Image# 201707149066647560

07/14/2017 15 : 26

PAGE 1 / 32

FEC FORM 3X	AND DISI	OF RECEIPT BURSEMENT An Authorized Commit	S	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typ over the lines.	ing, type 12FE	4M5
ADDRESS (number and street)	4535 Dressler RD	NW		
Check if different				
than previously reported. (ACC)	Canton		OH	44718
2. FEC IDENTIFICATION N		CITY 🔺	STATE 🔺	ZIP CODE
C C00544957		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:		Apr 20 (M4)		Oct 20 (M10) An 31 (YE)
April 15 Quarterly Report	(Q1) (C) 12-Day	Primary (12		eral (12G) Runoff (12R)
July 15 Quarterly Report October 15	DDE-FIO	ction		cial (12S)
Quarterly Report January 31 Year-End Report		Election on		Y in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	POST-E	· · · · ·)G) Run	off (30R) Special (30S)
Termination Report (TER)	rt Report f	Election on		Y in the State of
	01 / 01 / Y	2017 through	06/ D 06/ 30	2017
I certify that I have examined Type or Print Name of Treasur	Panitch, Orlee, , ,	e best of my knowledge and	belief it is true, correc	t and complete.
Signature of Treasurer	nitch, Orlee, , ,	[Electronica		077 / D D / Y Y Y Y 14 2017
NOTE: Submission of false, erro	neous, or incomplete in	nformation may subject the pe	rson signing this Report	to the penalties of 52 U.S.C. § 30109
Office Use Only				FEC FORM 3X Rev. 05/2016

X

Γ	- FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
W	Vrite or Type Committee Name		
	JSACS PAC		
R	Report Covering the Period: From: 01	M / D D / Y Y Y Y 01 2017 To:	06 / Y Y Y Y Y 06 30 2017
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		33926.42
	(b) Cash on Hand at Beginning of Reporting Period	33926.42	
	(c) Total Receipts (from Line 19)	45370.22	45370.22
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	79296.64	79296.64
7.	Total Disbursements (from Line 31)	31500.00	31500.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	47796.64	47796.64
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

USACS PAC

Report Covering the Period: From: 01	01 2017 To	o: 06 30 2017		
I. Receipts	Receipts COLUMN A Total This Period			
Contributions (other than loops) From	Total This Feriod	Calendar Year-to-Date		
. Contributions (other than loans) From: (a) Individuals/Persons Other				
Than Political Committees				
(i) Itemized (use Schedule A)	34121.04	34121.04		
(ii) Unitemized	11249.18	11249.18		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)	45370.22	45370.22		
(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)	45370.22	45370.22		
. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
. All Loans Received	0.00	0.00		
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
. Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	0.00	0.00		
. Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
Transfers from Non-Federal and Levin Funds				
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
	4	474 474 474		
(b) Lovin Funds (from Schodule 45)	0.00	0.00		
(b) Levin Funds (from Schedule H5)		49. 49. 49.		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	0.00	0.00		
. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	45370.22	45370.22		
	-77-			
. Total Federal Receipts				

I

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. 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	0.00	0.00
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
. Transfers to Affiliated/Other Party Committees	0.00	0.00
. Contributions to Federal Candidates/Committees and Other Political Committees	27000.00	27000.00
Independent Expenditures	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made		0.00
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	
Than Political Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs) (d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including Non-Federal Donations)	4500.00	4500.00
Federal Election Activity (52 U.S.C. § 3010 (a) Allocated Federal Election Activity (from Schedule H6)	1(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	31500.00	31500.00
Total Federal Disbursements	49. 49. 47.	
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	31500.00	21500.00
	3100.00	31500.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form	3X	(Rev.	05/2016)
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III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

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L.		-			-	0.00
						45270.00
		7			-7	45370.22
						0.00
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F	+	-7-	-			0.00

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45370.22	7			-7		
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0.00	7	1	1	-	-	
45370.22						
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0.00						
0.00	7			-7		la de la compañía de
0.00						
	-7-			-7-		1.00

