Image# 14960729389					PAGE 1 / 27
	EPORT OF I ND DISBUR Other Than An Auth	SEMENT	s	Office	e Use Only
1. NAME OF TY COMMITTEE (in full)	PE OR PRINT V	Example: If typir over the lines.	ng, type	2FE4M5	
American College of Rhe	umatology (Rheum	PAC)			
ADDRESS (number and street)	2200 Lake Boulevard NE				
Check if different					
than previously reported. (ACC)	Atlanta			GA 30	319
2. FEC IDENTIFICATION NUMB		∕▲	STA		ZIP CODE
C C00432823	3. IS RE		IEW N) OR	AMENDE (A)	ED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 	Report Due On: Mar 2	20 (M3)	May 20 (M5) Iun 20 (M6) Iul 20 (M7))	Aug 20 (M Sep 20 (M Oct 20 (M General (12G)	9) Dec 20 (M12) (Non-Election Year Only) (Non-Election Year Only)
Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31	PRE-Election Report for the: Election	Convention (12C)	Special (12S)	in the State of
Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report	(d) 30-Day POST-Election Report for the:	General (30G	à)	Runoff (30R)	Special (30S)
(TER)	Election	on /	D D / Y	Y Y Y	in the State of
5. Covering Period 01	/ D D / Y Y Y 01 2014	Y through	M M / / 03		2014
I certify that I have examined this F Type or Print Name of Treasurer	Report and to the best of r James Engelbrecht	ny knowledge and k	pelief it is true, o	correct and com	plete.
Signature of Treasurer	gelbrecht	[Electronically	Filed] Date	04 /	15 / Y Y Y Y Y 2014
NOTE: Submission of false, erroneous	s, or incomplete information	may subject the pers	son signing this I	Report to the pen	alties of 2 U.S.C. §437g.
Office Use Only				F	EC FORM 3X Rev. 12/2004

04/15/2014 16 : 15

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

29028.78

172308.02

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name American College of Rheumatology (RheumPAC) MM Y М M 01 2014 03 2014 Report Covering the Period: 01 31 From: To: COLUMN A COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand 6. 168727.92 January 1, 2014 (b) Cash on Hand at 168727.92 Beginning of Reporting Period..... 32608.88 32608.88 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 201336.80 201336.80 6(a) and 6(c) for Column B).....

29028.78

172308.02

0.00

0.00

7. Total Disbursements (from Line 31).....

Cash on Hand at Close of 8. Reporting Period (subtract Line 7 from Line 6(d))

Debts and Obligations Owed TO 9. the Committee (Itemize all on Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

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

For further information contact:

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

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

X

Image# 14960729391	
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DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American College of Rheumatology (RheumPAC) М D D Y Y M D 03 31 2014 01 01 Report Covering the Period: 2014 From: To: COLUMN A COLUMN B I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 28829.00 28829.00 (i) Itemized (use Schedule A)..... 2775.00 (ii) Unitemized 2775.00 (iii) TOTAL (add 31604.00 31604.00 Lines 11(a)(i) and (ii)..... 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 31604.00 31604.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 Party Committees..... 0.00 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 Political Committees..... 0.00 17. Other Federal Receipts 1004.88 (Dividends, Interest, etc.)..... 1004.88 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3) 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 (c) Total Transfers (add 18(a) and 18(b)).. 0.00 19. Total Receipts (add Lines 11(d), 32608.88 12, 13, 14, 15, 16, 17, and 18(c))...... 32608.88

20. Total Federal Receipts (subtract Line 18(c) from Line 19)► 32608.88

32608.88

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	28000.00	28000.00
Independent Expenditures (use Schedule E)	0.00	0.00
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	0.00	0.00
Loan Repayments Made		
Loans Made Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
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
		1028.78
Other Disbursements	1028.78	1028.76
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	29028.78	29028.78
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	29028.78	29028.78

