Novi MI 48375

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Michigan Urological Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : AFF5DA973DE3F43788A1

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Alexander Ingerman
Full Name (Last, First, Middle Initial)

Mailing Address 837 Myrtleview Drive

City State Zip Code
Baton Rouge LA 70810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Baton Rouge Clinic Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A856121DD92FC47F789D

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

C. Robert R. Isachsen
Full Name (Last, First, Middle Initial)

Mailing Address 4104 Bronson

City State Zip Code
Kalamazoo MI 49008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Healthcare Midwest Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A0AA9EA02F87A404C8DD

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Mark Jarowenko
 Full Name (Last, First, Middle Initial)
 Mailing Address 156 North School Lane
 City Lancaster State PA Zip Code 17603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Urological Group Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A968BBEB355614E0584A
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Mark Jarowenko
 Full Name (Last, First, Middle Initial)
 Mailing Address 156 North School Lane
 City Lancaster State PA Zip Code 17603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Urological Group Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : AE3B244D91AA8435A8D8
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Jankowski Jason
 Full Name (Last, First, Middle Initial)
 Mailing Address 7094 Wilton Chase St
 City Dublin State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COUG Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A834411C1DAE74570B7D
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jankowski Jason
 Full Name (Last, First, Middle Initial)
 Mailing Address 7094 Wilton Chase St
 City State Zip Code
 Dublin OH 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COUG Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : AA984D2C815604C468B1
 Amount of Each Receipt this Period
 85.00
 Memo Item
 profit distribution deduction

B. S. Jayachandran
 Full Name (Last, First, Middle Initial)
 Mailing Address 4212 E. Marlette Ave
 City State Zip Code
 Paradise Valley AZ 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Northwest Urology Associates Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AB749FF7162F145E38CB
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

C. Venkata Jayanthi
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 Buttles Avenue
 City State Zip Code
 Columbus OH 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Nationwide Children's Hospital Physician - Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A80E977CC18594108A11
 Amount of Each Receipt this Period
 85.00
 Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Venkata Jayanthi
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 Buttles Avenue
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nationwide Children's Hospital Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AEBA53AEBB55D4498917
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Venkata Jayanthi
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 Buttles Avenue
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nationwide Children's Hospital Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A28BD0A4639F54967B1A
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. George Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 N Watson Ave
 City Washington State PA Zip Code 15301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Triangle Urology Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AF47ECB99A96947C9ADA
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶ 255.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. George Jones
Full Name (Last, First, Middle Initial)

Mailing Address 50 N Watson Ave

City Washington State PA Zip Code 15301

FEC ID number of contributing federal political committee. **C**

Name of Employer Triangle Urology Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : A10CA3AF7661F4471A19

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

B. George Jones
Full Name (Last, First, Middle Initial)

Mailing Address 50 N Watson Ave

City Washington State PA Zip Code 15301

FEC ID number of contributing federal political committee. **C**

Name of Employer Triangle Urology Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : ABACE7B109FD84DBCBE!

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

C. Gail Q Jones
Full Name (Last, First, Middle Initial)

Mailing Address #14 DuClair Court

City Little Rock State AR Zip Code 72223

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Physician/Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A3A46C23E4DCA4B2481C

Amount of Each Receipt this Period
 500.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	670.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Richard Jones
Full Name (Last, First, Middle Initial)
Mailing Address 689 Washington Ave
City Hanover State PA Zip Code 17331
FEC ID number of contributing federal political committee. **C**
Name of Employer Richard Jones Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **85.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A90AB1527BB8949FCAE0
Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

B. Richard Jones
Full Name (Last, First, Middle Initial)
Mailing Address 689 Washington Ave
City Hanover State PA Zip Code 17331
FEC ID number of contributing federal political committee. **C**
Name of Employer Richard Jones Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **170.00**

Date of Receipt **02 / 04 / 2016**
Transaction ID : A2E5D6770C6D0498E83B
Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

C. Richard Jones
Full Name (Last, First, Middle Initial)
Mailing Address 689 Washington Ave
City Hanover State PA Zip Code 17331
FEC ID number of contributing federal political committee. **C**
Name of Employer Richard Jones Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : A8578226BF02640B8B4E
Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paul Jo
Full Name (Last, First, Middle Initial)
Mailing Address 750 SW 63rd Street

City Ocala	State FL	Zip Code 34471
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Florida Urology Specialists	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		04		2016

Transaction ID : ABDDF64F6F4E2449F9BD

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Thomas Kachel
Full Name (Last, First, Middle Initial)
Mailing Address 6 Stratford Lane

City Mechanicsburg	State PA	Zip Code 17050
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology of Central PA	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : A1B615B43179248CDA3B

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

C. David Kagey
Full Name (Last, First, Middle Initial)
Mailing Address 6272 Ran Lynn Dr

City Roanoke	State VA	Zip Code 24018
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Assoc.	Occupation MD
------------------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : AF8C3CC918ECA4F76907

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Marshall Kamer
Full Name (Last, First, Middle Initial)

Mailing Address 4996 Lakeshore

City Ft. Gratiot	State MI	Zip Code 48059
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Assoc of Port Huron	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : ACDCF726589BE44F88FC

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Kenneth Kang Ning (Hu)
Full Name (Last, First, Middle Initial)

Mailing Address 316 North Watt Street

City Butler	State PA	Zip Code 16001
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield	Occupation MD
---------------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		04		2016

Transaction ID : AE0C606AF68CB4344B97

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Kang Ning (Hu) Kang
Full Name (Last, First, Middle Initial)

Mailing Address 316 North Watt Street

City Butler	State PA	Zip Code 16001
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Blue Shield	Occupation MD
---------------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : AD617F2E645EC4F47AD8

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Kang Ning (Hu) Kang
Full Name (Last, First, Middle Initial)

Mailing Address 316 North Watt Street

City State Zip Code
Butler PA 16001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Shield MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
03 / 08 / 2016
Transaction ID : AF4B94F4698C94D62933

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Jamie Kapner
Full Name (Last, First, Middle Initial)

Mailing Address 12557 N. 138th Place

City State Zip Code
Scottsdale AZ 85259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Same MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A2D6A717D5A0A4D0EA50

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

C. Paul Kaufman
Full Name (Last, First, Middle Initial)

Mailing Address 3552 Drayton Hall South

City State Zip Code
New Albany OH 43054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Central Ohio Urology Group Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A63521E3D4AEC4505891

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paul Kaufman
Full Name (Last, First, Middle Initial)

Mailing Address 3552 Drayton Hall South

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : AA2AE4659D6854737A28

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

B. Paul Kaufman
Full Name (Last, First, Middle Initial)

Mailing Address 3552 Drayton Hall South

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : A59EDD9719342407980B

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

C. Louis Keeler
Full Name (Last, First, Middle Initial)

Mailing Address 5 Swedes Lane

City Moorestown	State NJ	Zip Code 08057
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC	Occupation MD
--	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : A42C2EE210DC3424FA3A

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Charles Keoleian
 Full Name (Last, First, Middle Initial)
 Mailing Address 32628 Bingham Lane
 City Binham Farms State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Comprehensive Medical Center PLLC Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A322DEEE2BFAE4989BE2
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Daniel Kessler
 Full Name (Last, First, Middle Initial)
 Mailing Address 5314 Femcrest Lane
 City Cincinnati State OH Zip Code 45242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midwest Urological Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AC86614E6B7CE4967B1E
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Daniel Kessler
 Full Name (Last, First, Middle Initial)
 Mailing Address 5314 Femcrest Lane
 City Cincinnati State OH Zip Code 45242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midwest Urological Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AFC78A3838E434102AA8
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Daniel Kessler
Full Name (Last, First, Middle Initial)

Mailing Address 5314 Femcrest Lane

City Cincinnati State OH Zip Code 45242

FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Urological Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : AE063302ED9FD484BB01

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. E. Wylly Klorin
Full Name (Last, First, Middle Initial)

Mailing Address 6660 Waterford Ct.