COLUMN B

Calendar Year-to-Date

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

171			Use separate schedule(s)	(ch	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c	12	47		
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC											
 A.	Full Name of Individual (Last, First, Middle Initia Aboutalib, Angela, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 2 East Erie Apt 3306			06 30 2017								
	City Chicago	State IL	Zip Code 60611					SA11AI. Receipt th				
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period							
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ical Director		Memo Item \$100.00/monthly							
	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00	1								
в.	Full Name of Individual (Last, First, Middle Initia Arwindekar, Amit, , ,	al) or Full Or	rganization Name		Date of	Re	·					
	Mailing Address 2043 W Mclean Ave	State Zip Code					06 30 2017 Transaction ID : SA11AI.6725					
	Chicago	IL	60647		Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		499.98								
Name of Employer (for Individual) USACS Medical Group, LTD		Occu Asso		Me \$83.33/m		b Item hly						
	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 499.98]								
C.	Full Name of Individual (Last, First, Middle Initia Atez, Francisco, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt					
	Mailing Address 17376 Emerald Chase Drive	State			06	/	D 30		2017	Y		
City Tampa			Zip Code 33647	Transaction ID : SA11 Amount of Each Receipt								
	FEC ID number of contributing federal political committee.		Ē		,	, ,	500.	00				
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC	Regio	ipation (for Individual) onal Director of Risk Manageme	nt	Memo Item \$100.00/monthly							
	Receipt For: 2017 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 500.00]								
s	UBTOTAL of Receipts This Page (optional)			•			,	. ,	1499.	98		
т	OTAL This Period (last page this line number of	nly)		•								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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PAGE 7 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and a or for commercial purposes, other than using th		
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Middle Ir A. Augustine, James, , , Mailing Address 7868 Classics Drive City Naples FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD	State Zip Code FL 34113 C Occupation (for Individual) Chairman, National Clinical Governance	Date of Receipt 06 / 30 / 2017 Transaction ID : SA11AI.6858 Amount of Each Receipt this Period 900.00 Memo Item € \$150.00/monthly
Receipt For: 2017 Primary General Cother (specify) Cother	Aggregate Year-to-Date ▼ 900.00	
Full Name of Individual (Last, First, Middle Ir B. Bagnoli, Dominic, , , Mailing Address 50 East Drive		Date of Receipt
City Hartville FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 ↓ Primary ↓ General ↓ Other (specify) ♥	State OH Zip Code 44632 C Occupation (for Individual) Chief Executive Officer Aggregate Year-to-Date ▼ 2499.78	Transaction ID : SA11AI.6819 Amount of Each Receipt this Period 2499.78 Memo Item \$416.63/monthly
City Mooresville FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General	Anitial) or Full Organization Name State Zip Code NC 28117-7535 C Occupation (for Individual) Emergency Physician Aggregate Year-to-Date ▼	Date of Receipt M 6 / 30 / 2017 Transaction ID : SA11AI.6962 Amount of Each Receipt this Period 300.00 Memo Item \$100.00/monthly
Other (specify) Other SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		3699.78

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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PAGE 8 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
Full Name of Individual (Last, First, Middle Bradstreet, Jennifer, , , Mailing Address 2212 Cross Creek Drive	Initial) or Full C	rganization Name	Date of Receipt						
City	06 30 2017 Transaction ID : SA11AI.6866								
Gastonia	NC	28056	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		300.00						
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) tem Director	Memo Item \$50.00/monthly						
Receipt For: 2017 Primary General X Other (specify) ▼ Other	X Other (specify) ▼ 300.00								
Full Name of Individual (Last, First, Middle B. Brunecz, Sharon, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 3530 West Galloway Drive	06 30 / Y Y Y Y 2017								
City	State	Zip Code	Transaction ID : SA11AI.6977						
Richfield	OH	44286	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	s l								
Name of Employer (for Individual) USACS Management Group		upation (for Individual) ef Human Resource Officer	Memo Item \$50.00/monthly						
Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]						
Full Name of Individual (Last, First, Middle C. Cetta, Michael, , ,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 16 Piney Glen Court			06 / D D / Y Y Y Y 06 30 2017						
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.6939 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		500.00						
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) f Strategy Officer	Memo Item \$100.00/monthly						
Receipt For: 2017 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 500.00]						
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PAGE 9 OF

ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Crieck only one) Image: The second
Any or f	information copied from such Reports and Sta or commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
A. 1 1 1 1 1 1	Full Name of Individual (Last, First, Middle Initial Cirillo, Louis, , , Mailing Address 91 Woodridge Drive Dity Saunderstown FEC ID number of contributing ederal political committee. Name of Employer (for Individual) JSACS Medical Group, LTD Receipt For: 2017 Primary General Other (specify) Other	State RI C Occu Dire	Zip Code 02874 upation (for Individual) ector of Health Policy & Legislativ Year-to-Date ▼ 900.00	Date of Receipt
B	Full Name of Individual (Last, First, Middle Initial Colfer, Orion, , , Mailing Address 2523 Hanover Ave Dity Richmond FEC ID number of contributing ederal political committee. Name of Employer (for Individual) JSACS Medical Group, LTD Receipt For: 2017 Primary	State VA C Occu Vice	Zip Code 23220 upation (for Individual) e President Year-to-Date ▼ 300.00	Date of Receipt 06 2017 Transaction ID : SA11AL6953 Amount of Each Receipt this Period 300.00 Memo Item \$50.00/monthly
C	Full Name of Individual (Last, First, Middle Initial Conley, Amy, , , Mailing Address 6419 Renwick Circle Dity Tampa FEC ID number of contributing ederal political committee. Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2017 Primary General X Other (specify) Other	State FL C Occu Polit	Zip Code 33647 upation (for Individual) tical/Transfer Center Director Year-to-Date ▼ 600.00	Date of Receipt
รเ	BTOTAL of Receipts This Page (optional)		•	1800.00
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11	a	11b	11c	12						
Any information copied from such Reports or for commercial purposes, other than usir													
NAME OF COMMITTEE (In Full)	ig the hame and a			contin	Buttons		T COMMIL						
/ Full Name of Individual (Last, First, Mido A. Corvino, Timothy, , ,	lle Initial) or Full C	rganization Name	Date	of R	eceipt								
Mailing Address 128 Miles Road			M 0		/ D 30		y y 2017	Ŷ					
City Chagrin Falls	State OH	Zip Code 44022				: SA11AI. Receipt th		_					
FEC ID number of contributing federal political committee.	С						498.0	00					
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) sident	\$83.0		io Item hthly								
Receipt For: 2017 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 498.00											
Full Name of Individual (Last, First, Mide De Angelis, Sydney, , ,	lle Initial) or Full C	rganization Name	Date	e of R	eceipt								
Mailing Address 55 Araca Rd P O Box 104 City	State	Zip Code		6	/ D 30		2017	Y					
Babylon	NY					Transaction ID : SA11AI.6995 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С						600.0	00					
Name of Employer (for Individual) USACS Medical Group, LTD		Occupation (for Individual) Medical Director			io Item onthly								
Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00]										
Full Name of Individual (Last, First, Mido C. Denmark, Thomas, , ,	lle Initial) or Full C	rganization Name	Date	of R	eceipt								
Mailing Address 13122 S Yorktown Ave		1		6	/ D 30)	2017	Y					
City Bixby	State OK	Zip Code 74008-7665				: SA11AI. Receipt th							
FEC ID number of contributing federal political committee.	C				y		250.0	00					
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) irman	\$50.0		no Item nthly								
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FOR LINE NUMBER:

PAGE 11 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	K 11a 11b 11c 12 13 14 15 16 17
Any information copied from sur or for commercial purposes, oth	ch Reports and Statements ma er than using the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In USACS PAC	Full)		
Full Name of Individual (Last Eakin, Paul, , , Mailing Address 1455 Hunak City Honolulu	ai St Apt 1 State HI	rganization Name Zip Code 96816	Date of Receipt 06 / 2017 Transaction ID : SA11AI.6956 Amount of Each Receipt this Period
FEC ID number of contributin federal political committee. Name of Employer (for Indivi USACS Medical Group, LTD Receipt For: 2017 ☐ Primary ☐ Gene	dual) Occi Ass ral Aggregate	upation (for Individual) ociate Medical Director Year-to-Date ▼ 300.00	300.00 Memo Item \$50.00/monthly
Full Name of Individual (Last Eisenberg, Steven, , , Mailing Address 35590 Micha City Solon FEC ID number of contributing federal political committee. Name of Employer (for Indiv USACS Management Group Receipt For: 2017 Primary Gener Other (specify) Other	idual)	Zip Code 44139 upation (for Individual) heral Counsel Year-to-Date ▼ 600.00	Date of Receipt
Full Name of Individual (Last Falcone, Angelo, , , Mailing Address 12410 Miles Suite 225 City Germantown FEC ID number of contributing federal political committee. Name of Employer (for Individual MEP Health, LLC Receipt For: 2017 Primary Generation Other (specify) Other	dual) State MD C dual) Occu Pres	rganization Name Zip Code 20876 upation (for Individual) ident Year-to-Date ▼ 900.00	Date of Receipt Date of Receip
SUBTOTAL of Receipts This F	Page (optional)		1800.00
TOTAL This Period (last page	this line number only)		

Use separate schedule(s)

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PAGE 12 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	nd Statements may not be sold or used by any pe g the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Middl A. Ferrand, David, , , Mailing Address 119 Dorie Drive City Belmont FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General X Other (specify) ▼	le Initial) or Full Organization Name State Zip Code NC 28012 C Occupation (for Individual) Emergency Physician Aggregate Year-to-Date ▼ 600.00 600.00	Date of Receipt
Other Full Name of Individual (Last, First, Middl B. Forcada-Lowrie, Raymundo, , , Mailing Address 2400 6th Ave Unit 501	le Initial) or Full Organization Name	Date of Receipt
City San Diego FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General Other (specify) The other	State CA Zip Code 92101 C 92101 Occupation (for Individual) Firefighter Aggregate Year-to-Date ▼ 600.00	Transaction ID : SA11AI.6963 Amount of Each Receipt this Period 600.00 Memo Item \$100.00/monthly
Full Name of Individual (Last, First, Middl C. Gamma, Brett, , , Mailing Address 14930 Finegan Farm Dr City Darnestown FEC ID number of contributing federal political committee. Name of Employer (for Individual) MEP Health, LLC Receipt For: 2017 Primary General	le Initial) or Full Organization Name State Zip Code MD 20874 C Occupation (for Individual) Regional Medical Director Aggregate Year-to-Date ▼	Date of Receipt 06 ' 30 ' 2017 Transaction ID : SA11AI.6757 Amount of Each Receipt this Period 300.00 Memo Item \$50.00/monthly
Conter (specify) Other SUBTOTAL of Receipts This Page (optional	al)	1500.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 13 OF