I

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	31604.00	31604.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	31604.00	31604.00
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Rheum	ng the name and ac	ddress of any political committee	erson for e to solici											
	natology (Rhe	umPAC)												
A. Joseph Flood Mailing Address 751 Jaeger Street			_	Date of Receipt										
City	State	Zip Code		01 02 2014 Transaction ID : 12141455 Amount of Each Receipt this Period										
Columbus	OH	43206-2272	Am											
FEC ID number of contributing federal political committee.	C		1054.00											
Name of Employer	Occupation													
Columbus Arthritis Center	Physician RI	heumatologist												
Receipt For:	Aggregate `	Year-to-Date 🔻												
Other (specify)		1054.00	Con	tribut	ion									
Full Name (Last, First, Middle Initial) B. Steven Wees			Da	te of	Re	ceipt								
Mailing Address 16120 W. Dodge Ro		01 07 2014												
City	State	Zip Code	Т	Transaction ID : 12148563										
Omaha	NE	08118	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C										.00			
Name of Employer Physicians Clinic	Occupation Rheumatolog	Occupation Rheumatologist												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00												
Full Name (Last, First, Middle Initial) C. Melvin Britton			Da	te of	Re	ceipt								
Mailing Address 167 Toyon Road	Mailing Address 167 Toyon Road						01 10 / Y Y Y Y 01 10 2014							
City Attierton	State CA	Zip Code						21549						
		94027	Am	ount	of	Each	Re	ceipt t	his P	eriod				
FEC ID number of contributing federal political committee.	C			_	_	7		7	_	250	.00			
Name of Employer	Occupation													
Self-Employed	Physician													
	Aggregate `	Year-to-Date ▼		7										
Primary General Other (specify)		250.00	1											
		7 7 7												
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu	,					9		- 7		1554.	00			

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 7 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) American College of Rheumat	ology (Rhe	eumPAC)					
Α.	Full Name (Last, First, Middle Initial) Edward Herzig			Date of Receipt				
	Mailing Address 2121 Alpine Place Apt. 703 City	State	Zip Code	01 25 2014				
	Cincinnati	OH	45206-3612	Transaction ID : 12225103 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		1000.00				
	Name of Employer Herzig Krall Medical Group Receipt For: Primary General	Occupation Physician Aggregate	Year-to-Date ▼					
	Other (specify) ▼	contribution						
в.	Full Name (Last, First, Middle Initial) Jonathan Kay			Date of Receipt				
	Mailing Address 62 Olde Field Road	01 25 2014						
	City Newton Centre	State MA	Zip Code 02459	Transaction ID : 12225105 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer Mass General Physicians Org	Occupatior Physician	1					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	contribution				
с.	Full Name (Last, First, Middle Initial) Angus Worthing MD			Date of Receipt				
	Mailing Address 5530 Wisconsin Ave #1150	failing Address 5530 Wisconsin Ave						
	City Chevy Chase	State MD	Zip Code 20815	Transaction ID : 12225106 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	e e e e e e e e e e e e e e e e e e e						
	Name of Employer	Occupation	1					
	Arthritis and Rheumatism Associates, P Receipt For:	physician						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	Contribution				
s	UBTOTAL of Receipts This Page (optional).			1750.00				
т	OTAL This Period (last page this line number	er only)						

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or	for commercial purposes, other than using the			to solicit contributions from such committee.					
	American College of Rheumato	logy (Rhe	eumPAC)						
Α.	Full Name (Last, First, Middle Initial) Nilsa Cruz			Date of Receipt					
	Mailing Address 2801 W KK River Pkwy <u>Ste. 375</u> City	State	Zip Code	01 25 2014 Transaction ID : 12225107					
	Milwaukee	WI	53215	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		1000.00					
	Name of Employer Milwaukee Rheumatology Center Receipt For: Primary General Other (specify) ▼	Occupation rheumatolo Aggregate		Contribution					
	Full Name (Last, First, Middle Initial) Chris Morris			Date of Receipt					
	Mailing Address 3 Sheridan Square		01 25 2014						
	City	State Zip Code							
	Kingsport	TN	37660	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	250.00							
	Name of Employer Arthritis Associates	Occupation physician							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	Contribution					
	Full Name (Last, First, Middle Initial) James Jenkins			Date of Receipt					
	Mailing Address 5800 Sea Walk Drive No. 8			01 25 2014					
	City Playa Vista	State CA	Zip Code 90094	Transaction ID : 12225109 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		2000.00					
	Name of Employer	Occupation	1						
	Pacific Arthritis Center								
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		2000.00	Contribution					
s	UBTOTAL of Receipts This Page (optional)		•	3250.00					
т	OTAL This Period (last page this line number	only)							

