



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**American College of Cardiology 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="2016"/>		71594.39
(b) Cash on Hand at Beginning of Reporting Period.....	40501.01	
(c) Total Receipts (from Line 19) .....	20473.49	219942.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	60974.50	291536.51
7. Total Disbursements (from Line 31).....	38395.71	268957.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	22578.79	22578.79
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**American College of Cardiology Political Action Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

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).....	16206.38	180520.74
(ii) Unitemized .....	1412.08	29598.72
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17618.46	210119.46
(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) .....	17618.46	210119.46
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).....	355.03	7322.66
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	2500.00	2500.00
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))..... ▶	20473.49	219942.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20473.49	219942.12

**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 .....	395.71	7207.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	395.71	7207.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38000.00	261500.00
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	250.00
(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	250.00
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)) ..	38395.71	268957.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38395.71	268957.72

**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) .....	17618.46	210119.46
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17618.46	209869.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	395.71	7207.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	355.03	7322.66
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	40.68	-114.94



**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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Amol S. Bapat FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 195 Sherwood Pass  
 City Roswell State GA Zip Code 30075-6858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cardiovascular Physicians of North Atl Occupation INTERVENTIONAL CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt  
 06 / 20 / 2016  
**Transaction ID : 73C0253EA2971077412**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Scott B. Baron FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6347 Coyle Ave  
 City Carmichael State CA Zip Code 95608-0438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation INTERVENTIONAL CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt  
 06 / 22 / 2016  
**Transaction ID : E5A40D24718989DE474**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Leon R. Blue FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 Santa Fe Dr  
 City Searcy State AR Zip Code 72143-6964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Heart Clinic Arkansas Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt  
 06 / 20 / 2016  
**Transaction ID : 6A0A232591409C7EF25**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **1500.00**  
**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 36
<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)  
**American College of Cardiology Political Action Committee**

**A. Alain Bouchard FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3349 Brookwood Rd  
 City Mountain Brk State AL Zip Code 35223-2037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cardiology, P.C. Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : 961D0145678E9FA3FB4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Alfred A. Bove PHD, MACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Anton Rd  
 City Wynnewood State PA Zip Code 19096-1226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Temple University Hospital Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 08 / 2016  
**Transaction ID : 410A8E5EEA43C12337F1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**c. Alfred A. Bove PHD, MACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Anton Rd  
 City Wynnewood State PA Zip Code 19096-1226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Temple University Hospital Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : 43CD9D6B376693645094**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 36
<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)  
**American College of Cardiology Political Action Committee**

**A. Richard A. Chazal FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 671 N Town and River Dr  
 City State Zip Code  
 Fort Myers FL 33919-5931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Lee Physician Group-The Heart Group ADULT CARDIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.04

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 07 / 2016  
**Transaction ID : 4CF68F0152DD11E0101E**  
 Amount of Each Receipt this Period  
 83.34  
 Memo Item

**B. Bernard A. Clark FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 95 Johnny Cake Ln  
 City State Zip Code  
 Glastonbury CT 06033-2545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 St. Francis Hospital and Medical Cente ADULT CARDIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : 4A0DBBB2B5FD9BDC30C/**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**c. George H. Crossley FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 276 Stratton Pl  
 City State Zip Code  
 Brentwood TN 37027-4228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vanderbilt University ELECTROPHYSIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2016  
**Transaction ID : 4B1198A5E27588BAF1DC**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	383.34
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Timothy A. Dewhurst FACC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4819 18th Ave SW

City Seattle	State WA	Zip Code 98106-1548
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FEC ID number of contributing federal political committee. **C**

Name of Employer Group Health	Occupation ADULT CARDIOLOGY
----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2016  
**Transaction ID : 45ADBB6A2DEC0CCEAB2**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B. Sheldon B. Eisenberg FACC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 139 Cortland Dr

City Saddle River	State NJ	Zip Code 07458-2818
----------------------	-------------	------------------------

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

Name of Employer Westwood Cardiology Associates	Occupation ADULT CARDIOLOGY
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : 00B378B5442E65DA029**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C. Blair D. Erb FACC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 905 Highland Blvd  
Ste 4330

City Bozeman	State MT	Zip Code 59715-6901
-----------------	-------------	------------------------