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the				(check only one)					
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the n				or the		pose of	soliciting	g contrib	outions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)											
A.	Full Name of Individual (Last, First, Middle Initia Geary, Daniel, , ,	l) or Full Or	ganization Name	C	Date o	f Re	eceipt					
	Mailing Address 142 Woodshire				м м 06	/	D D D 30	/ Y	ү ү 2017	Y		
	City Pittsburgh	State PA	Zip Code 15215	A				SA11AI		d		
	FEC ID number of contributing federal political committee.	С					-		49	9.98		
	Name of Employer (for Individual) AHN Medical Group, LLC		pation (for Individual) cal Director of Integrated Acute C	\$8	M 3.33/r		b Item thlv					
	Poppint For: 0047		Year-to-Date ▼ 499.98									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gindlesperger, Krisii, , ,						eceipt					
	Mailing Address 9422 Forest Gates Path			м м 06	/	30	/ Y	2017	Y			
	City Laurel	State Zip Code MD 20723					-	SA11AI. eceipt th		d		
	FEC ID number of contributing federal political committee.	Occupation (for Individual) National Director of APPs								0.00		
	Name of Employer (for Individual) MEP Health, LLC				M 00.00		o Item nthly					
	Receipt For: 2017 Primary General ✓ Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 600.00										
C.	Full Name of Individual (Last, First, Middle Initia Groomes, Roderick, , ,	l) or Full Or	ganization Name		Date o	of Re	eceipt					
	Mailing Address 1035 Glade Park East				^M 06	/	30	/ Y	2017	Y		
	City Kittanning	State PA	Zip Code 16201	A	Transaction ID : SA11AI.6969 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			_		,			0.00		
			Occupation (for Individual) Medical Director				o Item thly					
			Year-to-Date ▼ 300.00									
s	UBTOTAL of Receipts This Page (optional)						,		1399	9.98		
т	OTAL This Period (last page this line number on	ly)	······	Ī			-			-		

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1						
	v information copied from such Reports and S or commercial purposes, other than using the			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) USACS PAC									
	Full Name of Individual (Last, First, Middle Init Hibbs, Nathaniel, , ,	ial) or Full O	organization Name	Date of Receipt						
-	Mailing Address 6634 S. Prescott Way			06 / Y Y Y Y 06 30 2017						
	City Littleton	State CO	Zip Code 80120	Transaction ID : SA11AI.6943 Amount of Each Receipt this Period						
	FEC ID number of contributing rederal political committee.	С		500.00						
l	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	\$100.00/monthly						
ł	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00]						
B.	Full Name of Individual (Last, First, Middle Init Hill, James, , , Mailing Address 9801 Sardis Oaks Road	ial) or Full O	organization Name	Date of Receipt						
-	City	State	Zip Code	06 30 2017 Transaction ID : SA11AL6856						
_	Charlotte	NC	28270	Amount of Each Receipt this Period						
	FEC ID number of contributing rederal political committee.	С		480.00						
ι	Name of Employer (for Individual) JSACS Medical Group, LTD		upation (for Individual) stem APP Lead	Memo Item \$80.00/monthly						
Ī	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 480.00]						
	Full Name of Individual (Last, First, Middle Init Hummel, Laura, , ,	ial) or Full O	organization Name	Date of Receipt						
-	Mailing Address 807 S. Roxmere Road	1		06 / D D / Y Y Y Y 2017						
	City Tampa	State FL	Zip Code 33609-4235	Transaction ID : SA11AI.6906 Amount of Each Receipt this Period						
	FEC ID number of contributing rederal political committee.	С		300.00						
•	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		upation (for Individual) orgency Physician	\$100.00/monthly						
ł	Receipt For: 2017 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 300.00]						
su	JBTOTAL of Receipts This Page (optional)			1280.00						
тс	OTAL This Period (last page this line number of	only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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TEMIZED RECEIPTS		Detailed Summary Page	×	11a		11b	11c	12							
Any information copied from such Reports and	Statements ma	av not be sold or used by any r	erson fo	13 or the	purr	14 bose of s	15 olicitina	16 contribu	17 tions						
or for commercial purposes, other than using t	he name and a	ddress of any political committe	e to sol	cit cor	ntrib	utions fro	om such	commit	tee.						
NAME OF COMMITTEE (In Full)															
Full Name of Individual (Last, First, Middle Janikas, John, , ,	Initial) or Full C	rganization Name		Date of Receipt											
Mailing Address 43 Outlook Drive South				06 / D D / Y Y Y Y Y 06 30 2017											
City	State NY	Zip Code	Transaction ID : SA11AI.6880												
Mechanicville	INT	12118	A	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C					·		499.	98						
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	\$8	Me 3.33/m		ltem hly									
Receipt For: 2017	Aggregate	Year-to-Date ▼													
Primary General Conter (specify) Conter		499.98]												
Full Name of Individual (Last, First, Middle 3. Javery, Thomas, , ,	Initial) or Full C	rganization Name		ate of	Re	ceipt									
Mailing Address 773 Witts Bridge Rd			06 30 2017												
City	State	Zip Code		Transaction ID : SA11AI.7004											
West Brookfield	VT	05060	A	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	ů l						-7-	600.	00						
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ergency Physician	\$1	Memo Item \$100.00/monthly											
Receipt For: 2017	Aggregate	Year-to-Date 🔻													
Primary General ★ Other (specify) ★ Other		, 600.00]												
Full Name of Individual (Last, First, Middle 5. Jenis, Andrew, , ,	Initial) or Full C	rganization Name		ate of	Re	ceipt									
Mailing Address 115 Cayuga Heights Road							06 30 2017								
City	State NY	Zip Code				on ID : S									
Ithaca		14850	A	mount	of	Each Re	ceipt th	is Period							
FEC ID number of contributing federal political committee.	C				_	y	y	300.	00						
Name of Employer (for Individual)	Occ	upation (for Individual)		Me	emo	Item									
USACS Medical Group, LTD	Eme	ergency Physician	\$5	0.00/m	nont	hly									
Receipt For: 2017	Aggregate	Year-to-Date V													
Veher (specify)]													
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