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		✓ 11a 13		11b		11c		12 16	17		
	y information copied from such Reports and s for commercial purposes, other than using the				for the		pose		olicitin		ntribu	tions		
	NAME OF COMMITTEE (In Full) American College of Rheumato	ology (Rhe	eumPAC)											
Α.	Full Name (Last, First, Middle Initial) Deborah D. Desir MD				Date o	of Re	eceip	t						
	Mailing Address 3018 Dixwell Ave.	Stata	Zin Codo		01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	City Hamden	State CT	Zip Code 06518		Trans Amoun				22251		Dariad			
	FEC ID number of contributing federal political committee.	С					1		, teipt t		500	.00		
	Name of Employer Arthritis and Osteoporosis PC Receipt For:	Occupation Physician												
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		Contribu	ution	I							
в.	Full Name (Last, First, Middle Initial) Joseph Huffstutter				Date o	f Re	eceip	t						
	Mailing Address 4229 Leedy Moutain Lane				01	/		26	/ Y)14	Y		
	City Signal Moutain	State TN	Zip Code 37377		Transaction ID : 12225113 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			3000.00									
	Name of Employer Arthritis Associates]											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00	(Contribu	ition								
с.	Full Name (Last, First, Middle Initial) James Engelbrecht				Date o	f Re	eceip	t						
	Mailing Address 4281 Rosemary Lane				02	/		D 01	/ Y)14	Y		
	City Rapid City	State SD	Zip Code 57702		Tran: Amoun				22345 ceipt t		Period			
	FEC ID number of contributing federal political committee.	С					7		7		250	.00		
	Name of Employer	Occupation												
	Black Hills Orth and Spine Cen	Physician												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00		Contribu	ution	ı							
⊢	UBTOTAL of Receipts This Page (optional)			 -	<u> </u>		7		3		3750	00		
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			for each category of the Detailed Summary Page		< 11a 13		11k		11c		12 16	17			
	y information copied from such Reports and for commercial purposes, other than using the				for the		pose		solicitin	g con	ntributi	ions			
	NAME OF COMMITTEE (In Full) American College of Rheumato	ology (Rhe	eumPAC)												
Α.	Full Name (Last, First, Middle Initial) Christy Sandborg Mailing Address 761 Matadero Ave				Date o	_		ot 03	/ Y)14	Y			
	City	State	Zip Code		Trans	sact	ion	ID : 1	122365	74					
	Palo Alto FEC ID number of contributing federal political committee.	CA	94306		Amoun	t of	Eac	ch Ro	eceipt tl	his Pe	eriod 500.	00			
	Name of Employer Stanford Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Rheumatolo Aggregate]	Contribu	ıtion	I								
в.	Full Name (Last, First, Middle Initial) David R Karp Mailing Address 5323 Harry Hines Blvd.						Date of Receipt								
	City Dallas	State TX	Zip Code 75390		02 09 2014 Transaction ID : 12246809 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			500.00										
	Name of Employer University of Texas	Occupation Professor a	nd Chief, Rheumatic Disease												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]											
с.	Full Name (Last, First, Middle Initial) Herbert Baraf	l			Date o	f Re	eceip	ot							
	Mailing Address 2730 University Blvd W Ste	310			м м 02	/	D	18	/ Y	20	ү 14	Y			
	City Wheaton	State MD	Zip Code 20902						122639 eceipt tl		eriod				
	FEC ID number of contributing federal political committee.	С					7				1000.	00			
	Name of Employer	Occupation													
	Arthritis & Rheumatism Associates, P.C	physician													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00		Contribu	ution	ı								
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			7			:	2000.(00			
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Use separate schedule(s) for each category of the

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PAGE 11 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using t		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.							
American College of Rheumat	ology (RheumPAC)								
Full Name (Last, First, Middle Initial) A. Chad Deal		Date of Receipt							
Mailing Address 21099 Colby Rd		M = M / D = D / Y = Y = Y = Y Y							
City Shaker Heights	State Zip Code OH 44122	Transaction ID : 12263980							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
Name of Employer Cleveland Clinic	Occupation Physician								
Receipt For: Primary General Other (specify) v	Receipt For: Aggregate Year-to-Date ▼ Primary General								
Full Name (Last, First, Middle Initial) B. David Goddard		Date of Receipt							
Mailing Address 186 Joralemon Street	02 18 2014								
City	Transaction ID : 12263981								
Brooklyn	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	500.00							
Name of Employer YU Medical Williamsburg									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	Contribution							
Full Name (Last, First, Middle Initial) C. Barton Wise MD		Date of Receipt							
Mailing Address 4800 2nd Ave Suite 2600		02 18 / Y Y Y Y Y							
City Sacramento	StateZip CodeCA95817	Transaction ID : 12263982 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	525.00							
Name of Employer	Name of Employer Occupation								
UC Davis	5								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	Contribution							
SUBTOTAL of Receipts This Page (optional)									

