

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="46326.98"/>	<input type="text" value="46326.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27599.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12922.72"/>	<input type="text" value="290462.33"/>
(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="40522.71"/>	<input type="text" value="336789.31"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3698.58"/>	<input type="text" value="299965.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="36824.13"/>	<input type="text" value="36824.13"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	11712.84	236582.73
(ii) Unitemized	630.34	45060.31
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12343.18	281643.04
(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)	12343.18	281643.04
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).....	579.54	8819.29
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))..... ▶	12922.72	290462.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12922.72	290462.33

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	573.58	8764.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	573.58	8764.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	286500.00
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	2125.00	4701.00
(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)).....	2125.00	4701.00
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)) ..	3698.58	299965.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3698.58	299965.18

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)	12343.18	281643.04
34. Total Contribution Refunds (from Line 28(d))	2125.00	4701.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10218.18	276942.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	573.58	8764.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	579.54	8819.29
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-5.96	-55.11

**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 30
	<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)
American College of Cardiology Political Action Committee

A. Jay H. Alexander F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2151 Waukegan Rd
 Ste 100
 City Bannockburn State IL Zip Code 60015-1885
 FEC ID number of contributing federal political committee. **C**
 Name of Employer North Shore Cardiologists, SC Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1500.00**

Date of Receipt **07 / 07 / 2014**
Transaction ID : 4ADBB748A550831E26FF
 Amount of Each Receipt this Period **250.00**

B. Najib M. Alturk F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 Glendale Dr
 City Toms River State NJ Zip Code 08753-3619
 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 **500.00**

Date of Receipt **07 / 21 / 2014**
Transaction ID : 0A023672BAED768F769
 Amount of Each Receipt this Period **500.00**

C. Juan M. Aranda F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 14424 NW 11th Pl
 City Newberry State FL Zip Code 32669-2963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shands at the University of Florida Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.02**

Date of Receipt **07 / 07 / 2014**
Transaction ID : 43439BAD975A8FD715B9
 Amount of Each Receipt this Period **166.67**

SUBTOTAL of Receipts This Page (optional)..... **916.67**
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 7 OF 30
	<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. Nizar A. Assi F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 10012 Kennerly Rd
 Ste 301
 City Saint Louis State MO Zip Code 63128-2197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway Cardiology, PC Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.94

Date of Receipt 07 / 25 / 2014
Transaction ID : 4B76A0F9FDAA9FBB6EEE
 Amount of Each Receipt this Period 30.42

B. Alfred A. Bove PHD, M.A.C
 Full Name (Last, First, Middle Initial)
 Mailing Address 3401 N Broad St
 Parkinson Pavilion Ste 920
 City Philadelphia State PA Zip Code 19140-5103
 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 ▼ 700.00

Date of Receipt 07 / 25 / 2014
Transaction ID : 45F8912444B3E6C05A7B
 Amount of Each Receipt this Period 100.00

C. Ralph G. Brindis MPH, M.A.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1410 Monterey Blvd
 City San Francisco State CA Zip Code 94127-2554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Philip R. Lee Institute For Health Pol Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 07 / 2014
Transaction ID : 4DDEB7D2D24EB4EC822E
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 180.42
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 30
	<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. Joseph G. Cacchione F.A.C.C.

Full Name (Last, First, Middle Initial)
Mailing Address 9500 Euclid Ave
Desk J2-3

City Cleveland State OH Zip Code 44195-0001

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

Name of Employer Cleveland Clinic Foundation Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt
07 / 25 / 2014
Transaction ID : 4828901A6155DB10D86C

Amount of Each Receipt this Period
125.00

B. Peter J. Chaille F.A.C.C.

Full Name (Last, First, Middle Initial)
Mailing Address 427 Chestnut Forest Cv
Parkview Physicians Group, Cardiol

City Fort Wayne State IN Zip Code 46814-8926

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

Name of Employer Parkview Physicians Group, Cardiology Occupation INTERVENTIONAL CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **291.62**

Date of Receipt
07 / 03 / 2014
Transaction ID : 48C9BA225BD5FA6EB024

Amount of Each Receipt this Period
41.66

c. Hollace D. Chastain F.A.C.C.

