Image# 201610279034644404 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

10/27/2016 10 :	02
-----------------	----

	thedule E)				PAGE 1 OF 1 FOR SE OF FORM 24/48		
Political Action Committee of the American Association of Orthopaedic					C00343137		
Check if 🗶 24-hour report 48-hour report 🗶 New report Amends report filed on 48-hour report 1 48-hour report							
	Full Name of Payee Mammen Group, Inc			of Publi 10	c Distribution/Dissemination		
	Mailing Address 1901 L Street, N.W.		Amou		26 2016		
	CityStateZip CodeWashingtonDC20036				24884.13 ID : 8351892		
	Purpose of Expenditure Mail piece-Amerish Bera Category/ Type	011		of Disbu	Ursement or Obligation		
	Poro Americh	upport ppose	Office Sough		House District: 07 Senate State: CA		
	Calendar Year-To-Date Per Election for Office Sought		Disbursemer 2016		Primary X General		
	Full Name of Payee		Date	of Publi	ic Distribution/Dissemination		
	Mailing Address		Amou	unt			
	City State Zip Code		Date	of Dish	ursement or Obligation		
	Purpose of Expenditure Category/ Type			M M			
		upport ppose	Office Sough		House District: Senate State:		
	Calendar Year-To-Date Per Election for Office Sought		Disburseme		Primary General		
	(a) SUBTOTAL of Itemized Independent Expenditures		·	-7	24884.13		
(b) SUBTOTAL of Unitemized Independent Expenditures							
,	(c) TOTAL Independent Expenditures		•	-7	24884.13		
١	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
	Lundy, W, , Douglas, MD, MBA [Electronically Filed] Signature	Date	10 ^{//}	27	2016		