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS	for each category of Detailed Summary F								
or for commercial purposes, other than using th		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.							
American College of Rheumato	ology (RheumPAC)								
Full Name (Last, First, Middle Initial) A. William Harvey		Date of Receipt							
Mailing Address 33 Worcester Square #4		02 18 2014							
City Boston	State Zip Code MA 02118	Transaction ID : 12263983							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
Name of Employer Tufts Medical Center	Occupation Physician								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100	00.00							
Full Name (Last, First, Middle Initial) B. Cathy Chapman		Date of Receipt							
Mailing Address 5210 Poplar Ave, Ste. 150		02 17 2014							
City Memphis	StateZip CodeTN38119	Transaction ID : 12263985 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	ů l								
Name of Employer Rheumatology & Derm Assoc.									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	Contribution							
Full Name (Last, First, Middle Initial) C. Matthew Mundwiler		Date of Receipt							
Mailing Address 6570 Deer Island Drive		M = M / D = D / Y = Y = Y = Y 02 20 2014							
City Cherry Valley	State Zip Code IL 61016	Transaction ID : 12284924 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C								
Name of Employer	Occupation								
Rockford Orthopedic Associates									
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5	Contribution							
SUBTOTAL of Receipts This Page (optional)									

Use separate schedule(s) for each category of the

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PAGE 13 OF

ITEMIZED RECEIPTS	for each catego Detailed Summa	X 11a 11b 11c 12 ary Page 13 14 15 16 17						
or for commercial purposes, other than usir		ised by any person for the purpose of soliciting contributions ical committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) American College of Rheum	atology (RheumPAC)							
Full Name (Last, First, Middle Initial) A. Rodolfo Molina		Date of Receipt						
Mailing Address 125 E. King's Highway		02 D D / Y Y Y Y Y 02 21 2014						
City San Antonio	State Zip Code TX 78212	Transaction ID : 12285791						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
Name of Employer	Occupation							
Arthritis Associates PA Receipt For:	Rheumatologist							
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	2000.00 Contribution						
Full Name (Last, First, Middle Initial) B. William St. Clair		Date of Receipt						
Mailing Address 11 West Haven Place		02 21 2014						
City Durham	StateZip CodeNC27705	Transaction ID : 12285794 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	°							
Name of Employer Duke Medical Center	Occupation Physician							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1000.00 Contribution						
Full Name (Last, First, Middle Initial) C. Eric Ruderman		Date of Receipt						
Mailing Address 2036 Orrington Ave.		02 21 Y Y Y Y Y 2014						
City	State Zip Code IL 60201	Transaction ID : 12285798						
		Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	500.00						
Name of Employer	Name of Employer Occupation							
Northwestern University School Receipt For:								
Primary General Other (specify)	Aggregate Year-to-Date ▼	Contribution						
SUBTOTAL of Receipts This Page (option	l							
TOTAL This Period (last page this line nu	nber only)							

Use separate schedule(s) for each category of the

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			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or	/ information copied from such Reports and St. for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) American College of Rheumatol	ogy (Rhe	eumPAC)	
	Full Name (Last, First, Middle Initial) Richard Furie			Date of Receipt
	Mailing Address Division of Rheumatology 2800 Marcus Ave City	State	Zip Code	02 21 2014 Transaction ID : 12285799
	Lake Success	NY	11042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer North Shore LIJ Health System Receipt For:	Occupation physician		_
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	Contribution
	Full Name (Last, First, Middle Initial) Eric Matteson			Date of Receipt
	Mailing Address 1752 Walden LN SW			02 21 2014
	City	State	Zip Code	Transaction ID : 12285800
	Rochester FEC ID number of contributing federal political committee.	C	55902	Amount of Each Receipt this Period
	Name of Employer Mayo Clinic	Occupation MD		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	Contribution
	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address 12 Winton Farm Rd.			02 22 2014
	City Newton	State CT	Zip Code 06470	Transaction ID : 12285802
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		_
	Yale University	Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	Contribution
SI	JBTOTAL of Receipts This Page (optional)			1000.00
	OTAL This Period (last page this line number o			