City Columbus State GA Zip Code 31904

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Associates of Columbus Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A537C80553A6E4570BBC

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

c. Charles King
Full Name (Last, First, Middle Initial)

Mailing Address 1238 SE 5th Street

City Ocala State FL Zip Code 34471

FEC ID number of contributing federal political committee. **C**

Name of Employer Ocala Urology Specialists Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : AC500BBF390E6421DAC0

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Edward King
 Full Name (Last, First, Middle Initial)
 Mailing Address 915 SE 5th Street
 City Ocala State FL Zip Code 34471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Florida Urology Specialists Occupation Physician/Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A6545F7CDCBB64227882
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Bruce Kletscher
 Full Name (Last, First, Middle Initial)
 Mailing Address 11411 North 104th Street
 City Scottsdale State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urology Associates Occupation Urologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AB3A1E3A64A8B4E41BD4
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. Richard Klump
 Full Name (Last, First, Middle Initial)
 Mailing Address 6384 Lake Trail Drive
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Central Ohio Urology Group Occupation Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AC838A2038A3D4B18B2F
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Richard Klump
Full Name (Last, First, Middle Initial)

Mailing Address 6384 Lake Trail Drive

City Westerville State OH Zip Code 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AAFF207B3BF148A0834

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Richard Klump
Full Name (Last, First, Middle Initial)

Mailing Address 6384 Lake Trail Drive

City Westerville State OH Zip Code 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A479A885DB8CA4EDD88D

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Ira Kohn
Full Name (Last, First, Middle Initial)

Mailing Address 118 Estate Drive

City Clark Summit State PA Zip Code 18411

FEC ID number of contributing federal political committee. **C**

Name of Employer Delta Medix Urology Occupation Physician-Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ACFBBE667574141FCA74

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Mitchell Kotler
Full Name (Last, First, Middle Initial)

Mailing Address 11 Cameo Drive

City Cherry Hill	State NJ	Zip Code 08003
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FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC	Occupation Urologist/Physician
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : A2C0E9FD3DBAA4A4FB05

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Kenneth Kropp
Full Name (Last, First, Middle Initial)

Mailing Address 1532 River Road

City Maumee	State OH	Zip Code 43537
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mercy Health Partners	Occupation Pediatric Urologist
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A14427A08180E4091AA4

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Kenneth Kropp
Full Name (Last, First, Middle Initial)

Mailing Address 1532 River Road

City Maumee	State OH	Zip Code 43537
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mercy Health Partners	Occupation Pediatric Urologist
---	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : AF5EF7E6B436E44F8A48

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Kenneth Kropp
 Full Name (Last, First, Middle Initial)
 Mailing Address 1532 River Road
 City Maumee State OH Zip Code 43537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mercy Health Partners Occupation Pediatric Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AB4B94A40BD8E40EF942
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Barry Krumholtz
 Full Name (Last, First, Middle Initial)
 Mailing Address 4723 E. Arroyo Verde Drive
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cigna Medical Group Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A3F72896B6E8B4B3BB47
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. William Kubricht
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Oak Alley
 City Baton Rouge State LA Zip Code 70806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LA Urology Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AF5EDB4756295461CBC7
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Ron G Kuhn
Full Name (Last, First, Middle Initial)

Mailing Address 24708 Highway 10

City Roland State AR Zip Code 72135

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Physician/Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD1613139457049CA8F3

Amount of Each Receipt this Period 500.00

Memo Item profit distribution deduction

B. Udaya Kumar
Full Name (Last, First, Middle Initial)

Mailing Address 1096 W. Diamond Shore Loop

City Hernando State FL Zip Code 34442

FEC ID number of contributing federal political committee. **C**

Name of Employer CFUS Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A9B3994D0E03C4B308D5

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

c. Tim D Langford
Full Name (Last, First, Middle Initial)

Mailing Address 26 Chenal Circle

City Little Rock State AR Zip Code 72223

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A63635B4933C9485A8BA

Amount of Each Receipt this Period 500.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Christopher D Lawley
 Full Name (Last, First, Middle Initial)
 Mailing Address 8544 Meadow Bluff Ct
 City Cincinnati State OH Zip Code 45249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southwestern Ohio Urology Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A040FB92BC8374B7881B
 Amount of Each Receipt this Period
 85.00
 Memo Item profit distribution deduction

B. Christopher D Lawley
 Full Name (Last, First, Middle Initial)
 Mailing Address 8544 Meadow Bluff Ct
 City Cincinnati State OH Zip Code 45249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southwestern Ohio Urology Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A1416601A536741B5B7D
 Amount of Each Receipt this Period
 85.00
 Memo Item profit distribution deduction

C. Christopher D Lawley
 Full Name (Last, First, Middle Initial)
 Mailing Address 8544 Meadow Bluff Ct
 City Cincinnati State OH Zip Code 45249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Southwestern Ohio Urology Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : AA870E36EAC6941F0AFB
 Amount of Each Receipt this Period
 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Steve Lebovitch
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Horizon Road Apt 1219
 City Ft. Lee State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urologic Institute NJ Occupation Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AA54B604DC2E048098E1
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Kenneth Lessans
 Full Name (Last, First, Middle Initial)
 Mailing Address 1318 Sylvan Road
 City Lancaster State PA Zip Code 17601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Urological Group Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AA90D6F44921D4275983
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Kenneth Lessans
 Full Name (Last, First, Middle Initial)
 Mailing Address 1318 Sylvan Road
 City Lancaster State PA Zip Code 17601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Urological Group Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AF8F9DEB0107F458CABB
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 85 OF 148
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial)
A. Kenneth Lessans

Mailing Address 1318 Sylvan Road

City Lancaster State PA Zip Code 17601

FEC ID number of contributing federal political committee. **C**

Name of Employer Lancaster Urological Group Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : A7A067761859145BEAF1

Amount of Each Receipt this Period
 85.00

Memo Item
 profit distribution deduction

Full Name (Last, First, Middle Initial)
B. Donald JM Lewis M

Mailing Address 201 Glyn Carin Lane

City Granville State OH Zip Code 43023

FEC ID number of contributing federal political committee. **C**

Name of Employer Urological Center, Inc. Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A14AA07CC50AA4D14AE4

Amount of Each Receipt this Period
 85.00

Memo Item
 profit distribution deduction

Full Name (Last, First, Middle Initial)
C. Donald JM Lewis M

Mailing Address 201 Glyn Carin Lane

City Granville State OH Zip Code 43023

FEC ID number of contributing federal political committee. **C**

Name of Employer Urological Center, Inc. Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A2F5729DF7D804898A33

Amount of Each Receipt this Period
 85.00

Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Donald JM Lewis M
Full Name (Last, First, Middle Initial)

Mailing Address 201 Glyn Carin Lane

City Granville State OH Zip Code 43023

FEC ID number of contributing federal political committee. **C**

Name of Employer Urological Center, Inc. Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : A58AC40B925B54988ABA

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

B. Barry Lifson
Full Name (Last, First, Middle Initial)

Mailing Address 57 Alexander Drive

City Williamstown State WV Zip Code 26187

FEC ID number of contributing federal political committee. **C**

Name of Employer Mid Ohio Valley Medical Group, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt **01 / 12 / 2016**

Transaction ID : A46AF47D38A6746AC96C

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

C. Barry Lifson
Full Name (Last, First, Middle Initial)

Mailing Address 57 Alexander Drive

City Williamstown State WV Zip Code 26187

FEC ID number of contributing federal political committee. **C**

Name of Employer Mid Ohio Valley Medical Group, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt **02 / 04 / 2016**

Transaction ID : AC3784C992D5B4ACDA25

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Barry Lifson
Full Name (Last, First, Middle Initial)

Mailing Address 57 Alexander Drive

City Williamstown State WV Zip Code 26187

FEC ID number of contributing federal political committee. **C**

Name of Employer Mid Ohio Valley Medical Group, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AC89176EE42944D23A22

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Kenneth Lim
Full Name (Last, First, Middle Initial)

Mailing Address 4121 Winterset Lane

City West Bloomfield State MI Zip Code 48323

FEC ID number of contributing federal political committee. **C**

Name of Employer Oakland County Urologists Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A84C23F70275D4E24818