Full Name (Last, First, Middle Initial)
Mailing Address 1819 Braemar Dr

City Fort Wayne State IN Zip Code 46814-9364

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

Name of Employer Fort Wayne Cardiology Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
07 / 29 / 2014
Transaction ID : 481D8B01E8784D41F8E4

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **266.66**

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 10 OF 30
	<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. Debbie J. Cragen
Full Name (Last, First, Middle Initial)

Mailing Address 8078 Shorewalk Dr

City Indianapolis State IN Zip Code 46236-8539

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 07 / 31 / 2014
Transaction ID : 71EC696B2793BD1B53C

Amount of Each Receipt this Period 250.00

B. George H. Crossley F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 276 Stratton Pl Ste 400

City Brentwood State TN Zip Code 37027-4228

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

Name of Employer St. Thomas Heart Occupation ELECTROPHYSIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 25 / 2014
Transaction ID : 4AAB86D1E7C105739088

Amount of Each Receipt this Period 250.00

c. Timothy A. Dewhurst F.A.C.C.
Full Name (Last, First, Middle Initial)

Mailing Address 4819 18th Ave SW

City Seattle State WA Zip Code 98106-1548

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 ▼ 600.00

Date of Receipt 07 / 07 / 2014
Transaction ID : 410391D5B258A4FE686C

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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 11 OF 30
	<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. Arthur Lee Eberly F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 8795
 City Greenville State SC Zip Code 29604-8795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carolina Cardiology Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : 42F6BA7394DA57CB1D04
 Amount of Each Receipt this Period
 41.67

B. Richard Ericson F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 Lake Front Ct
 City Modesto State CA Zip Code 95355-2262
 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 ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2014
Transaction ID : 49AD8D1EA31C2BE22BD6
 Amount of Each Receipt this Period
 15.00

C. David M. Evans F.A.C.C.
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2014
Transaction ID : 45E48630CF69E1471BDE
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	156.67
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 12 OF 30
	<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. Kevin Fitzpatrick		Date of Receipt
Mailing Address 2400 N St NW Heart House		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20037-1153
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 4D74A6BFECB2F9D94F67
Name of Employer American College of Cardiology	Occupation ADMINISTRATION	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="83.34"/>
	<input type="text" value="583.38"/>	

Full Name (Last, First, Middle Initial) B. Edward T. A. Fry F.A.C.C.		Date of Receipt
Mailing Address 160 E 71st St # 300		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City Indianapolis	State IN	Zip Code 46220-1012
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 435FAA917BE4B114B70A
Name of Employer St. Vincent Medical Group	Occupation INTERVENTIONAL CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) C. Michael F. Gilson F.A.C.C.		Date of Receipt
Mailing Address 950 Warren Ave		<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City East Providence	State RI	Zip Code 02914-1432
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 46B8A883C9DE0BA98290
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
	<input type="text" value="700.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="283.34"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 30
	<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 F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Colchester Ave
 C/O Roberta Frohock, Unit McClure
 City Burlington State VT Zip Code 05401-1473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Interventional-Univ. of Vermont/Fletch
 Occupation: INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.04**

Date of Receipt: 07 / 28 / 2014
Transaction ID : 447390B57EEB61770436
 Amount of Each Receipt this Period: **83.34**

B. Thomas A. Haffey F.A.C.C.
 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: Self-Employed
 Occupation: ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **333.36**

Date of Receipt: 07 / 01 / 2014
Transaction ID : 419290603535123A29DE
 Amount of Each Receipt this Period: **83.34**

C. Todd Geoffrey Hickox F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 E Michigan Ave
 Ste 525
 City Lansing State MI Zip Code 48912-1893
 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 **300.00**

