

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Rheumatology Rheum PAC

Report Covering the Period:

From:

11 ' 25 ' 2008

To:

12 ' 31 ' 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2008		22,124.92
(b) Cash on Hand at Beginning of Reporting Period.....	46,168.50	
(c) Total Receipts (from Line 19).....	3,662.75	37,619.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	49,831.25	59,744.29
7. Total Disbursements (from Line 31).....	336.41	10,249.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	49,494.84	49,494.84
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

29030101424

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Rheumatology Rheum PAC

Report Covering the Period: From:

11 25 2008

To:

12 31 2008

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).....	2,000.00	26,900.00
(ii) Unitemized	1,375.00	9,309.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3,375.00	36,209.00
(b) Political Party Committees	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3,375.00	36,209.00
12. Transfers From Affiliated/Other Party Committees.....	,	,
13. All Loans Received	,	,
14. Loan Repayments Received.....	,	,
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	,	937.01
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	,	,
17. Other Federal Receipts (Dividends, Interest, etc.).....	287.75	473.36
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	,	,
(b) Levin Funds (from Schedule H5)	,	,
(c) Total Transfers (add 18(a) and 18(b))..	,	,
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	,	,
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3,662.75	37,619.37

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	,	,
(ii) Non-Federal Share.....	,	,
(b) Other Federal Operating Expenditures	,	,
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	,	,
22. Transfers to Affiliated/Other Party Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	,	9,000.00
24. Independent Expenditures (use Schedule E)	,	,
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	,	,
26. Loan Repayments Made.....	,	,
27. Loans Made.....	,	,
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	,	,105.00
(b) Political Party Committees	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	,	,105.00
29. Other Disbursements	, 336.41	, 1,144.45
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	,	,
(ii) "Levin" Share.....	,	,
(b) Federal Election Activity Paid Entirely With Federal Funds	,	,
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	,	,
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	, 336.41	, 10,249.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	, 336.41	, 10,249.45

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)	3,375.00	36,209.00
34. Total Contribution Refunds (from Line 28(d))	,	,105.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,375.00	36,104.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	,	,
37. Offsets to Operating Expenditures (from Line 15, page 3)	,	,937.01
38. Net Operating Expenditures (subtract Line 37 from Line 36)	,	,937.01

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**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 1 OF 3	
	<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

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)
American College of Rheumatology (RheumPAC)

A. Full Name (Last, First, Middle Initial) Pietro V Rocca		Date of Receipt "11 ' 26 ' 2008
Mailing Address 100 Dear Valley Lane		Amount of Each Receipt this Period , \$250.00 ✓
City Greenville	State Zip Code DE 19807	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date , \$250.00
Name of Employer Pietro V Rocca	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) David Wisner		Date of Receipt "12 ' 09 ' 2008
Mailing Address 500 Birchwood		Amount of Each Receipt this Period , \$250.00 ✓
City Bellingham	State Zip Code WA 98225	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date , \$250.00
Name of Employer Mt Baker Rheumatology	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Stuart Kassan		Date of Receipt "12 ' 17 ' 2008
Mailing Address 9940 E Progress Cir		Amount of Each Receipt this Period , \$250.00 ✓
City Greenwood Village	State Zip Code CO 80111	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date , \$350.00
Name of Employer Self-Employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

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

FOR LINE NUMBER: PAGE 2 OF 3

(check only one)
 11a
 11b
 11c
 12
 13
 14
 15
 16
 17

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NAME OF COMMITTEE (In Full)
American College of Rheumatology (RheumPAC)

A. David Dansill
 Full Name (Last, First, Middle Initial)
 Mailing Address
 1826 Rothschild Lane
 City State Zip Code
 Rockford IL 61107
 Date of Receipt
 12 / 17 / 2008
 Amount of Each Receipt this Period
 , \$250.00 ✓
 Name of Employer Occupation
 ROA Physician
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ , \$250.00

B. Steven Meed
 Full Name (Last, First, Middle Initial)
 Mailing Address
 531 Main St Ste 1518
 City State Zip Code
 New York NY 10044
 Date of Receipt
 12 / 17 / 2008
 Amount of Each Receipt this Period
 , \$250.00 ✓
 Name of Employer Occupation
 Self-Employed Physician
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ , \$250.00

C. Jack Vine
 Full Name (Last, First, Middle Initial)
 Mailing Address
 7 Collinway PL
 City State Zip Code
 Dallas TX 75230-1966
 Date of Receipt
 12 / 22 / 2008
 Amount of Each Receipt this Period
 , \$250.00 ✓
 Name of Employer Occupation
 Rheumatology Associates Physician
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ , \$250.00

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

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**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)

PAGE 1 OF 1

<input 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)
American College of Rheumatology RheumPRC

Full Name (Last, First, Middle Initial) A. Mastercard		Date of Disbursement 11 ' 30 ' 2008
Mailing Address		Amount of Each Disbursement this Period , 267.75
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement 12 ' 22 ' 2008
Mailing Address		Amount of Each Disbursement this Period , 11.24
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Suntrust		Date of Disbursement 12 ' 10 ' 2008
Mailing Address		Amount of Each Disbursement this Period , 57.42
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	, ,
TOTAL This Period (last page this line number only).....▶	, 336.41

29030101431

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *Fed Ex* Shipping Date
6/19/09
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

EW *6/26/09*
 PREPARER DATE PREPARED

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