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Robert Linden
Full Name (Last, First, Middle Initial)

Mailing Address 1819 Russet Drive

City Cherry Hill State NJ Zip Code 08003

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AAC166DA893EE47C3B22

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Lawrence Litscher
Full Name (Last, First, Middle Initial)

Mailing Address 5264 Split Rail

City Dayton State OH Zip Code 45429

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians - Urology Division Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt **01 / 12 / 2016**

Transaction ID : A0DBAE5569E7E473A976

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

B. Lawrence Litscher
Full Name (Last, First, Middle Initial)

Mailing Address 5264 Split Rail

City Dayton State OH Zip Code 45429

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians - Urology Division Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt **02 / 04 / 2016**

Transaction ID : AF5A5EB46E06E4C8296F

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

C. Lawrence Litscher
Full Name (Last, First, Middle Initial)

Mailing Address 5264 Split Rail

City Dayton State OH Zip Code 45429

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians - Urology Division Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : A4105AD57FCAF46EE86D

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **255.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jeffrey Lou
Full Name (Last, First, Middle Initial)

Mailing Address 323 Wickham Glen Drive

City Rich State VA Zip Code 23238

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Specialists of VA Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A1C0D9C1BDFB3456E983

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Timothy Mackey
Full Name (Last, First, Middle Initial)

Mailing Address 6 Knollwoods

City Oakland State NJ Zip Code 07436

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Group of PA Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AC4D014F3AB1840F2BA4

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Vlada Mardovin
Full Name (Last, First, Middle Initial)

Mailing Address 4394 Pine Tree Place

City Springfield State OH Zip Code 45504

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A13B82DDC3F4D49118BF

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Vlada Mardovin
Full Name (Last, First, Middle Initial)

Mailing Address 4394 Pine Tree Place

City Springfield	State OH	Zip Code 45504
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : ABBC67E6EBDAF4B9B927

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Vlada Mardovin
Full Name (Last, First, Middle Initial)

Mailing Address 4394 Pine Tree Place

City Springfield	State OH	Zip Code 45504
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Springfield Urology	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : A71B15BC26AD741A790F

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Benjamin Martin
Full Name (Last, First, Middle Initial)

Mailing Address 7305 Stone Gate Drive

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer COUG	Occupation Physician
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : AE19A2558D06B421B99C

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Benjamin Martin
Full Name (Last, First, Middle Initial)
Mailing Address 7305 Stone Gate Drive
City New Albany State OH Zip Code 43054
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
COUG Physician
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
170.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016
Transaction ID : AA0447F08DB2A42859E7
Amount of Each Receipt this Period
85.00
 Memo Item
profit distribution deduction

B. Benjamin Martin
Full Name (Last, First, Middle Initial)
Mailing Address 7305 Stone Gate Drive
City New Albany State OH Zip Code 43054
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
COUG Physician
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2016
Transaction ID : A210AF2E256F6485F87D
Amount of Each Receipt this Period
85.00
 Memo Item
profit distribution deduction

C. Peter Matthews
Full Name (Last, First, Middle Initial)
Mailing Address 2328 E. Grandview Circle
City Mesa State AZ Zip Code 85213
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Mesa Urology Urologist
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
01 / 12 / 2016
Transaction ID : A27BF22D5480648DB9D5
Amount of Each Receipt this Period
250.00
 Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Alfred Mazur
Full Name (Last, First, Middle Initial)

Mailing Address 1102 Hampton Road

City Douglas	State GA	Zip Code 31533
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Coffee Regional Medical Center	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : AD780BD3ECCDC450C888

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Alfred Mazur
Full Name (Last, First, Middle Initial)

Mailing Address 1102 Hampton Road

City Douglas	State GA	Zip Code 31533
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Coffee Regional Medical Center	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		04		2016

Transaction ID : A901415BC094F4919ADA

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Alfred Mazur
Full Name (Last, First, Middle Initial)

Mailing Address 1102 Hampton Road

City Douglas	State GA	Zip Code 31533
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Coffee Regional Medical Center	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		08		2016

Transaction ID : AD0FF013ED9F14537972

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 93 OF 148
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. William McDevitt
Full Name (Last, First, Middle Initial)
Mailing Address 1784 Berwick Lane
City Lake Orion State MI Zip Code 48362
FEC ID number of contributing federal political committee. **C**
Name of Employer Oakland County Urologists Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A02B834134CF24EF4A9B
Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. David Mendoza
Full Name (Last, First, Middle Initial)
Mailing Address 70 Catolino Drive
City Parkersburg State WV Zip Code 26104
FEC ID number of contributing federal political committee. **C**
Name of Employer MOVMG Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD7D130CF052A40AAB09
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. David Mendoza
Full Name (Last, First, Middle Initial)
Mailing Address 70 Catolino Drive
City Parkersburg State WV Zip Code 26104
FEC ID number of contributing federal political committee. **C**
Name of Employer MOVMG Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : ACF2982A5D7C14B06B8D
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 148
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. David Mendoza
Full Name (Last, First, Middle Initial)

Mailing Address 70 Catolino Drive

City Parkersburg State WV Zip Code 26104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MOVMG Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
03 / 08 / 2016
Transaction ID : **A55EE093572A246DA8D9**

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Thomas Mertz
Full Name (Last, First, Middle Initial)

Mailing Address 18325 Ten Mile Road Suite 200

City Roseville State MI Zip Code 48066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Grosse Pointe Urology Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : **AC97B5ED690EC4CE7A3B**

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

C. Eugene Minevich
Full Name (Last, First, Middle Initial)

Mailing Address 2 Spyglass Court

City Cincinnati State OH Zip Code 45241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CCHMC Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
01 / 12 / 2016
Transaction ID : **A495979F6D1304633B6F**

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Eugene Minevich
Full Name (Last, First, Middle Initial)

Mailing Address 2 Spyglass Court

City Cincinnati State OH Zip Code 45241

FEC ID number of contributing federal political committee. **C**

Name of Employer CCHMC Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : AA620FEF18E64468CAC4

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

B. Eugene Minevich
Full Name (Last, First, Middle Initial)

Mailing Address 2 Spyglass Court

City Cincinnati State OH Zip Code 45241

FEC ID number of contributing federal political committee. **C**

Name of Employer CCHMC Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : A1FD95AA85EEB4048A5B

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

C. D Keith Mooney
Full Name (Last, First, Middle Initial)

Mailing Address 4109 Longview

City Little Rock State AR Zip Code 72212

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A9BB11427EF07481483A

Amount of Each Receipt this Period
 500.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	670.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Rocco Morabito
Full Name (Last, First, Middle Initial)

Mailing Address 20 Kensington Lane

City Huntington State WV Zip Code 25705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Huntington Urological Association, Inc Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
MM / DD / YYYY
01 / 12 / 2016
Transaction ID : A7630524732844852B88

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Rocco Morabito
Full Name (Last, First, Middle Initial)

Mailing Address 20 Kensington Lane

City Huntington State WV Zip Code 25705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Huntington Urological Association, Inc Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016
Transaction ID : A312CDC45AB604B2CB4B

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Rocco Morabito
Full Name (Last, First, Middle Initial)

Mailing Address 20 Kensington Lane

City Huntington State WV Zip Code 25705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Huntington Urological Association, Inc Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2016
Transaction ID : AC5098800E7B744918FD

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	255.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Marcus Morra
Full Name (Last, First, Middle Initial)

Mailing Address 4128 Old Navy Way

City Bridgewater State VA Zip Code 22812

FEC ID number of contributing federal political committee. **C**

Name of Employer Rockingham Memorial Hospital Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ABF37455730874C8AACE

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. James S. Morris
Full Name (Last, First, Middle Initial)

Mailing Address 6649 Burden Lane

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. **C**

Name of Employer 'Private Practice' Occupation MD, Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AF8EFDED3DDEB456CAFC

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Chris Moyer
Full Name (Last, First, Middle Initial)

Mailing Address 2110 W Coventry Lane

City Enola State PA Zip Code 17025

FEC ID number of contributing federal political committee. **C**

Name of Employer UCPA Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A7A20785D3D0F402D8EF