Date of Receipt: 07 / 22 / 2014
Transaction ID : 61A1C8D6CAA4265C502
 Amount of Each Receipt this Period: **200.00**

SUBTOTAL of Receipts This Page (optional)..... **366.68**
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: (check only one)	PAGE 14 OF 30
	<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

A. David R. Holmes M.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 1st St SW
 Smh Mg4-523
 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 **583.38**

Date of Receipt **07 / 25 / 2014**
Transaction ID : 4929AA17FA880E06F10F
 Amount of Each Receipt this Period **83.34**

B. Daniel J. Humiston F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2132 N 1700 W
 Ste 200
 City Layton State UT Zip Code 84041-7060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Utah Cardiology, PC Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1458.37**

Date of Receipt **07 / 07 / 2014**
Transaction ID : 4EA2B428BD8345DE0741
 Amount of Each Receipt this Period **208.34**

c. Steven E. Kornberg F.A.C.C.
 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 **291.62**

Date of Receipt **07 / 18 / 2014**
Transaction ID : 4E75B1D3031B4F303E00
 Amount of Each Receipt this Period **41.66**

SUBTOTAL of Receipts This Page (optional)..... **333.34**
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 15 OF 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Smadar Kort F.A.C.C.
 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 Occupation
 Stony Brook University Medical Center ECHOCARDIOGRAPHY
 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
 07 / 07 / 2014
Transaction ID : 4C4C8D25BDC76A70F242
 Amount of Each Receipt this Period
 83.34

B. Prajapathi R Lakireddy
 Full Name (Last, First, Middle Initial)
 Mailing Address 730 Farmington Ave # 202
 City West Hartford State CT Zip Code 06119-1743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Univ. of Connecticut Health Center ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014
Transaction ID : 3BF16611F2F5F378485
 Amount of Each Receipt this Period
 250.00

C. Gilead I. Lancaster F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 267 Grant St
 City Bridgeport State CT Zip Code 06610-2805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bridgeport Hospital Dept of Echo ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2014
Transaction ID : 46DC91A03CDC8ADD066C
 Amount of Each Receipt this Period
 83.34

SUBTOTAL of Receipts This Page (optional)..... ▶ 416.68
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: (check only one)	PAGE 16 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Judith C. Lenane
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 W Sheridan Pl
 City Lake Bluff State IL Zip Code 60044-2325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer iRhythm Technologies, Inc. Occupation ELECTROPHYSIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 100.00

Date of Receipt 07 / 21 / 2014
Transaction ID : 8CFE09909FDC9597B2E
 Amount of Each Receipt this Period 100.00

B. Norman E. Lepor F.A.C.C.
 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 383.33

Date of Receipt 07 / 21 / 2014
Transaction ID : 47C69C6796DA29D4B9BD
 Amount of Each Receipt this Period 83.33

C. Sandra J. Lewis F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2222 NW Lovejoy St Ste 606
 City Portland State OR Zip Code 97210-5104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NW Cardiovascular Institute Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.04

Date of Receipt 07 / 07 / 2014
Transaction ID : 4ECE9A508713B6398FCE
 Amount of Each Receipt this Period 83.34

SUBTOTAL of Receipts This Page (optional).....▶ 266.67
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 17 OF 30
<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