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	y information copied from such Reports and for commercial purposes, other than using th				for the		pose		olicitin		ntribu	ions
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Α.	Full Name (Last, First, Middle Initial) Sharad Lakhanpal				Date o	f Re	eceipt					
	Mailing Address 5320 Royal Lane				м м 02	/		D 22	/ Y) 14	Y
	City	State	Zip Code		Trans	sacti	ion II):1	22858	03		
	Dallas	ТХ	75229	_	Amoun	t of	Each	I Re	ceipt tl	nis P	eriod	
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	Name of Employer	Occupation										
	Rheumatology Associates	Rheumatolo	ogist									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		2000.00		Contribu	ition						
в.	Full Name (Last, First, Middle Initial) Fehmida Zahabi				Date o	f Re	eceipt					
	Mailing Address 6300 Stonewood Dr. #412				м м 02	1		D 24	/ Y	20	Y 14	Y
	City	State	Zip Code		Trans	acti	ion IC):1	228744	12		
	Plano	ТХ	75024	_	Amoun	t of	Each	Re	ceipt tl	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					7		7	_	500	00
	Name of Employer Texas Rheumatology Care	Occupation Rheumatolo										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	C	Contribu	tion						
с.	Full Name (Last, First, Middle Initial) Alan Martin				Date o	f Re	eceipt					
	Mailing Address 5942 East 87th Street				02	/		25	/ Y	20) 14	Y
	City	State	Zip Code		Trans	sact	ion II):1	22874	56		
	Tulsa	OK	74137	_	Amoun	t of	Each	Re	ceipt tl	nis P	eriod	
	FEC ID number of contributing federal political committee.	С					7		7	_	500	.00
	Name of Employer	Occupation										
	Tulsa Bone and Joint	Rheumatol	ogist									
	Receipt For:	Aggregate	Year-to-Date ▼									
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Α.	Full Name (Last, First, Middle Initial) William L Surbeck				Date	of Re	ecei	pt				
	Mailing Address 2238 E. 38th street	State	Zip Code		02		L	25		20	014	Y
	Tulsa	OK	74105						122874 eceipt t		Period	
	FEC ID number of contributing federal political committee.	С					, Ea		,		500	.00
	Name of Employer Tulsa Bone and Joint	Occupation Rheumatol										
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 500.00] (Contrik	outior	n					
в.	Full Name (Last, First, Middle Initial) Karen Kolba				Date	of Re	ecei	pt				
	Mailing Address 110 Erna Way				M 02	M /	/	27			ү)14	Y
	City Pismo Beach	State CA	Zip Code 93449						22878 eceipt t		Period	
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	Name of Employer Self-Employed	Occupation Physician										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00		Contrib	ution	ſ					
с.	Full Name (Last, First, Middle Initial) Dr. Paula Marchetta				Date	of Re	ecei	pt				
	Mailing Address 40 Park Ave				M 02		/	27)14	Υ
	City New York	State NY	Zip Code 10016						122878 eceipt t		Period	
	FEC ID number of contributing federal political committee.	С					7				250	0.00
	Name of Employer	Occupation	l									
	Self	Physician										
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	MMITTEE (In Full) College of Rheuma	tology (Rhe	eumPAC)									
A. Dr. Zsuzsar Mailing Address City Baltimore FEC ID numbe federal political Name of Emplo Johns Hopkins		State MD C Occupation Physician	Zip Code 21212			/ sact	ion II	01 D : '	/ Y 1231599 eccipt th		14	Ý 00
Receipt For: Primary Other (sp	General General	Aggregate	Year-to-Date ▼ 250.00]								
B. V.Michael H	st, First, Middle Initial) Holers ^s 1775 Aurora Ct.	State CO	Zip Code 80045			/ acti	ion IE	02 D :1	/ 1231877 eceipt tl	201 79		Y
federal political Name of Emplo	over olorado School of Medic	C Occupation Rheumatolo Aggregate					7				250.0	00
C. Douglas W Mailing Address City Onalaska	s 3111 Gundersen Dr er of contributing committee.	State WI C	Zip Code 54650			/ sact		07 D:	/ Y 123187 eceipt tl	201 80		Y 00
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NAME OF COMMITTEE (In Full) American College of Rheum	atology (RheumPA	C)	
A. Full Name (Last, First, Middle Initial) Mailing Address 3633 Clement City	State Zip C		Date of Receipt 03 / 13 / 2014 Transaction ID : 12343770
San Francisco FEC ID number of contributing federal political committee.	CA 9412		Amount of Each Receipt this Period
Name of Employer UCSF/VA Medical Center Receipt For:	Occupation Rheumatologist Aggregate Year-to-D	ate ▼ 300.00]