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. James Moyer
Full Name (Last, First, Middle Initial)

Mailing Address 141 Kimberleigh Ct

City E Stroudsburg State PA Zip Code 18301

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Assoc of Poconos Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : **A44634ABF92014E2AA62**

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Daniel Murtagh
Full Name (Last, First, Middle Initial)

Mailing Address 4330 Brookside Road

City Toledo State OH Zip Code 43615

FEC ID number of contributing federal political committee. **C**

Name of Employer Genito - Urinary Surgeon, Inc. Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : **A687C07F1D86E4651B23**

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

c. Daniel Murtagh
Full Name (Last, First, Middle Initial)

Mailing Address 4330 Brookside Road

City Toledo State OH Zip Code 43615

FEC ID number of contributing federal political committee. **C**

Name of Employer Genito - Urinary Surgeon, Inc. Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : **A7095A370A47948F3BF4**

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Daniel Murtagh
 Full Name (Last, First, Middle Initial)
 Mailing Address 4330 Brookside Road
 City Toledo State OH Zip Code 43615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Genito - Urinary Surgeon, Inc. Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A425803B6938F4CC9B78
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Mark C. Musmanno MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2720 Brunton Court
 City Allison Park State PA Zip Code 15701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urologic Associates of Western PA Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AC1B46552729E4723844
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Mark C. Musmanno MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2720 Brunton Court
 City Allison Park State PA Zip Code 15701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Urologic Associates of Western PA Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A9CB53C491EA74BBE806
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 100 OF 148
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert Navarre Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7231 Forest Brush Drive

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genito - Urinary Surgeon, Inc. Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
MM / DD / YYYY
01 / 12 / 2016
Transaction ID : A3511C0D671C148F3A5F

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Robert Navarre Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7231 Forest Brush Drive

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genito - Urinary Surgeon, Inc. Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016
Transaction ID : AA998F9F0E554494C8A4

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Robert Navarre Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7231 Forest Brush Drive

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genito - Urinary Surgeon, Inc. Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2016
Transaction ID : A1F21DB32698A4BAAA42

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. William Niedrach
Full Name (Last, First, Middle Initial)

Mailing Address 11 Roxbury Drive

City Medford State NJ Zip Code 08055

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A51D6147D125E4DD2B9D

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Scott Owens
Full Name (Last, First, Middle Initial)

Mailing Address 4974 Farmington Rd

City Harrisburg State PA Zip Code 17112

FEC ID number of contributing federal political committee. **C**

Name of Employer UCPA Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A9AD834F036274C1A880

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Pradeep Pandya
Full Name (Last, First, Middle Initial)

Mailing Address 150 Pryor Rd

City Lancaster State OH Zip Code 43130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD415FA3421A441FCAD1

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Pradeep Pandya
Full Name (Last, First, Middle Initial)

Mailing Address 150 Pryor Rd

City Lancaster State OH Zip Code 43130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A52CD623240144AC6A33

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Pradeep Pandya
Full Name (Last, First, Middle Initial)

Mailing Address 150 Pryor Rd

City Lancaster State OH Zip Code 43130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A350FA359D8A4458E98E

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Biren Patel
Full Name (Last, First, Middle Initial)

Mailing Address 5124 W Arrowhead Lakes Dr

City Glendale State AZ Zip Code 85308

FEC ID number of contributing federal political committee. **C**

Name of Employer Biren G. Patel, MD PC Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A63248E2C338A42BD9B1

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Thomas Patterson
Full Name (Last, First, Middle Initial)

Mailing Address 128 North Soangetaha Road

City Galesburg State MI Zip Code 61401

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical and Surgical Specialists Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt **01 / 12 / 2016**

Transaction ID : A0460AA6134CB4DCD9E8

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

B. Thomas Patterson
Full Name (Last, First, Middle Initial)

Mailing Address 128 North Soangetaha Road

City Galesburg State MI Zip Code 61401

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical and Surgical Specialists Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt **02 / 04 / 2016**

Transaction ID : A75B5094887CA4D8CB34

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

C. Thomas Patterson
Full Name (Last, First, Middle Initial)

Mailing Address 128 North Soangetaha Road

City Galesburg State MI Zip Code 61401

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical and Surgical Specialists Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : A4E1D81BCE9E64CADB73

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jack Pence II
Full Name (Last, First, Middle Initial)
Mailing Address 2892 Stone Mill Ct

City Beavercreek	State OH	Zip Code 45434
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians	Occupation Physician
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		12		2016

Transaction ID : A299AAB4AEED74970A0F

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Jack Pence II
Full Name (Last, First, Middle Initial)
Mailing Address 2892 Stone Mill Ct

City Beavercreek	State OH	Zip Code 45434
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians	Occupation Physician
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		04		2016

Transaction ID : A239FBD58D77846188DC

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Jack Pence
Full Name (Last, First, Middle Initial)
Mailing Address 2892 Stone Mill Ct

City Beavercreek	State OH	Zip Code
---------------------	-------------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians	Occupation Physician
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		08		2016

Transaction ID : A5DC87C3E090944BA838

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 148
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Kenneth M. Peters
 Full Name (Last, First, Middle Initial)
 Mailing Address 10025 Lincoln Drive
 City State Zip Code
 Huntington Woods MI 48070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 William Beaumont Hospital Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : A3C12AA69C3AC4859A96
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

B. Bradley Pewitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 4664 McCurdy Drive
 City State Zip Code
 New Albany OH 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Central Ohio Urology Group Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 85.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : AC57B54D70C5D47808CE
 Amount of Each Receipt this Period
 85.00
 Memo Item
 profit distribution deduction

C. Bradley Pewitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 4664 McCurdy Drive
 City State Zip Code
 New Albany OH 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Central Ohio Urology Group Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 170.00

Date of Receipt
 02 / 04 / 2016
Transaction ID : A52F52FB1DC744595A90
 Amount of Each Receipt this Period
 85.00
 Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Bradley Pewitt
Full Name (Last, First, Middle Initial)

Mailing Address 4664 McCurdy Drive

City New Albany State OH Zip Code 43054

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : AE79118F965E94C86BED

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

B. David Pfeffer
Full Name (Last, First, Middle Initial)

Mailing Address 7582 Bear Wallow Dr

City Werrter State VA Zip Code 20186

FEC ID number of contributing federal political committee. **C**

Name of Employer Urologic Assoc of the Piedmont PC Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : AC483E967F1164106A24

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

C. Jerome Pietras
Full Name (Last, First, Middle Initial)

Mailing Address 17 Highwood Court

City Medford State NJ Zip Code 08055

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : A479FEB0B030949DAAC2

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Eric Pizza
Full Name (Last, First, Middle Initial)

Mailing Address 7735 Big Bend Ct

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Promedica Physician Group Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
MM / DD / YYYY
01 / 12 / 2016
Transaction ID : A1B9D882540CA4820B37

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Eric Pizza
Full Name (Last, First, Middle Initial)

Mailing Address 7735 Big Bend Ct

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Promedica Physician Group Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016
Transaction ID : A472CAE12E3D54B41B77

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Eric Pizza
Full Name (Last, First, Middle Initial)

Mailing Address 7735 Big Bend Ct

City State Zip Code
Sylvania OH 43560

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Promedica Physician Group Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2016
Transaction ID : AF9D5027E4C884BAE9FA

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Rod Poffenberger
Full Name (Last, First, Middle Initial)

Mailing Address 1445 Longview Rd

City Roanoke State VA Zip Code 24018

FEC ID number of contributing federal political committee. **C**

Name of Employer Jefferson Surgical Clinic Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A67816ECA0B564583A3C

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Mark P. Posner
Full Name (Last, First, Middle Initial)

Mailing Address 3136 Murphy Drive

City Baton Rouge State LA Zip Code 70808

FEC ID number of contributing federal political committee. **C**

Name of Employer Baton Rouge Urology Group Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A5BD8F1F08C094A10998

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Mahandra Pujara
Full Name (Last, First, Middle Initial)

Mailing Address 3006 Ridgeview Dr.

