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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3X	For Other Than An Ai	uthorized Commi	ttee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If ty over the lines.		12FE4M5	
SOCIETY FOR CARE	DIOVASCULAR ANGIO	GRAPHY AND I	NTERVENTI	ONS ASS	OCIATION PAC
	1100 17th Street, NW				
ADDRESS (number and street)	Suite 330				
Check if different than previously reported. (ACC)	WASHINGTON			DC	20036
2. FEC IDENTIFICATION	NUMBER ▼	CITY A	S	TATE 🛦	ZIP CODE ▲
C C00519371	3.	IS THIS REPORT	NEW (N) <b>OR</b>	X AME	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	eb 20 (M2)	May 20 (M5)		0 (M8) Nov 20 (M11) (Non-Election Year Only) 0 (M9) Dec 20 (M12)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M7)		(Non-Election Year Only)
April 15 Quarterly Report		Primary (1	Jul 20 (M7)	General (1	2G) Jan 31 (YE) Runoff (12R)
July 15 Quarterly Report	PRE-Election			Special (12	
October 15 Quarterly Report	·	M M M	/ D D / Y	y y y	
January 31 Year-End Repor	t (YE) Elec	etion on			in the State of
July 31 Mid-Yea Report (Non-ele Year Only) (MY)	ction (d) 30-Day	,	0G)	Runoff (30	R) Special (30S)
Termination Rep (TER)	ort	etion on	/ D = D / Y	YYYY	in the State of
5. Covering Period	11 01 / Y Y Y 1	through	M - M	30	2013
I certify that I have examined	•	of my knowledge and	d belief it is true	, correct and	complete.
Type or Print Name of Treas	urer Norman Marc Linsky				
Signature of Treasurer $\frac{N}{r}$	orman Marc Linsky	[Electronico	<i>ally Filed]</i> Da	te 01	27 / 2014
NOTE: Submission of false, en	roneous, or incomplete informat	tion may subject the p	erson signing this	Report to the	penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### SOCIETY FOR CARDIOVASCULAR ANGIOGRAPHY AND INTERVENTIONS ASSOCIATION PAC

2013 30 2013 Report Covering the Period: 11 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 20750.01 January 1, 2013 (b) Cash on Hand at 44298.01 Beginning of Reporting Period..... 31548.00 500.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 44798.01 52298.01 6(a) and 6(c) for Column B)..... 0.00 7500.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 44798.01 44798.01 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### SOCIETY FOR CARDIOVASCULAR ANGIOGRAPHY AND INTERVENTIONS ASSOCIATION PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
ntributions (other than loans) From:						
	500.00	30018.00				
(i) Itemized (use Schedule A)	000.00	7				
(ii) Unitemized	0.00	1530.00				
Lines 11(a)(i) and (ii)	, 500.00	31548.00				
Political Party Committees	0.00	0.00				
Other Political Committees (such as PACs)	0.00	0.00				
Total Contributions (add Lines						
Totals to Line 33, page 5)▶	500.00	31548.00				
ty Committees	0.00	0.00				
Loans Received	0.00	0.00				
n Repayments Received	0.00	0.00				
sets To Operating Expenditures						
· · · · · · · · · · · · · · · · · · ·						
	0.00	0.00				
		0.00				
	0.00	0.00				
·	0.00	0.00				
nsfers from Non-Federal and Levin Funds	0.00	0.00				
	0.00	0.00				
(IIIIII ochedule 110)	0.00	0.00				
Levin Funds (from Schedule H5)	0.00	0.00				
Total Transfers (add 18(a) and 18(b))	0.00	0.00				
	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	tributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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ı	I. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Operating	Expenditures: ated Federal/Non-Federal	1000 11100	Valendal Tear-to-Date
	ty (from Schedule H4)		
(i) I	Federal Share	0.00	0.00
(ii)	Non-Federal Share	0.00	0.00
(b) Other	Federal Operating		
-	nditures	0.00	0.00
	Operating Expenditures 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	to Affiliated/Other Party		
Committee Contribution	es	0.00	0.00
Federal C and Other	andidates/Committees Political Committees	0.00	7500.00
-	ent Expenditures edule E)	0.00	0.00
Coordinate	ed Party Expenditures		
(use Sche	§441a(d)) dule F)	0.00	0.00
Loan Rep	ayments Made	0.00	0.00
Loans Ma Refunds o	def Contributions To:	0.00	0.00
(a) Indivi	duals/Persons Other Political Committees	0.00	0.00
(b) Politic	cal Party Committees	0.00	0.00
	Political Committees		200
(such	as PACs)	0.00	0.00
(d) Total	Contribution Refunds		
(add	Lines 28(a), (b), and (c))▶	0.00	0.00
Other Dis	bursements	0.00	0.00
Federal F	lection Activity (2 U.S.C. §431(20))		
	ated Federal Election Activity		
	Schedule H6)	0.00	0.00
(1) F6	deral Share	0.00	
` '	evin" Share	0.00	0.00
	ral Election Activity Paid Entirely With Federal Funds	0.00	0.00
	Federal Election Activity (add		
Line	s 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disb	ursements (add Lines 21(c), 22,		
23, 24, 25	5, 26, 27, 28(d), 29 and 30(c))	0.00	7500.00
	eral Disbursements		
	Line 21(a)(ii) and Line 30(a)(ii)	0.00	7500.00
from Line	31)	0.00	7500.00

#### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	500.00	31548.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	500.00	31548.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER:				PAGE		6	OF		6	
(check only one)										
×	11a		11b		11c		12			
	13		14		15		16			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 FOR CARDIOVASCULAR ANGIOGRAPHY AND INTERVENTIONS ASSOCIATION PAC Full Name (Last, First, Middle Initial) Dr. Bonnie Weiner Date of Receipt Mailing Address Post Office Box 707 2013 11 15 City Zip Code State Transaction ID: SA11AI.4403 MA Harvard 01451 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Bonnie H Weiner MD PC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 4500.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00 TOTAL This Period (last page this line number only).....