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32

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
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NAME OF COMMITTEE (In Full)												
Full Name of Individual (Last, First, Mid Johnson, David, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 27939 Berringer Run 	State	Zip Code	06 / D D / Y Y Y Y 2017									
Westlake	OH	44145	Transaction ID : SA11AI.6813 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		900.00									
Name of Employer (for Individual) USACS Management Group		upation (for Individual) of Operating Officer	\$150.00/monthly									
Receipt For: 2017 Primary General X Other (specify) ▼ Other	Receipt For: 2017 Aggregate Year-to-Date ▼ Primary General 900.00											
Full Name of Individual (Last, First, Mid B. Jones, Bruce, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 465 Woodard Place												
City Powell	State OH	Zip Code 43065	Transaction ID : SA11AI.6763 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	800.00											
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) Jical Director	Memo Item \$150.00/monthly									
Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 800.00]									
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Mailing Address 11808 Woodthrush Lar	e		M M / D D / Y Y Y Y 06 30 2017									
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.7017 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		300.00									
Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) riman	Memo Item \$50.00/monthly									
Receipt For: 2017 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 300.00]									
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ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		K 11a 13		11b	11c 15		2	17	
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$\left\rangle$	NAME OF COMMITTEE (In Full) USACS PAC											
Α.	Full Name of Individual (Last, First, Middle Init Keller, Noah, , ,	ial) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 10119 Easterday Ct				06	1	D D D 30	/ Y	y 201		ſ	
	City Hagerstown	State MD	Zip Code 21742					SA11AI.		riod		
	FEC ID number of contributing federal political committee.	С			<u> </u>				6	600.00	J	
	Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) ional Medical Director		M \$100.00/		ttem hthly					
	Receipt For: 2017 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00	1								
Full Name of Individual (Last, First, Middle Initial) or F B. Kendall, Jayne, , , Mailing Address 1251 Springbury Dr			rganization Name		Date of	F Re	eceipt 30	/ Y	201 [°]			
	City Uniontown	State Zip Code OH 44685			Transaction ID : SA11AI.6864 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			600.00					0		
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) e President		M 5100.00/		ttem hthly					
	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate										
С.	Full Name of Individual (Last, First, Middle Init Klein, David, , ,	ial) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 11736 Gainsborough Rd				^M 06	/	D D 30	/ Y	y 201		ſ	
	City Potomac	State MD	Zip Code 20854					SA11AI.		riod		
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, ,	3	300.00)	
	Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) If Medical Officer		M \$50.00/n		ttem thly					
	Receipt For: 2017 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 300.00]								
s	UBTOTAL of Receipts This Page (optional)						,	, ,	15	500.00)	
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PAGE 18 OF