City Orwlesburg State PA Zip Code 17961

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A0864B10947AF4501B62

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Mahandra Pujara
Full Name (Last, First, Middle Initial)

Mailing Address 3006 Ridgeview Dr.

City Orwlesburg	State PA	Zip Code 17961
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Physician - Urologist
-----------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	04	/	2016

Transaction ID : AF777664F9C4E405BB54

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Mahandra Pujara
Full Name (Last, First, Middle Initial)

Mailing Address 3006 Ridgeview Dr.

City Orwlesburg	State PA	Zip Code 17961
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Physician - Urologist
-----------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	08	/	2016

Transaction ID : AFCFC07C19083430FBA3

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Jay Raman
Full Name (Last, First, Middle Initial)

Mailing Address 1130 Stoney Run Road

City Hummelstown	State PA	Zip Code 17036
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Penn State Hershey Medical Center	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	12	/	2016

Transaction ID : A6ED557F6F6EF45F9832

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Jay Raman
Full Name (Last, First, Middle Initial)

Mailing Address 1130 Stoney Run Road

City Hummelstown State PA Zip Code 17036

FEC ID number of contributing federal political committee. **C**

Name of Employer Penn State Hershey Medical Center Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : AC67667F675044AF49A0

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

B. Jay Raman
Full Name (Last, First, Middle Initial)

Mailing Address 1130 Stoney Run Road

City Hummelstown State PA Zip Code 17036

FEC ID number of contributing federal political committee. **C**

Name of Employer Penn State Hershey Medical Center Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : AC9A0387C52AB4F27A81

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

C. John R Ramey
Full Name (Last, First, Middle Initial)

Mailing Address 126 Old Orchard Rd

City Clark Summit State PA Zip Code 18411

FEC ID number of contributing federal political committee. **C**

Name of Employer Delta Medix Urology Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A3B1F2852406F46A5AE6

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 111 OF 148
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Rashid
Full Name (Last, First, Middle Initial)
Mailing Address 5637 Golden Pond Lane
City Sylvania State OH Zip Code 43560
FEC ID number of contributing federal political committee. **C**
Name of Employer Genito - Urinary Surgeon, Inc. Occupation Physician - Urologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AA81B51C9AD094572AFA
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Michael Rashid
Full Name (Last, First, Middle Initial)
Mailing Address 5637 Golden Pond Lane
City Sylvania State OH Zip Code 43560
FEC ID number of contributing federal political committee. **C**
Name of Employer Genito - Urinary Surgeon, Inc. Occupation Physician - Urologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A022F5FCBBF984BCB975
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Michael Rashid
Full Name (Last, First, Middle Initial)
Mailing Address 5637 Golden Pond Lane
City Sylvania State OH Zip Code 43560
FEC ID number of contributing federal political committee. **C**
Name of Employer Genito - Urinary Surgeon, Inc. Occupation Physician - Urologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : ADD6454B8EDF64DE386C
Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Gerald Ravitz
Full Name (Last, First, Middle Initial)

Mailing Address 29 Ranch Rd

City Schuylkill Haven State PA Zip Code 17972

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Medical Group Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt **01 / 12 / 2016**

Transaction ID : ACFD5969BF81046E5A19

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

B. Gerald Ravitz
Full Name (Last, First, Middle Initial)

Mailing Address 29 Ranch Rd

City Schuylkill Haven State PA Zip Code 17972

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Medical Group Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt **02 / 04 / 2016**

Transaction ID : A78929C0CD9C3442A9FC

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

C. Gerald Ravitz
Full Name (Last, First, Middle Initial)

Mailing Address 29 Ranch Rd

City Schuylkill Haven State PA Zip Code 17972

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Medical Group Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : AD620EE09FE3E4723999

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... **255.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Churphena Reid
Full Name (Last, First, Middle Initial)
Mailing Address 11120 IndianHill Lane

City Peoria	State IL	Zip Code 61615
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Peoria Surgical Group	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A0A519531BA194967B5D

Amount of Each Receipt this Period
50.00

Memo Item
profit distribution deduction

B. Churphena Reid
Full Name (Last, First, Middle Initial)
Mailing Address 11120 IndianHill Lane

City Peoria	State IL	Zip Code 61615
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Peoria Surgical Group	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : A6A0DF53EB56C4BAE9B4

Amount of Each Receipt this Period
50.00

Memo Item
profit distribution deduction

c. Churphena Reid
Full Name (Last, First, Middle Initial)
Mailing Address 11120 IndianHill Lane

City Peoria	State IL	Zip Code 61615
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Peoria Surgical Group	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : A191063D9097B4669A8A

Amount of Each Receipt this Period
50.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Herbert Riemenschneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 1988 Strathshire Hall Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Riverside Urology Occupation Urology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD9BB3BCD9DBC475C95
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Herbert Riemenschneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 1988 Strathshire Hall Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Riverside Urology Occupation Urology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A0133D1FBA8E142578A4
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Herbert Riemenschneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 1988 Strathshire Hall Lane
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Riverside Urology Occupation Urology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : ADE619F23E7BF454480C
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Rittenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 880 Lantern Hill Rd
 City Shavertown State PA Zip Code 18708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Riverview Urologic Assoc Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A631529FE23224302BD6
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

B. Richard M Roach
 Full Name (Last, First, Middle Initial)
 Mailing Address 5238 Fountain Walk
 City Lady Lake State FL Zip Code 32159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Advanced Urology Institute Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A0FE657828D15420F9CF
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

C. Sheldon Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 5780 E. Cielo Run
 City Cave Creek State AZ Zip Code 85331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Banner Arizona Medical Clinic Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A23349008D6F246B188D
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 148
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Steven Rockoff
Full Name (Last, First, Middle Initial)

Mailing Address 1764 McConnell Dirve

City Williamsport State PA Zip Code 17701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Susquehanna Urological Associates Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A60BAFC08DF5143158C2

Amount of Each Receipt this Period
250.00

Memo Item profit distribution deduction

B. Hector Rodriguez
Full Name (Last, First, Middle Initial)

Mailing Address 50187 Pine Court

City Plymouth State MI Zip Code 50187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Advance Urology Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : A66COC45815DD46258DE

Amount of Each Receipt this Period
250.00

Memo Item profit distribution deduction

C. Brian Roelof
Full Name (Last, First, Middle Initial)

Mailing Address 60 Monroe Center NW, Apt 9A

City Grand Rapids State MI Zip Code 49503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Urologic Consultants Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 12 / 2016
Transaction ID : ABB43F0C69301478CA5B

Amount of Each Receipt this Period
250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Sergey Rome
Full Name (Last, First, Middle Initial)
Mailing Address 481 James Way
City Wyckoff State NJ Zip Code 07481
FEC ID number of contributing federal political committee. **C**
Name of Employer Urologic Institute NJ Occupation Information Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AD4DFD26676334BA4B7D
Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. Ron Rubenstein
Full Name (Last, First, Middle Initial)
Mailing Address 8329 Hendrie Blvd
City Huntington Woods State MI Zip Code 48070
FEC ID number of contributing federal political committee. **C**
Name of Employer CMC Occupation Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A39F6164F30F74DA6BCF
Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. Susan Rusnack
Full Name (Last, First, Middle Initial)
Mailing Address 277 Forest Avenue Ste 206
City Paramus State NJ Zip Code 07652
FEC ID number of contributing federal political committee. **C**
Name of Employer Urologic Institute NJ Occupation Information Requested
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AB65D763E3CC948BEACC
Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Raymond Scott Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 8706 Crypress Trail
 City Waynesville State OH Zip Code 45068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dayton Physicians, LLC Urology Div. Occupation Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **85.00**

Date of Receipt **01 / 12 / 2016**
Transaction ID : A1503108D1DD749AD9D8
 Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

B. Raymond Scott Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 8706 Crypress Trail
 City Waynesville State OH Zip Code 45068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dayton Physicians, LLC Urology Div. Occupation Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **170.00**

Date of Receipt **02 / 04 / 2016**
Transaction ID : A5D2F544FFB0C474183E
 Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