Full Name (Last, First, Middle Initial) A. Sunil V. Mankad F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 12 / 2014 Transaction ID : 4C3BAFCB3CA6F13866E5
Mailing Address 200 1st St SW Gonda 5 South Room 5-209		Amount of Each Receipt this Period 83.33
City Rochester	State MN Zip Code 55905-0001	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 666.65
Name of Employer Mayo Clinic	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Clyde R. Meckel F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 30 / 2014 Transaction ID : 73FB8092-5A2D-4A63-
Mailing Address 1600 S 48th St Ste 600		Amount of Each Receipt this Period 250.00
City Lincoln	State NE Zip Code 68506-1275	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Bryan LGH Heart Institute	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Margo B. Minissian MSN, CNS,		Date of Receipt MM / DD / YYYY 07 / 16 / 2014 Transaction ID : 4FD59B17935ED2A89985
Mailing Address 127 S San Vicente Blvd Ste A9306		Amount of Each Receipt this Period 184.00
City Los Angeles	State CA Zip Code 90048-3311	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1288.00
Name of Employer Cedars Sinai Heart Institute Womens He	Occupation PREVENTIVE CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	517.33
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 18 OF 30
	(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"/> 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 F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3333 N Calvert St
 Ste 500
 City Baltimore State MD Zip Code 21218-6502
 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 **833.38**

Date of Receipt **07 / 31 / 2014**
Transaction ID : 419EA0C43695580B5858
 Amount of Each Receipt this Period **83.34**

B. John V. Olsen F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 17th Ave
 Ste 680
 City Seattle State WA Zip Code 98122-5795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Swedish Heart and Vascular Clinic Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **07 / 22 / 2014**
Transaction ID : AD9083D15DB25EBA531
 Amount of Each Receipt this Period **250.00**

c. Vaughn W. Payne F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2018 Fairway Vista Dr
 City Louisville State KY Zip Code 40245-6527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kentucky Heart Institute Occupation ADULT CARDIOLOGY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **583.31**

Date of Receipt **07 / 25 / 2014**
Transaction ID : 4D50A5D86084F15B185F
 Amount of Each Receipt this Period **83.33**

SUBTOTAL of Receipts This Page (optional)..... **416.67**
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 19 OF 30
	<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"/> 18

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

Full Name (Last, First, Middle Initial) A. William H. Pentz F.A.C.C.		Date of Receipt
Mailing Address 230 W Washington Sq FI 3		M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2014
City Philadelphia	State PA	Zip Code 19106-3500
FEC ID number of contributing federal political committee. C		Transaction ID : 4C7296947F900C3D3022
Name of Employer Penn Cardiology At Pennsylvania Hospit	Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period 90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) B. Matthew Phillips F.A.C.C.		Date of Receipt
Mailing Address 12721 Monte Castillo Pkwy Ste 300		M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2014
City Austin	State TX	Zip Code 78732-1631
FEC ID number of contributing federal political committee. C		Transaction ID : 468F8CC284F84A9815B8
Name of Employer Austin Heart, P.A.	Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. John W. Pickrell F.A.C.C.		Date of Receipt
Mailing Address 1230 E 1st St		M M M / D D D / Y Y Y Y Y Y 07 / 18 / 2014
City Casper	State WY	Zip Code 82601-2704
FEC ID number of contributing federal political committee. C		Transaction ID : 45639041E0A8DD9D57A7
Name of Employer Wyoming CardioPulmonary	Occupation CLINICAL CARDIOLOGY/GENERAL CARDIO	Amount of Each Receipt this Period 85.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 20 OF 30
	<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

A. Geetha Raghuveer F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5354 Mission Woods Rd
 City Shawnee Mission State KS Zip Code 66205-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Children's Mercy Hospital Occupation PEDIATRIC CARD.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : 2F9C6FD5265CB6B9B6C
 Amount of Each Receipt this Period **1000.00**

B. George P. Rodgers F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 11673 Jollyville Rd Ste 205-B
 City Austin State TX Zip Code 78759-4200
 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 **583.37**

Date of Receipt **07 / 23 / 2014**
Transaction ID : 4A7985AD1891544A14D3
 Amount of Each Receipt this Period **83.34**

c. Orlando Rodriguez-Vila F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 33038
 City San Juan State PR Zip Code 00933-3038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ORV Interventional Cardiology Occupation INTERVENTIONAL CARDIOLOGY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.04**

Date of Receipt **07 / 07 / 2014**
Transaction ID : 4F6BAF6256D98CFE9DA9
 Amount of Each Receipt this Period **83.34**