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Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC			
A.	Primary General ★ Other (specify) ▼	State NJ C Occu Reg	Drganization Name Zip Code 07046 cupation (for Individual) gional Director of Clinic 21 a Year-to-Date ▼ 600.00	Date of Receipt
в.	Other Full Name of Individual (Last, First, Middle Initial Land, Larry, , , Mailing Address 10014 Hazelnut Court	l) or Full O	Drganization Name	Date of Receipt
	City Tampa FEC ID number of contributing federal political committee. Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2017 Primary General Cother (specify) Cother	Med	Zip Code 33647 cupation (for Individual) edical Director e Year-to-Date ▼ 400.00	06 30 2017 Transaction ID : SA11AI.6904 Amount of Each Receipt this Period 400.00 Memo Item \$100.00/monthly
C.	Full Name of Individual (Last, First, Middle Initial Lawrence, Linda, , , Mailing Address 3942 S Arlington Rd #203	l) or Full O	Drganization Name	Date of Receipt
	City Uniontown FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General Other (specify) Other	Pres	Zip Code 44685 cupation (for Individual) sident Year-to-Date ▼ 300.00	Transaction ID : SA11AI.6910 Amount of Each Receipt this Period 300.00 Memo Item \$100.00/monthly
s	UBTOTAL of Receipts This Page (optional)		•	1300.00
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<u></u>	IAME OF COMMITTEE (In Full)							IOIII SUC		illee.		
\	JSACS PAC											
	ull Name of Individual (Last, First, Middle Initial LeBlanc, Louis, , ,) or Full Or	ganization Name	Da	ate of	f Re	eceipt					
_	lailing Address 1428 Lacy Lane				06	1	D D 30	/ Y	2017	Y		
	ity Rock Hill	State SC	Zip Code 29732					SA11AI. eceipt th		od	_	
	EC ID number of contributing ederal political committee.	С							30	0.00		
	lame of Employer (for Individual) ISACS Medical Group, LTD		pation (for Individual) rgency Physician	\$50	M 0.00/n		ltem					
	Respiret For: 0047		Year-to-Date V				,					
	Primary General ★ Other (specify) ▼ Other		300.00]								
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lee, Sidney, , ,					f Re	eceipt					
_	lailing Address 701 15th Ave					06 30 2017						
	ity Ionolulu	State HI	Zip Code 96816				SA11AI. eceipt th		od			
	EC ID number of contributing ederal political committee.	С			300.00							
	lame of Employer (for Individual) SACS Medical Group, LTD	Occupation (for Individual) Medical Director			Memo Item \$50.00/monthly							
Ē	Primary General X Other (specify) ▼ Other	Aggregate \	Year-to-Date ▼ , 300.00]								
	ull Name of Individual (Last, First, Middle Initial Little, Andrew, , ,) or Full Or	ganization Name	Di	ate of	f Re	ceipt					
_	lailing Address 5700 Van Wert Dr			_	и м 06		30	/ Y	2017	Y		
	ity Hilliard	State OH	Zip Code 43026		Transaction ID : SA11AI.6734 Amount of Each Receipt this Period							
	EC ID number of contributing ederal political committee.	С		<u>ן</u>			,	.,	60	0.00		
ι	lame of Employer (for Individual) JSACS Medical Group, LTD	'	pation (for Individual) rgency Physician	\$10	M 00.00		ttem nthly					
F	Receipt For: 2017 Primary General X Other (specify) Other Other	Aggregate	Year-to-Date ▼ 600.00]								
su	BTOTAL of Receipts This Page (optional)								120	0.00		
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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
I LIVIIZED REGEIFIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle Ir A. Mann, Rubeal, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 20 James River Rd			M M / D D / Y Y Y Y Y 06 30 2017							
City Beavercreek	State OH	Zip Code 45434	Transaction ID : SA11AI.6971 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		600.00							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	Memo Item \$100.00/monthly							
Receipt For: 2017 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 600.00]							
Full Name of Individual (Last, First, Middle Ir Mayorga, Oliver, , , Mailing Address 32 Church St	Date of Receipt									
City Mystic	State CT	Zip Code 06355	06 30 2017 Transaction ID : SA11AL6951 Amount of Each Receipt this Period 300.00							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	S50.00/monthly							
Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]							
Full Name of Individual (Last, First, Middle Ir C. Mayz, Kurtis, , ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 13015 Conifer St			06 / D D / Y Y Y Y Y 2017							
City Plainfield	State IL	Zip Code 60585	Transaction ID : SA11AI.6900 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		300.00							
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General Other (specify)	Assi	upation (for Individual) stant Medical Director Year-to-Date ▼ 300.00	Memo Item \$50.00/monthly							
Other SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number										