C. Raymond Scott Russell
 Full Name (Last, First, Middle Initial)
 Mailing Address 8706 Crypress Trail
 City Waynesville State OH Zip Code 45068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dayton Physicians, LLC Urology Div. Occupation Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **03 / 08 / 2016**
Transaction ID : A33F2F613ACB44EB68A9
 Amount of Each Receipt this Period **85.00**
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 148
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Arnold Sarazen
Full Name (Last, First, Middle Initial)

Mailing Address 12 Finch Lane

City Saunderstown State RI Zip Code 02874-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Associates Inc Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A7A52F71BAB8A4813971

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Mark A Schmidt
Full Name (Last, First, Middle Initial)

Mailing Address 1177 Longviews Road

City Roanoke State VA Zip Code 24018

FEC ID number of contributing federal political committee. **C**

Name of Employer Jefferson Surgical Clinic Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ABBA095C5DA864D88BCA

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Wesley Sease
Full Name (Last, First, Middle Initial)

Mailing Address 4225 Lumber Mill Rd

City Dayton State VA Zip Code 22821

FEC ID number of contributing federal political committee. **C**

Name of Employer Rockingham Memorial Hospital Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A68A1592B3D254C5E9E5

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 148
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Manuel Seneriz
Full Name (Last, First, Middle Initial)

Mailing Address 11660 W. Waterway Drive

City Homosassa	State FL	Zip Code 34448
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Florida Urology Specialists	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A1E8026674F984E56A2F

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

B. Robert Shahon
Full Name (Last, First, Middle Initial)

Mailing Address 1520 S. Pobson Road #206

City Mesa	State AZ	Zip Code 85202
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Desert Urology Consultants	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A0E086993F42B421AB01

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

C. Andrew Sher
Full Name (Last, First, Middle Initial)

Mailing Address 387 Lakeshore Drive

City Mt. Tora	State FL	Zip Code 32757
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Florida Urology Specialists	Occupation Urologist
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : A5DD781B757CA4A44992

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Sugandh D. Shetty
 Full Name (Last, First, Middle Initial)
 Mailing Address 45573 Bristol Circle
 City State Zip Code
 Novi MI 48377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Comprehensive Medical Center PLLC Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : AFCCDB326E5684AAD8BC
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

B. Kenneth F Shockley
 Full Name (Last, First, Middle Initial)
 Mailing Address 4655 Catamount Trail NE
 City State Zip Code
 Ada MI 49301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Michigan Urological Clinic Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : AED5628B488C9409AAE9
 Amount of Each Receipt this Period
 250.00
 Memo Item
 profit distribution deduction

C. Paul Sieber
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 Highmeadow Ct
 City State Zip Code
 Lancaster PA 17601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Urological Assoc. of Lancaser Physician - Urologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 85.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : A48225B9DAE894625838
 Amount of Each Receipt this Period
 85.00
 Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paul Sieber
Full Name (Last, First, Middle Initial)

Mailing Address 950 Highmeadow Ct

City Lancaster State PA Zip Code 17601

FEC ID number of contributing federal political committee. **C**

Name of Employer: Urological Assoc. of Lancaser
Occupation: Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2016
Transaction ID : A29433127FE8A4E1685E

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Paul Sieber
Full Name (Last, First, Middle Initial)

Mailing Address 950 Highmeadow Ct

City Lancaster State PA Zip Code 17601

FEC ID number of contributing federal political committee. **C**

Name of Employer: Urological Assoc. of Lancaser
Occupation: Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2016
Transaction ID : ADCB22D16942540C8822

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Errol Singh
Full Name (Last, First, Middle Initial)

Mailing Address 1998 Cambridge Blvd

City Columbus State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C**

Name of Employer: Capital Urology, Inc.
Occupation: Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
MM / DD / YYYY
01 / 12 / 2016
Transaction ID : A2824707DA419496287D

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 148
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Errol Singh
Full Name (Last, First, Middle Initial)

Mailing Address 1998 Cambridge Blvd

City Columbus State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C**

Name of Employer Capital Urology, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AC1C1C577207A4C75A61

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Errol Singh
Full Name (Last, First, Middle Initial)

Mailing Address 1998 Cambridge Blvd

City Columbus State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C**

Name of Employer Capital Urology, Inc. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A5FFE69EDDF374AFD8D0

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. James Sipio
Full Name (Last, First, Middle Initial)

Mailing Address 4 Broadacre Drive

City Mount Laurel State NJ Zip Code 08054

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A704F17F1F58F4902BB3

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

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

FOR LINE NUMBER: PAGE 124 OF 148
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial)
A. Larry T Siris

Mailing Address 851 Hazelwood

City Birmingham State MI Zip Code 48009

FEC ID number of contributing federal political committee. **C**

Name of Employer Comprehensive Urology Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : ABB200FA0C1734AD78AA

Amount of Each Receipt this Period
 250.00

Memo Item
 profit distribution deduction

Full Name (Last, First, Middle Initial)
B. Paul J Sisbarro

Mailing Address 351 Koser Road

City Litiz State PA Zip Code 17543

FEC ID number of contributing federal political committee. **C**

Name of Employer Sisbarro Urological Specialists Ltd Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 85.00

Date of Receipt
 01 / 12 / 2016
Transaction ID : AB655DA71A94841F692E

Amount of Each Receipt this Period
 85.00

Memo Item
 profit distribution deduction

Full Name (Last, First, Middle Initial)
C. Paul J Sisbarro

Mailing Address 351 Koser Road

City Litiz State PA Zip Code 17543

FEC ID number of contributing federal political committee. **C**

Name of Employer Sisbarro Urological Specialists Ltd Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 170.00

Date of Receipt
 02 / 04 / 2016
Transaction ID : ADE1533E2070245A49D7

Amount of Each Receipt this Period
 85.00

Memo Item
 profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paul J Sisbarro
 Full Name (Last, First, Middle Initial)
 Mailing Address 351 Koser Road
 City Litiz State PA Zip Code 17543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Sisbarro Urological Specialists Ltd
 Occupation: Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **255.00**

Date of Receipt: 03 / 08 / 2016
Transaction ID : AAA4F96A58EF14154B89
 Amount of Each Receipt this Period: 85.00
 Memo Item profit distribution deduction

B. Harris Slavick
 Full Name (Last, First, Middle Initial)
 Mailing Address 1317 S. Main Road, Suite 2A
 City Vineland State NJ Zip Code 08360-6511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Harris D Slavick, MD PA
 Occupation: Urologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt: 03 / 08 / 2016
Transaction ID : AAC2FF4EC3326411CB6F
 Amount of Each Receipt this Period: 250.00
 Memo Item profit distribution deduction

C. Anna R Smither
 Full Name (Last, First, Middle Initial)
 Mailing Address 2945 Tradition Avenue
 City Baton Rouge State LA Zip Code 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Louisiana Urology, LLC
 Occupation: Urologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt: 01 / 12 / 2016
Transaction ID : A37D0E3CEE35D4E74A82
 Amount of Each Receipt this Period: 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Arvind Srinivasan
Full Name (Last, First, Middle Initial)

Mailing Address 23 Lissa Lane

City Sugarloaf State PA Zip Code 18249

FEC ID number of contributing federal political committee. **C**

Name of Employer Surac & Srinivasan Urological Associat Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AF0B38F3E211E497E8FC

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

B. J. Walt Stallings
Full Name (Last, First, Middle Initial)

Mailing Address 14007 Foxfield Lane

City Little Rock State AR Zip Code 72211

FEC ID number of contributing federal political committee. **C**

Name of Employer Arkansas Urology Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A5C711BD934994AB18E1

Amount of Each Receipt this Period
 500.00

Memo Item profit distribution deduction

C. Michael Stanik
Full Name (Last, First, Middle Initial)

Mailing Address 12 Northfield Lane

City Prescott State AZ Zip Code 86305

FEC ID number of contributing federal political committee. **C**

Name of Employer Prescott Urology Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : AE137D436FF2645988DA