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

Name of Employer Bozeman Deaconess Cardiology Consultan	Occupation ADULT CARDIOLOGY
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1041.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2016  
**Transaction ID : 4977B4AAA114D907CBEB**

Amount of Each Receipt this Period  
 208.34

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1308.34
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Prospero B. Gogo FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 Colchester Ave  
 McClure1 Cardiology  
 City Burlington State VT Zip Code 05401-1473  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupational  
 Interventional-Univ. of Vermont/Fletch INTERVENTIONAL CARDIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 333.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : 4ACA8E9403C20558FA41**  
 Amount of Each Receipt this Period  
 83.30  
 Memo Item

**B. Thomas A. Haffey FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9141 Grant St  
 Ste 140  
 City Thornton State CO Zip Code 80229-4367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupational  
 Self-Employed ADULT CARDIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2016  
**Transaction ID : 4EC384355D8E54908190**  
 Amount of Each Receipt this Period  
 83.34  
 Memo Item

**C. Thomas A. Haffey FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10933 Meade Ct  
 City Westminster State CO Zip Code 80031-2124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupational  
 Self-Employed ADULT CARDIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2016  
**Transaction ID : 407FB4E23862130FFDE8**  
 Amount of Each Receipt this Period  
 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	249.98
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Zev Jacobson FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 Yorktown Plz  
 8120 Old York Road  
 City Elkins Park State PA Zip Code 19027-1424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Core Pediatric Cardiology, PC Occupation PEDIATRIC CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 06 / 24 / 2016  
**Transaction ID : 8CF95D7C-C283-431E-**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Steven E. Kornberg FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 Medical Center Way  
 FI 2  
 City Somers Point State NJ Zip Code 08244-2306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Penn Cardiology Somers Point Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 249.96

Date of Receipt 06 / 18 / 2016  
**Transaction ID : 45EA85938D30FAC253F0**  
 Amount of Each Receipt this Period 41.66  
 Memo Item

**C. Smadar Kort FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 65 Mimosa Dr  
 City Roslyn State NY Zip Code 11576-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Stony Brook University Medical Center Occupation ECHOCARDIOGRAPHY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.04

Date of Receipt 06 / 24 / 2016  
**Transaction ID : 46A3B34CFF2B5E5134AD**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**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 16 OF 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. David O. Kovacich FACC**  
Full Name (Last, First, Middle Initial)

Mailing Address 5251 Cheyenne Moon

City Carmel State IN Zip Code 46033-8897

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 20 / 2016  
**Transaction ID : DA022A8517E4FE6E976**

Amount of Each Receipt this Period 250.00

Memo Item

**B. Austin H. Kutscher FACC**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 Shippen Ct

City Flemington State NJ Zip Code 08822-6835

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

Name of Employer Hunterdon Cardiovascular Associates Occupation ADULT CARDIOLOGY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : CC0BEBE47D22A3F55CD**

Amount of Each Receipt this Period 1000.00

Memo Item

**C. Norman E. Lepor FACC**  
Full Name (Last, First, Middle Initial)

Mailing Address 99 N La Cienega Blvd Ste 203

City Beverly Hills State CA Zip Code 90211-2285

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.04

Date of Receipt 06 / 28 / 2016  
**Transaction ID : 4EDAA5375C0B004A4E16**

Amount of Each Receipt this Period 83.34

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1333.34
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Steve Leung FACC**

Mailing Address 3749 Horsemint Trl

City Lexington State KY Zip Code 40509-2947

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

Name of Employer University of Kentucky Occupation ADULT CARDIOLOGY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.04**

Date of Receipt **06 / 02 / 2016**

**Transaction ID : 49E2B32F7E2CDA541C7E**

Amount of Each Receipt this Period **83.34**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Thomas J. Lewandowski FACC**

Mailing Address 113 Limekiln Dr

City Neenah State WI Zip Code 54956-4213

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

Name of Employer Appleton Cardiology ThedaCare Occupation ADULT CARDIOLOGY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **06 / 08 / 2016**

**Transaction ID : 46CFABE9D5B37631C374**

Amount of Each Receipt this Period **105.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**c. Kelly Ann Light-McGroary FACC**

Mailing Address 200 Hawkins Dr  
Department of Internal Medicine

City Iowa City State IA Zip Code 52242-1009

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

Name of Employer University of Iowa Health care Occupation HEART FAILURE/TRANSPLANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **06 / 22 / 2016**