SUBTOTAL of Receipts This Page (optional).....	1166.68
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: (check only one)	PAGE 21 OF 30
	<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. Felix J. Rogers F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 22 / 2014 Transaction ID : ACAB88C0631D4D28F11
Mailing Address 23050 West Rd Ste 120		Amount of Each Receipt this Period 250.00
City Brownstown Twp	State MI	Zip Code 48183-1470
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. David A. Rosenbaum F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 07 / 2014 Transaction ID : 43AD9331B2ED0A82C5F3
Mailing Address 14585 Millhaven Pl Ste 460		Amount of Each Receipt this Period 83.34
City Colorado Springs	State CO	Zip Code 80908-3267
FEC ID number of contributing federal political committee. C	Name of Employer UC Health Cardiology	Occupation CLINICAL CARDIOLOGY/GENERAL CARDIOI
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	

Full Name (Last, First, Middle Initial) C. John S. Rumsfeld PHD, F.A.C		Date of Receipt MM / DD / YYYY 07 / 25 / 2014 Transaction ID : 4232862EB5CE2F120F3B
Mailing Address 130 S Cherry St Cardiology (111B)		Amount of Each Receipt this Period 83.33
City Denver	State CO	Zip Code 80246-1031
FEC ID number of contributing federal political committee. C	Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 583.31	

SUBTOTAL of Receipts This Page (optional).....▶	416.67
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 22 OF 30
	<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 E. Shelton F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3700 Vanderbilt Cir
 PO Box 19420, Ste 4
 City Springfield State IL Zip Code 62711-4012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Prairie Cardiovascular Consultants Ltd ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2014
Transaction ID : 4CB2876BDE85E41327B3
 Amount of Each Receipt this Period
 83.33

B. John W. Shuck F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 Forrest Ave
 City Dover State DE Zip Code 19904-3309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cardiology Consultants ADULT CARDIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2014
Transaction ID : 4DC7B08D4ED51F1378A1
 Amount of Each Receipt this Period
 83.33

c. Michael J. Springer F.A.C.C.
 Full Name (Last, First, Middle Initial)
 Mailing Address 803 Towner Pl
 Ste 305
 City Louisville State KY Zip Code 40223-2568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Medical Center Cardiologists ELECTROPHYSIOLOGY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 291.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : 4D4DA8F7717F3C82954B
 Amount of Each Receipt this Period
 41.66

SUBTOTAL of Receipts This Page (optional).....▶	208.32
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 23 OF 30
	<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. Rajesh V. Swaminathan F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 22 / 2014 Transaction ID : 85B1C827-2833-4174-
Mailing Address 430 E 63rd St Apt 10L		Amount of Each Receipt this Period 250.00
City New York	State NY	
Zip Code 10065-0045		Aggregate Year-to-Date ▼ 350.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Suma A. Thomas F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 25 / 2014 Transaction ID : 41128BBACFE0138450A4
Mailing Address 701 W Lakeside Ave Apt 1008		Amount of Each Receipt this Period 208.34
City Cleveland	State OH	
Zip Code 44113-5518		Aggregate Year-to-Date ▼ 1458.38
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thad F. Waites F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 07 / 2014 Transaction ID : 4D7E8B51E36B03E890FD
Mailing Address 1017 Richburg Rd		Amount of Each Receipt this Period 208.34
City Hattiesburg	State MS	
Zip Code 39402-9055		Aggregate Year-to-Date ▼ 1250.04
FEC ID number of contributing federal political committee. C		
Name of Employer Southern Heart Center	Occupation INTERVENTIONAL CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	666.68
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: (check only one)	PAGE 25 OF 30
	<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

Full Name (Last, First, Middle Initial) A. Steven R. West F.A.C.C.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 25 / 2014 Transaction ID : 4CC99AB7D0F172BBECDE
Mailing Address 425 Mutton Creek Dr Ste 120		Amount of Each Receipt this Period 41.67
City Seymour	State IN	Zip Code 47274-4039
FEC ID number of contributing federal political committee. C		
Name of Employer St. Vincent Medical Group	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	

