

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

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="2013"/>		<input type="text" value="87405.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="84302.89"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1450.00"/>	<input type="text" value="49468.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="85752.89"/>	<input type="text" value="136873.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11231.23"/>	<input type="text" value="62351.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="74521.66"/>	<input type="text" value="74521.66"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 04 / 01 / 2013 To: 04 / 30 / 2013

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).....	1150.00	45410.00
(ii) Unitemized	300.00	4058.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1450.00	49468.00
(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)	1450.00	49468.00
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))..... ▶	1450.00	49468.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1450.00	49468.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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	231.23	2486.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	231.23	2486.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	57500.00
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	2365.00
(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	2365.00
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)) ..	11231.23	62351.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11231.23	62351.89

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)	1450.00	49468.00
34. Total Contribution Refunds (from Line 28(d))	0.00	2365.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1450.00	47103.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	231.23	2486.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	231.23	2486.89

**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 11
	<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)
SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

A. DR. SHANDA H. BLACKMON
Full Name (Last, First, Middle Initial)

Mailing Address 3741 ROBINHOOD STREET

City HOUSTON State TX Zip Code 77030

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

Name of Employer THE METHODIST HOSPITAL Occupation PHYSICIAN

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
 04 / 25 / 2013

Transaction ID : SA11AI.4509

Amount of Each Receipt this Period
 500.00

B. DR. L. SCOTT COOK
Full Name (Last, First, Middle Initial)

Mailing Address 620 UNIVERSITY AVENUE

City URBANA State IL Zip Code 61802

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

Name of Employer CARLE CLINIC ASSOCIATION Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2013

Transaction ID : SA11AI.4470

Amount of Each Receipt this Period
 400.00

C. DR. JOE B. PUTNAM
Full Name (Last, First, Middle Initial)

Mailing Address 515 WESTVIEW AVENUE

City NASHVILLE State TN Zip Code 37205

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

Name of Employer VANDERBILT UNIVERSITY MEDICAL 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
 04 / 24 / 2013

Transaction ID : SA11AI.4513

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	1150.00

**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)

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. MERCHANT SERVICES

Mailing Address 7300 CHAPMAN HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARDS FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2013

Transaction ID : SB21B.4477

Amount of Each Disbursement this Period

59.95

Full Name (Last, First, Middle Initial)

B. MERCHANT SERVICES

Mailing Address 7300 CHAPMAN HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARDS FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2013

Transaction ID : SB21B.4478

Amount of Each Disbursement this Period

35.08

Full Name (Last, First, Middle Initial)

C. SUNTRUST BANK

Mailing Address 3440 WISCONSIN AVENUE, NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2013

Transaction ID : SB21B.4506

Amount of Each Disbursement this Period

111.04

SUBTOTAL of Disbursements This Page (optional)..... ▶

206.07

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

206.07

**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)

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALEXANDER FOR SENATE 2014

Mailing Address 228 SOUTH WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LAMAR ALEXANDER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 00

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2013

Transaction ID : **SB23.4486**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. BECERRA FOR CONGRESS

Mailing Address P.O. BOX 261060

City LOS ANGELES State CA Zip Code 90026

Purpose of Disbursement
CONTRIBUTION

Candidate Name

XAVIER BECERRA

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 34

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : **SB23.4489**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BOEHNER FOR SPEAKER

Mailing Address 320 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : **SB23.4492**

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. COMMON GROUND PAC

Mailing Address 20 WEST MAPLE STREET

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2013

Transaction ID : SB23.4494

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ELIZABETH ESTY

Mailing Address P.O. BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
Redesignate: CONTRIBUTION

Candidate Name

ELIZABETH ESTY

Office Sought: House Senate President
State: CT District: 05

Disbursement For: 2014 Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2013

Transaction ID : SB23.4474

Amount of Each Disbursement this Period

-1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ELIZABETH ESTY

Mailing Address P.O. BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
REDESIGNATE 03/25/2013 CONTRIBUTION

Candidate Name

ELIZABETH ESTY

Office Sought: House Senate President
State: CT District: 05

Disbursement For: 2014 Primary General Other (specify) ▼
Convention

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2013

Transaction ID : SB23.4475

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1000.00

**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 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)

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN BOEHNER

Mailing Address 7908 CINCINNATI DAYTON ROAD

City WEST CHESTER State OH Zip Code 45069

Purpose of Disbursement
BOEHNER FOR SPEAKER ALLOCATION

Candidate Name

JOHN A. BOEHNER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2013

Transaction ID : SB23.4500

Amount of Each Disbursement this Period

2500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ROSA DELAURO

Mailing Address 12 TRUMBULL STREET

City NEW HAVEN State CT Zip Code 06511

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROSA L. DELAURO

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Convention

State: CT District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		17		2013

Transaction ID : SB23.4482

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HOYER'S MAJORITY FUND

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2013

Transaction ID : SB23.4496

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3500.00

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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)

<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)

SOCIETY OF THORACIC SURGEONS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS

Mailing Address 700 13TH STREET, NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
HOYER'S MAJORITY FUND ALLOCATION

Candidate Name

STENY H. HOYER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

Transaction ID : SB23.4503

Amount of Each Disbursement this Period

2500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PATTY MURRAY

Mailing Address P.O. BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PATTY MURRAY

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2013

Transaction ID : SB23.4479

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

1500.00

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

11000.00