Full Name (Last, First, Middle Initial) Bruce Cronstein Mailing Address 550 First Avenue MSB255 City New York FEC ID number of contributing	State Zip C NY 1001		Date of Receipt
federal political committee. Name of Employer NYU School of Medicine Receipt For: Primary General Other (specify) ▼	C Occupation Physician/Professor o Aggregate Year-to-D		
Full Name (Last, First, Middle Initial) C. William Harvey Mailing Address 33 Worcester Square #4 City Boston	State Zip C MA 0211		Date of Receipt 03 31 2014 Transaction ID : 12364142 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Tufts Medical Center Receipt For:	C Occupation Physician Aggregate Year-to-D	ate ▼ 2000.00	1000.00
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NAME OF COMMITTEE (In Full) American College of Rheuma	atology (Rhe	eumPAC)									
Full Name (Last, First, Middle Initial) A. Mark E Pearson Mailing Address 601 N. Barker Rd. City Brookfield	State WI	Zip Code 53045			/ sact	31 ion ID	1 : 12			_]
FEC ID number of contributing federal political committee.	C			Amoun	t of	Each	Rec	eipt th	nis Perio 100	od 00.00)
Name of Employer West Suburban Center For Arthritis Receipt For: Primary General Other (specify) V	Occupation Physician Aggregate	Year-to-Date ▼ 1000.00	1								
B. Full Name (Last, First, Middle Initial) Eric Matteson Mailing Address 1752 Walden LN SW				Date o		eceipt		/ Y	2014	Y	1
City Rochester FEC ID number of contributing federal political committee.	State MN	Zip Code 55902		Trans		ion ID	: 12		9 nis Perio	od 50.00	
Name of Employer Mayo Clinic Receipt For: Primary General Other (specify) v	Occupation MD Aggregate	Year-to-Date ▼ 250.00]								
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NAME OF COMMITTEE (In Full) American College of Rheuma	tology (RheumP	AC)	
Full Name (Last, First, Middle Initial) A. American College of Rheumatology Mailing Address 2200 Lake Boulevard NE	,		Date of Receipt
City	State Zip	Code	02 28 2014 Transaction ID : 12288524
Atlanta	GA 30	319	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		424.42
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Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 424.42	January Credit Card Fees
Full Name (Last, First, Middle Initial) B. American College of Rheumatolo	gy		Date of Receipt
Mailing Address 2200 Lake Boulevard NE			M = M / D = D / Y = Y = Y Y 03 26 2014
City Atlanta		Code 319	Transaction ID : 12357531 Amount of Each Receipt this Period
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Name of Employer	Occupation		
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Full Name (Last, First, Middle Initial) c. American College of Rheumato	logy		Date of Receipt
Mailing Address 2200 Lake Boulevard NE			M M / D D / Y Y Y Y Y 03 26 2014
City Atlanta		Code 319	Transaction ID : 12357532 Amount of Each Receipt this Period
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Α.	Full Name (Last, First, Middle Initial) Texans For Henry Cuellar Congres	ssional	Campaign				Date of	f Dis	burse			Y	Y
	Mailing Address 1519 Washington Street Suite 200						01	ĺ	2			014	T
	City S Laredo	State TX	Zip Code 78042				Trans	acti	on ID	: 122212	68		
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в.	Full Name (Last, First, Middle Initial) Kevin Mccarthy For Congress						Date of	f Dis					_
	Mailing Address PO Box 12667						02	/	0	3		014	Y
	City Sakersfield	State CA	Zip Code 93389				Trans	sacti	on ID	: 122405	92		
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	City S Roseville	State MI	Zip Code 48066				Trans	sacti	on ID	: 122405	93		
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
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B.	Full Name (Last, First, Middle Initial) Dave Camp For Congress							Date of	Dis	sburse	emen	ıt			
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C.	Doggett For Us Congress							Date of	Dis		emen	it	Y	Y	Y
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_	Full Name (Last, First, Middle Initial)															
Α.	Bera For Congress						Date of	i Dist	Durse		Y Y Y	Y Y				
	Mailing Address Post Office Box 582496						03		1		2014					
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	Mailing Address PO Box 6116						03		1		2014	•				
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C.	Friends Of Joe Pitts						Date of	f Dist								