Full Name (Last, First, Middle Initial) B. Donald R. Westerhausen F.A.C.C.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 21 / 2014 Transaction ID : D1C7E0B1894443BEF4B
Mailing Address 52346 Spring Arbor Ct Ste 400		Amount of Each Receipt this Period 2000.00
City Granger	State IN	Zip Code 46530-6247
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Michael J. Wolk MD		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2014 Transaction ID : 4E3CBEE982A993657367
Mailing Address 876 Park Ave		Amount of Each Receipt this Period 83.34
City New York	State NY	Zip Code 10075-1832
FEC ID number of contributing federal political committee. C		
Name of Employer New York Cardiology Associates	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

SUBTOTAL of Receipts This Page (optional).....▶	2125.01
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 26 OF 30
	<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. Richard F. Wright F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 07 / 2014 Transaction ID : 4137A95F232DF6FD38F9
Mailing Address 2001 Santa Monica Blvd Ste 280W		Amount of Each Receipt this Period 150.00
City Santa Monica	State CA	Zip Code 90404-2172
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Heart Institute	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Lambert A. Wu F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 07 / 2014 Transaction ID : 43358F69C1CD24467897
Mailing Address 929 SW Mulvane St		Amount of Each Receipt this Period 208.34
City Topeka	State KS	Zip Code 66606-1677
FEC ID number of contributing federal political committee. C		
Name of Employer Cotton O'Neil Heart Center	Occupation ECHOCARDIOLOGY/ECHOCARDIOGRAPHY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1333.38	

Full Name (Last, First, Middle Initial) C. Raymond S. Yen F.A.C.C.		Date of Receipt MM / DD / YYYY 07 / 08 / 2014 Transaction ID : A7B9F03F-A47A-4183-
Mailing Address 55 E California Blvd FI 3		Amount of Each Receipt this Period 1000.00
City Pasadena	State CA	Zip Code 91105-3944
FEC ID number of contributing federal political committee. C		
Name of Employer Southern California Heart Specialists	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1358.34
TOTAL This Period (last page this line number only).....▶	11712.84

**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 30
<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. American College of Cardiology - Admin Account

Full Name (Last, First, Middle Initial)
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 ▼
8819.29

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2014

Transaction ID : E513C56BF6A3E4C558E

Amount of Each Receipt this Period
579.54

Reimbursement for June Amex Fees and July 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

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

Amount of Each Receipt this Period

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	579.54
TOTAL This Period (last page this line number only).....▶	579.54

**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
July 2014 Amex Fees

001

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 Y Y
07 / 31 / 2014

Transaction ID : V0C8181224BAB21A15DF

Amount of Each Disbursement this Period

115.89

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
July 2014 Merchant Fees

001

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 Y Y
07 / 02 / 2014

Transaction ID : MDD3DEDE8C7D23A1DB7!

Amount of Each Disbursement this Period

457.69

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 Y Y

Amount of Each Disbursement this Period

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

573.58

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

573.58

**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 Michelle

Mailing Address PO Box 25422

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2014 General

011

Candidate Name
Michelle Lujan Grisham

Category/
Type

Office Sought: House
 Senate
 President
State: NM District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : 1DC3ACC01E07DFF9AE9

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

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

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

Amount of Each Disbursement this Period

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

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

Amount of Each Disbursement this Period

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

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

1000.00

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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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. Judith C. Lenane

Mailing Address 340 W Sheridan Pl

City Lake Bluff State IL Zip Code 60044-2325

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : C7E4B2FB23B7B028B67

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Donald R. Westerhausen F.A.C.C.

Mailing Address 52346 Spring Arbor Ct Ste 400

City Granger State IN Zip Code 46530-6247

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : A1DE8D9832D9ACCC149

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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