**Transaction ID : BFFEF41383AA1196F12**

Amount of Each Receipt this Period **100.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>288.34</b>
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Steven G. Lloyd PhD, FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5949 Crestwood Cir  
 City Birmingham State AL Zip Code 35212-4033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The University of Alabama at Birmingha Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : B9C1C32A07F8C7BE064**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Sunil V. Mankad FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 1st St SW Gonda 5 South Room 5-209  
 City Rochester State MN Zip Code 55905-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mayo Clinic Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 499.98

Date of Receipt 06 / 12 / 2016  
**Transaction ID : 44B58B463D409B2BF9C3**  
 Amount of Each Receipt this Period 83.33  
 Memo Item

**C. Laxmi S. Mehta FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5037 Canterbury Dr  
 City Powell State OH Zip Code 43065-8615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ohio State University Occupation PREVENTIVE CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.04

Date of Receipt 06 / 07 / 2016  
**Transaction ID : 4AD088D009E7D11B3398**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1166.67
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Marc A. Mugmon FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7193 Collingwood Ct  
 City Elkridge State MD Zip Code 21075-5548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Chesapeake CardioVascular Associates Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.04**

Date of Receipt **06 / 15 / 2016**  
**Transaction ID : 42939049406262466906**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

**B. William H. Pentz FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 230 W Washington Sq FI 3  
 City Philadelphia State PA Zip Code 19106-3500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Penn Cardiology At Pennsylvania Hospit Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **540.00**

Date of Receipt **06 / 01 / 2016**  
**Transaction ID : 43A2A9CF730E12A06F09**  
 Amount of Each Receipt this Period **90.00**  
 Memo Item

**c. Neal S. Perlmutter FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7002 126th Ave NE  
 City Kirkland State WA Zip Code 98033-8325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.08**

Date of Receipt **06 / 07 / 2016**  
**Transaction ID : 4BEBA833769676212472**  
 Amount of Each Receipt this Period **41.68**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>215.02</b>
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Matthew Phillips FACC**

Full Name (Last, First, Middle Initial)  
Matthew Phillips FACC

Mailing Address 12721 Monte Castillo Pkwy

City Austin State TX Zip Code 78732-1631

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

Name of Employer Austin Heart, P.A. Occupation ADULT CARDIOLOGY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1083.42

Date of Receipt 06 / 20 / 2016  
**Transaction ID : 4C75B19BBA066F32C88C**

Amount of Each Receipt this Period 83.34

Memo Item

**B. Matthew Phillips FACC**

Full Name (Last, First, Middle Initial)  
Matthew Phillips FACC

Mailing Address 12721 Monte Castillo Pkwy

City Austin State TX Zip Code 78732-1631

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

Name of Employer Austin Heart, P.A. Occupation ADULT CARDIOLOGY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1083.42

Date of Receipt 06 / 28 / 2016  
**Transaction ID : 46689BA1726EECC4C5AE**

Amount of Each Receipt this Period 83.34

Memo Item

**C. John W. Pickrell FACC**

Full Name (Last, First, Middle Initial)  
John W. Pickrell FACC

Mailing Address 1230 E 1st St

City Casper State WY Zip Code 82601-2704

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

Name of Employer Wyoming CardioPulmonary Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 06 / 18 / 2016  
**Transaction ID : 4D17B2A788117DDB5E77**

Amount of Each Receipt this Period 85.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.68

**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 22 OF 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**American College of Cardiology Political Action Committee**

**A. James B. Powers F.A.C.C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Bowdoin Dr  
 City Falmouth State ME Zip Code 04105-2557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Maine Cardiology Associates Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 28 / 2016  
**Transaction ID : 49E891EF9BC30CE18893**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. George P. Rodgers FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2441 Westlake Dr  
 City Austin State TX Zip Code 78746-2950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Seton Heart Institute Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 792.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : 44698169C01DAF5E0610**  
 Amount of Each Receipt this Period 98.00  
 Memo Item