Amount of Each Receipt this Period
 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 148
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. James Stefanelli
 Full Name (Last, First, Middle Initial)
 Mailing Address 910 Parkview Rd
 City Moscow State PA Zip Code 18444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Delta Medix Urology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A7F415C4F20124D96A03
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

B. James Stengel
 Full Name (Last, First, Middle Initial)
 Mailing Address 3410 Harrow Gate Road
 City York State PA Zip Code 17402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer James N Stengel DO, Ltd. Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A6AB14A8891B346ADB05
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. James Stengel
 Full Name (Last, First, Middle Initial)
 Mailing Address 3410 Harrow Gate Road
 City York State PA Zip Code 17402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer James N Stengel DO, Ltd. Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A0155548F8CC94C30B89
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. James Stengel
Full Name (Last, First, Middle Initial)

Mailing Address 3410 Harrow Gate Road

City York State PA Zip Code 17402

FEC ID number of contributing federal political committee. **C**

Name of Employer James N Stengel DO, Ltd. Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AC75BBB3816DB4557BE2

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Karen Stewart
Full Name (Last, First, Middle Initial)

Mailing Address 2511 Onandaga Drive

City Columbus State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation none

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A51C00941C5B741F6AB0

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Karen Stewart
Full Name (Last, First, Middle Initial)

Mailing Address 2511 Onandaga Drive

City Columbus State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation none

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : ADB3F1281D1FB4FE892F

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Karen Stewart
Full Name (Last, First, Middle Initial)

Mailing Address 2511 Onandaga Drive

City Columbus State OH Zip Code 43221

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A6E4FB432755C4C2B843

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Aldo Suraci
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 457

City Mifflinville State PA Zip Code 18631

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A4D3CC2B25ABD41E8AB8

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Harvey Taub
Full Name (Last, First, Middle Initial)

Mailing Address 1711 SE 34th Lane

City Ocala State FL Zip Code 34471

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Urology Institute Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AF28504541BF74F9F910

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert S Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 6780 Burden Lane

City Baton Rouge State LA Zip Code 70868

FEC ID number of contributing federal political committee. **C**

Name of Employer LA Urology Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A8125282A1CF940519CB

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Dinesh John Telang
Full Name (Last, First, Middle Initial)

Mailing Address 800 Park Lane

City Grosse Pointe Park State MI Zip Code 48230

FEC ID number of contributing federal political committee. **C**

Name of Employer Owner/Grosse Pointe Urology Occupation Medical Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AF91D054E3EAE4D00A22

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. David E. Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 4100 Silvergrass NE

City Grand Rapids State MI Zip Code 49525

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Surgeons PC Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A933624558C1141C1865

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Paul Thur
Full Name (Last, First, Middle Initial)

Mailing Address 49 Pen Arth Road

City Bala Cynwyd	State PA	Zip Code 19004
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Delaware Valley Urology, LLC	Occupation Urologist
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : AF5678E3558B34A1B804

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Kevin Traub
Full Name (Last, First, Middle Initial)

Mailing Address 4 Twin Pine Court

City Pittsburgh	State PA	Zip Code 15215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Stept Arnheim Urologic Associates	Occupation Physician - Urologist
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	12	/	2016

Transaction ID : A6F4D15CFB9F54C1A93A

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Kevin Traub
Full Name (Last, First, Middle Initial)

Mailing Address 4 Twin Pine Court

City Pittsburgh	State PA	Zip Code 15215
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Stept Arnheim Urologic Associates	Occupation Physician - Urologist
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2016

Transaction ID : A52F8E1CD942E4F479F6

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Kevin Traub
Full Name (Last, First, Middle Initial)

Mailing Address 4 Twin Pine Court

City Pittsburgh State PA Zip Code 15215

FEC ID number of contributing federal political committee. **C**

Name of Employer Stept Arnheim Urologic Associates Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : AF3A9B59DAF5E4EDAB8F

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

B. Pete Tucker
Full Name (Last, First, Middle Initial)

Mailing Address 4000 Pine Needles Drive

City Harrisburg State PA Zip Code 17112

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology of Central PA Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A1A88CC3703244E2DB65

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Shrikant Vaidya
Full Name (Last, First, Middle Initial)

Mailing Address 2520 Valley Drive Suite 016

City Point Pleasant State WV Zip Code 25550

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A41821B68282347F5AF4

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 148
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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Shrikant Vaidya
Full Name (Last, First, Middle Initial)

Mailing Address 2520 Valley Drive Suite 016

City Point Pleasant	State WV	Zip Code 25550
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Urologist
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : A6515639C86DC4FD4B32

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

B. Shrikant Vaidya
Full Name (Last, First, Middle Initial)

Mailing Address 2520 Valley Drive Suite 016

City Point Pleasant	State WV	Zip Code 25550
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Urologist
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : AA30E684D662E4A0FB10

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Stephen Vick
Full Name (Last, First, Middle Initial)

Mailing Address 6635 Piker Lane

City Baton Rouge	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Baton Rouge Urology Group	Occupation Urology
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : A6C276BD9147D405EAB3

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	420.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Stephen Vijan
Full Name (Last, First, Middle Initial)

Mailing Address 14021 Fancher Road

City Westerville State OH Zip Code 43081

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **85.00**

Date of Receipt **01 / 12 / 2016**

Transaction ID : A71C343DA33934F3DA4A

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

B. Stephen Vijan
Full Name (Last, First, Middle Initial)

Mailing Address 14021 Fancher Road

City Westerville State OH Zip Code 43081

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **170.00**

Date of Receipt **02 / 04 / 2016**

Transaction ID : ACC8A3F2B12F04D1B843

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

C. Stephen Vijan
Full Name (Last, First, Middle Initial)

Mailing Address 14021 Fancher Road

City Westerville State OH Zip Code 43081

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Urology Group Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : AC983244F0C814D99AD2

Amount of Each Receipt this Period **85.00**

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Raul Webster
Full Name (Last, First, Middle Initial)

Mailing Address 40605 N. Shadow Creek Way

City Anthem	State AZ	Zip Code 85086
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Phoenix Urological Surgeions	Occupation Urologist
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A7A2BD94F48B04F2C9C0

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

B. Jeffrey L. Weingarten
Full Name (Last, First, Middle Initial)

Mailing Address 7382 Cathedral Drive

City Bloomfield Hills	State MI	Zip Code 48301
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Comprehensive Medical Center PLLC	Occupation Physician
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A916FE7938B8F4A5792C

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

C. Adam Weiser
Full Name (Last, First, Middle Initial)

Mailing Address 5033 Heath Gate Drive

City New Albany	State OH	Zip Code 43054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Group	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 12 / 2016
Transaction ID : A486078D262B0467E8F4

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....▶	585.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Adam Weiser
Full Name (Last, First, Middle Initial)

Mailing Address 5033 Heath Gate Drive

City New Albany State OH Zip Code 43054

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Group Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : A8E1766391E6242AA9DE

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

B. Adam Weiser
Full Name (Last, First, Middle Initial)

Mailing Address 5033 Heath Gate Drive

City New Albany State OH Zip Code 43054

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Group Occupation Physician - Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : ACA2C4C3B597B4D6BADC

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

C. Timothy Weyrich
Full Name (Last, First, Middle Initial)

Mailing Address 353 Thomas Road

City McMurray State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : AAA17640880DE4049A21

Amount of Each Receipt this Period
85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Timothy Weyrich
Full Name (Last, First, Middle Initial)

Mailing Address 353 Thomas Road

City McMurray State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : AAD018FF1FF6F4662BB6

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

B. Timothy Weyrich
Full Name (Last, First, Middle Initial)

Mailing Address 353 Thomas Road

City McMurray State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Urologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016

Transaction ID : A9F5CF7981C2B40BBB8E

Amount of Each Receipt this Period
 85.00

Memo Item
profit distribution deduction

C. Matthew Whang
Full Name (Last, First, Middle Initial)

Mailing Address 43 Westmount Drive

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. **C**

Name of Employer UGNJ Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : AD98C52BFC7414DB695A