	Mailing Address PO Box 775						03	/	D 1		2014					
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or	for commercial purposes, other than using the nan	ne and address of any	political	committee to	solicit contributions from such committee.
$ \rangle$	NAME OF COMMITTEE (In Full)				
\langle	American College of Rheumatolog	y (RheumPAC)			
_	Full Name (Last, First, Middle Initial)				
Α.	Friends Of Joe Heck				Date of Disbursement
	Mailing Address PO Box 750114				03 <u>11</u> <u>2014</u>
	City	State Zip Code			Transaction ID : 12336150
	Las Vegas	NV 89136			Transaction ID: 12336150
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	Santa Barbara	CA 93121			
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C.	Price For Congress				Date of Disbursement
	Mailing Address P.O. Box 425				03 11 2014
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	Roswell	GA 30077			Transaction ID: 12336152
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Α.	Bennet For Colorado						Date		sburse		Y	YY	Y
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С.	Cathy Mcmorris Rodgers For Cong	gress						_	sburse				
	Mailing Address Box 137						03		2	8		2014	Y
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SCHEDULE B (FEC Form 3X)		FOB		IUMBER:			P	AGE	26 O	= 27								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		k only	one)														
	Detailed Summary Page		21b 27	22 28a	Ľ	23 28b	24 280	;	25 29	26 30b								
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NAME OF COMMITTEE (In Full)																		
American College of Rheumatolog	y (RheumPAC)																	
Full Name (Last, First, Middle Initial)		D .																
A. Ryan For Congress		Date of Disbursement																
Mailing Address PO Box 1488																		
City	City State Zip Code									Transaction ID : 12366977								
Janesville	WI 53547			Trans	actio	טו ווע	. 12300	9//										
Purpose of Disbursement		011		Amount of Each Disbursement this Period														
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Rep. Paul Ryan Office Sought: Y House Disburser	nent For: 2014	Туре																
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	ny information copied from such Reports and States for commercial purposes, other than using the nar																
\square	NAME OF COMMITTEE (In Full)																
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Α.	Full Name (Last, First, Middle Initial) SunTrust Bank Charges								Date of Disbursement								
	Mailing Address PO Box 622227	ng Address PO Box 622227						01 / D D / Y Y Y Y Y 01 31 2014									
	City Orlando	State FL						Transaction ID : 12382645									
	Purpose of Disbursement January Bank and Credit Card Fees	001					Amount of Each Disbursement this Period										
	Candidate Name		Cate	egor ype	ry/	424.42											
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼		<u> </u>		January Bank and Credit Card Fees										
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В.	SunTrust Bank Charges							Date of Disbursement									
	Mailing Address PO Box 622227		02 28 2014														
	Orlando	State Zip Code FL 32862-2227					Transaction ID : 12382646										
	Purpose of Disbursement February Bank and Credit Card Fees						Amount of Each Disbursement this Period										
	Candidate Name			Category/ Type			288.38										
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼				Februar	ry Ba	nk an	d Credit	Card	Fees					
_	State: District: Full Name (Last, First, Middle Initial)																
C.	SunTrust Bank Charges							Date of Disbursement									
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City State Zip Code Orlando FL 32862-2227							Transaction ID : 12395825 Amount of Each Disbursement this Period 315.98										
	Purpose of Disbursement March Bank and Credit Card Fees	001 Category/ Type															
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	Office Sought: House Disburser Senate President	General cify) ▼		<u> </u>		March Bank and Credit Card Fees											
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s	UBTOTAL of Disbursements This Page (optional)								,			1028	.78				
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