**c. John S. Rumsfeld PHD, FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 S Cherry St  
 City Denver State CO Zip Code 80246-1031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American College of Cardiology Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 25 / 2016  
**Transaction ID : 47029292300B0AF529D0**  
 Amount of Each Receipt this Period 83.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	281.33
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Stanley J. Shin FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 108 Sussex Retreat  
 City Pooler State GA Zip Code 31322-9623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Statesboro Cardiology, P.C. Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 1250.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : F895820B89C24EEEF1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. David L. Smith FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3682 E Brandon Way  
 City Doylestown State PA Zip Code 18902-6225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Doylestown Cardiology Associates Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 250.00

Date of Receipt 06 / 20 / 2016  
**Transaction ID : 66D7223F00C8A6AF8BA**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. J. Raul Soto FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 Grants Lake Cir  
 City Sugar Land State TX Zip Code 77479-1382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation ADULT CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify)  Memo Item  
 Aggregate Year-to-Date 300.00

Date of Receipt 06 / 20 / 2016  
**Transaction ID : 2380C63E0830F4EFCDF**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **800.00**  
**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 26 OF 36
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**American College of Cardiology Political Action Committee**

**A. Howard T. Walpole MBA, FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2581 Bridgewater Cir  
 City Gainesville State GA Zip Code 30506-1857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Northeast Georgia Health System Occupation INTERVENTIONAL CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.02

Date of Receipt 06 / 27 / 2016  
**Transaction ID : 47E0B5FA433D8C3E9B06**  
 Amount of Each Receipt this Period 83.33  
 Memo Item

**B. Howard T. Walpole MBA, FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2581 Bridgewater Cir  
 City Gainesville State GA Zip Code 30506-1857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Northeast Georgia Health System Occupation INTERVENTIONAL CARDIOLOGY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.02

Date of Receipt 06 / 28 / 2016  
**Transaction ID : 43C0A5DF38ECCD809374**  
 Amount of Each Receipt this Period 83.34  
 Memo Item

**c. Mary Norine Walsh FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 428 W 83rd PI  
 City Indianapolis State IN Zip Code 46260-4905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St Vincent Heart Center of Indiana Occupation HEART FAILURE/TRANSPLANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 29 / 2016  
**Transaction ID : 46F9B87B875A6124070C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	266.67
<b>TOTAL</b> 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 36
	<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)  
**American College of Cardiology Political Action Committee**

**A. Bruce A. Watt FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 221 E 21st St  
 City State Zip Code  
 Sioux Falls SD 57105-1924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 North Central Heart Institute ADULT CARDIOLOGY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 499.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : 4B95903DB1BCB06697FA**  
 Amount of Each Receipt this Period  
 83.33  
 Memo Item

**B. Patrick J. Withrow FACC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6205 Houser Rd  
 City State Zip Code  
 Paducah KY 42003-9211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Western Baptist Church ADULT CARDIOLOGY  
 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  
 06 / 22 / 2016  
**Transaction ID : F40FF00672D7894FF36**  
 Amount of Each Receipt this Period  
 250.00  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	333.33
<b>TOTAL</b> This Period (last page this line number only).....	16206.38

**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 28 OF 36
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**American College of Cardiology Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**American College of Cardiology - Admin Account**

Mailing Address P.O. Box 85024

City Richmond State VA Zip Code 23285-5024

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7322.66

Date of Receipt  
06 / 20 / 2016  
**Transaction ID : CB42B0054EED186956E**

Amount of Each Receipt this Period  
355.03

Memo Item  
Reimbursement for May 2016 Amex Fees and June 2016 Merchant Fees

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	355.03
<b>TOTAL</b> This Period (last page this line number only).....▶	355.03

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

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

FOR LINE NUMBER: PAGE 29 OF 36  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	--	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**American College of Cardiology Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Ami Bera for Congress**

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758

FEC ID number of contributing federal political committee. **C** C00461061

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2016

**Transaction ID : 9D5F2973FBD8FE1F282**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
Refund of 2016 General contribution

**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  
 M M / D D / Y Y Y Y Y Y

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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

**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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
June 2016 Amex Fees