Amount of Each Receipt this Period
 250.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Robert Whisnant
Full Name (Last, First, Middle Initial)

Mailing Address 5201 Archer Dr

City Roanoke State VA Zip Code 24018

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Assoc. Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : ABF33BBE0D1924125867

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Thomas E Wills
Full Name (Last, First, Middle Initial)

Mailing Address 19536 N Muirfield Cricle

City Baton Rouge State LA Zip Code 70810

FEC ID number of contributing federal political committee. **C**

Name of Employer BR Urology Group Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A4111852B656B41B9BEA

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

C. Arthur Winter
Full Name (Last, First, Middle Initial)

Mailing Address 25 Tideview Terrace

City Kenneunk State ME Zip Code 04043

FEC ID number of contributing federal political committee. **C**

Name of Employer York County Urology Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AC0D6D60067284B479A8

Amount of Each Receipt this Period 125.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Phillip Wise
Full Name (Last, First, Middle Initial)

Mailing Address 8694 Wallinwood Farms Avenue

City Jewison	State MI	Zip Code 49428
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Urologic Consultants	Occupation Physician
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	12	/	2016

Transaction ID : A5B7DC1BAD7E34C5B967

Amount of Each Receipt this Period
250.00

Memo Item
profit distribution deduction

B. Michael Wodarczyk
Full Name (Last, First, Middle Initial)

Mailing Address 2736 Northmont Drive

City Blacklick	State OH	Zip Code 43004
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Group	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	12	/	2016

Transaction ID : A978FF30D14E84AC2BF6

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

C. Michael Wodarczyk
Full Name (Last, First, Middle Initial)

Mailing Address 2736 Northmont Drive

City Blacklick	State OH	Zip Code 43004
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Ohio Group	Occupation Physician - Urologist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	04	/	2016

Transaction ID : A3B4EE435D80B4A8489F

Amount of Each Receipt this Period
85.00

Memo Item
profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Michael Wodarczyk
 Full Name (Last, First, Middle Initial)
 Mailing Address 2736 Northmont Drive
 City Blacklick State OH Zip Code 43004
 Name of Employer Central Ohio Group Occupation Physician - Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A6B5B81942E164773A17
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Joseph Worischek
 Full Name (Last, First, Middle Initial)
 Mailing Address 8540 E. McDowell Road #120
 City Mesa State AZ Zip Code 85207
 Name of Employer Southwest Urologic Specialists Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A8A6F1953A2984C64AD6
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

C. Jeffrey Yeamans
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 Kensington
 City Grosse Pointe Park State MI Zip Code 48230
 Name of Employer Grosse Pointe Urology Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A068396495841492D8E3
 Amount of Each Receipt this Period 250.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Armahd Yelle
Full Name (Last, First, Middle Initial)

Mailing Address 275 Chace Street

City Dighton State MA Zip Code 02715-1213

FEC ID number of contributing federal political committee. **C**

Name of Employer Taunton Urologic Associates Occupation Physician - Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A068461E8793947A7B3D

Amount of Each Receipt this Period 250.00

Memo Item profit distribution deduction

B. Theodros Yohannes
Full Name (Last, First, Middle Initial)

Mailing Address 110 Pawley's Plantation Ct

City Xenia State OH Zip Code 45385

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians Network Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : AE46F8D77DC4A4CA28FA

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

C. Theodros Yohannes
Full Name (Last, First, Middle Initial)

Mailing Address 110 Pawley's Plantation Ct

City Xenia State OH Zip Code 45385

FEC ID number of contributing federal political committee. **C**

Name of Employer Dayton Physicians Network Occupation Urologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : A1762C9CD69E5410A9AD

Amount of Each Receipt this Period 85.00

Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	420.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 148
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Theodros Yohannes
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 Pawley's Plantation Ct
 City Xenia State OH Zip Code 45385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dayton Physicians Network Occupation Urologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 08 / 2016
Transaction ID : A37B91AF9960B40D5BA0
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

B. Mohammand Zaitoon
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 St Ives Drive
 City Greensburg State PA Zip Code 15601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt 01 / 12 / 2016
Transaction ID : A75604C3BF5BA4C33A57
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

C. Mohammand Zaitoon
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 St Ives Drive
 City Greensburg State PA Zip Code 15601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt 02 / 04 / 2016
Transaction ID : AB8AD030846214D9FB9C
 Amount of Each Receipt this Period 85.00
 Memo Item profit distribution deduction

SUBTOTAL of Receipts This Page (optional).....	255.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 143 OF 148
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Full Name (Last, First, Middle Initial)
Mohammad Zaitoon

Mailing Address 130 St Ives Drive

City Greensburg State PA Zip Code 15601

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 03 / 08 / 2016
Transaction ID : ACE92043C314F4AA9A67

Amount of Each Receipt this Period
 85.00

Memo Item profit distribution deduction

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	64805.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 144 OF 148
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. American Kidney Stone Management, Ltd.
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 West Third Avenue, Suite 350
 City Columbus State OH Zip Code 43201-7205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 124.40

Date of Receipt 01 / 31 / 2016
Transaction ID : A1BE9D99EF49F4257A8D
 Amount of Each Receipt this Period 124.40
 Memo Item
 Free legal and accounting services

B. American Kidney Stone Management, Ltd.
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 West Third Avenue, Suite 350
 City Columbus State OH Zip Code 43201-7205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.25

Date of Receipt 03 / 31 / 2016
Transaction ID : A5005F95E772941539C3
 Amount of Each Receipt this Period 159.49
 Memo Item
 Free legal and accounting services

C. American Kidney Stone Management, Ltd.
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 West Third Avenue, Suite 350
 City Columbus State OH Zip Code 43201-7205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 136.76

Date of Receipt 02 / 29 / 2016
Transaction ID : A64C431E03CC341C0B0C
 Amount of Each Receipt this Period 12.36
 Memo Item
 Free legal and accounting services

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial)

A. American Kidney Stone Management, Ltd.

Mailing Address 100 West Third Avenue, Suite 350

City Columbus State OH Zip Code 43201-7205

Purpose of Disbursement
Administrative Operating Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2016

Transaction ID : BA2F7A932DAD04D37B59

Amount of Each Disbursement this Period

58.18

Memo Item

Full Name (Last, First, Middle Initial)

B. American Kidney Stone Management, Ltd.

Mailing Address 100 West Third Avenue, Suite 350

City Columbus State OH Zip Code 43201-7205

Purpose of Disbursement
Administrative Operating Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : B1EC3150F819B47F5991

Amount of Each Disbursement this Period

48.54

Memo Item

Full Name (Last, First, Middle Initial)

C. American Kidney Stone Management, Ltd.

Mailing Address 100 West Third Avenue, Suite 350

City Columbus State OH Zip Code 43201-7205

Purpose of Disbursement
Invoice received for all administrative and salary expenses.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2016

Transaction ID : BD846A0ED0A0742B3928

Amount of Each Disbursement this Period

1343.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1449.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial)

A. Hylant Group

Mailing Address 565 Metro PI S #450

City Dublin State OH Zip Code 43017-5386

Purpose of Disbursement
Insurance

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : BB991D7539A0A44D0A00

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial)

A. French Hill For Arkansas

Mailing Address PO Box 7841

City Little Rock State AR Zip Code 72217-7800

Purpose of Disbursement
Contribution to Federal Candidate

Candidate Name

James French Hill

Office Sought: House Senate President

State: District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : B791562E6776C49439CE

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Portman Victory Committee

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : BB4F58AAABFF74176AB4

Amount of Each Disbursement this Period

2700.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7700.00

7700.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
AKSM Urology Political Action Committee 'AKSM Urology PAC'

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Kidney Stone Management, Ltd.		Nature of Debt (Purpose): Invoice received for all administrative and salary expenses.
Mailing Address 100 West Third Avenue, Suite 350		
City Columbus	State OH	Zip Code 43201-7205

Outstanding Balance Beginning This Period 1343.11		Transaction ID : D3AEDB646976249188B0	
Amount Incurred This Period 0.00	Payment This Period 1343.11	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	