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

Transaction ID : VD814A1A106721AC805C

Amount of Each Disbursement this Period

92.43

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo, N.A.**

Mailing Address C/O Nova Information Systems  
7300 Chapman Hwy

City Knoxville State TN Zip Code 37920

Purpose of Disbursement  
June 2016 Merchant Fees

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2016

Transaction ID : M3C9AFB2B23143F10F0B

Amount of Each Disbursement this Period

303.28

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

395.71

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

395.71

**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)

**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bluegrass Committee**

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement  
2016 Contribution

011

Category/  
Type

Candidate Name

**Bluegrass Committee**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Contribution

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 1A71E813DBF4DE0575A

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Charlie Dent for Congress**

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105-0442

Purpose of Disbursement  
2016 General

011

Category/  
Type

Candidate Name

**Charles W. Dent**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Contribution

State: PA District: 15

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 12E2C55E0C565208F4B

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Citizens for Rush**

Mailing Address PO Box 7292

City Chicago State IL Zip Code 60680-7292

Purpose of Disbursement  
2016 General

011

Category/  
Type

Candidate Name

**Bobby Lee Rush**

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Contribution

State: IL District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 855914503BBF8078AD0

Amount of Each Disbursement this Period

5000.00

Memo Item

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

11000.00

**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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Continuing America's Strength and Security PAC**

Mailing Address PO Box 80505

City State Zip Code  
Baton Rouge LA 70898

Purpose of Disbursement  
2016 Contribution

011

Candidate Name

**Continuing America's Strength and Security PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 1DE8FF37DFD0C198FDC

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Diane Black for Congress**

Mailing Address PO Box 1437

City State Zip Code  
Gallatin TN 37066-1437

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Diane Lynn Black**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : D59E61DDDA19E39FDC9

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Dr. Matt Heinz for Arizona**

Mailing Address PO Box 57698

City State Zip Code  
Tucson AZ 85732

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Matthew G. Heinz**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 9E0B911E9BA00017CA9

Amount of Each Disbursement this Period

2500.00

Memo Item

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

4500.00

**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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Joe Heck**

Mailing Address PO Box 753908

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement  
2016 General

011

Candidate Name

**Joseph John Heck Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2016

**Transaction ID : 9040194524A2B985D4F**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of John Thune**

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**John Randolph Thune**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SD District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2016

**Transaction ID : 0F95DA726413A74E172**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Pat Toomey**

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
2016 General

011

Candidate Name

**Patrick Joseph Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : 0DAA9CAEF84735A13B4**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

6500.00

**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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Raja for Congress**

Mailing Address PO Box 681202

City State Zip Code  
Schaumburg IL 60168

Purpose of Disbursement  
2016 General

011

Category/  
Type

Candidate Name

**S. Raja Krishnamoorthi**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 08

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 952B2AE53D781C6CE51

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Grassley Committee Inc**

Mailing Address PO Box 1000

City State Zip Code  
Des Moines IA 50304-1000

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name

**Charles E. Grassley**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2016

Transaction ID : 7BD3A6188B44A3A4C05

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. IMPACT**

Mailing Address 192 Lexington Ave.  
Suite 1001

City State Zip Code  
New York NY 10016

Purpose of Disbursement  
Voided 5/10/16 Disbursement

011

Category/  
Type

Candidate Name

**IMPACT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2016

Transaction ID : 8A7E9F0D0C429CD082E

Amount of Each Disbursement this Period

-2500.00

Memo Item

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

0.00

**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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kind for Congress Committee**

Mailing Address 205 5th Avenue S  
Room 428

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
2016 General

011

Candidate Name

**Ronald James Kind**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 6B3E1EA04DD17019A80

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Matsui for Congress**

Mailing Address PO Box 1738

City Sacramento State CA Zip Code 95812

Purpose of Disbursement  
2016 General

011

Candidate Name

**Doris O. Matsui**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 9094049A1A06660F593

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Moulton for Congress**

Mailing Address PO Box 2013

City Salem State MA Zip Code 01970

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Seth W. Moulton**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

Transaction ID : 2A234E90FADABFC959D

Amount of Each Disbursement this Period

1000.00

Memo Item

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

11000.00

**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)  
**American College of Cardiology Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Pascrell for Congress**

Mailing Address POB 100

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement  
2016 General

011

Candidate Name

**William James Pascrell Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	6

Transaction ID : 4D06DDFE3BD60BF0982

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Wyden for Senate**

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement  
2016 General

011

Candidate Name

**Ron L. Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	6

Transaction ID : 376C0673620E1FD9AED

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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Memo Item

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

5	0	0	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

3	8	0	0	.	0	0
---	---	---	---	---	---	---