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Middle In A. Mittleman, Craig, , , Mailing Address 25 Equestrian Ridge City Newtown FEC ID number of contributing federal political committee. Name of Employer (for Individual) MEP Health, LLC Receipt For: 2017 Primary General Other (specify) ▼ Other	itial) or Full Organization Name State CT Zip Code 06470 C Occupation (for Individual) Chairman Aggregate Year-to-Date ▼	Date of Receipt 06 / 30 / 2017 Transaction ID : SA11AI.6786 Amount of Each Receipt this Period 250.00 Memo Item \$50.00/monthly
B. Osmundson, Michael, , , Mailing Address 62 East Drive		Date of Receipt
City Hartville FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General Other (specify) The second sec	State Zip Code OH 44632 C Occupation (for Individual) President President	Transaction ID : SA11AI.6934 Amount of Each Receipt this Period 600.00 Memo Item \$100.00/monthly
Other Full Name of Individual (Last, First, Middle In C. Packo, David, , , Mailing Address 4535 Dressler Rd NW City Canton FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017 Primary General Other (specify) Other	itial) or Full Organization Name State Zip Code OH 44718 C Occupation (for Individual) Co-Founder Aggregate Year-to-Date ▼	Date of Receipt 06 / 30 / 2017 Transaction ID : SA11AI.6806 Amount of Each Receipt this Period 600.00 Memo Item \$100.00/monthly
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		1450.00

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page	×	_	1a 3		11 14	1b 4		11c 15	\vdash	12 16	17
	y information copied from such Reports and Stat for commercial purposes, other than using the na														
	NAME OF COMMITTEE (In Full)														
Α.	Full Name of Individual (Last, First, Middle Initial Panitch, Orlee, , , Mailing Address 1753 Gainsborough Rd) or Full O	rga	nization Name Zip Code	_	IV	ite of 06	/	l	30		/ Y	20		Ŷ
	Potomac	MD		20854					-		-	A11AI.			
	FEC ID number of contributing federal political committee.	С	-				ioun		1		hec			900.0	0
	Name of Employer (for Individual) MEP Health, LLC Receipt For: 2017 Primary General Vother (specify) Vother	Chie	ef A	tion (for Individual) dministrative Officer ar-to-Date ▼ 900.00	\$	515	M 0.00/	emo /mor							
В.	Full Name of Individual (Last, First, Middle Initial Percy, Carmella, , ,) or Full O	rga	nization Name		Da	ite of	f Re	ece	ipt					
	Mailing Address 6875 Stonebridge Lane	-					06 / 0 0 / Y Y Y Y Y 06 30 2017								
	City Clover	State SC		Zip Code 29710								11AI.6 eipt thi			
	FEC ID number of contributing federal political committee.	C	-				ioun		1		hec			300.0	0
	Name of Employer (for Individual) USACS Medical Group, LTD		•	tion (for Individual) ency Physician	\$	50	M .00/m	emo nont							
	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Yea	ar-to-Date ▼ 300,00											
<u></u> С.	Full Name of Individual (Last, First, Middle Initial Phillips, Miranda, , ,) or Full O	rga	nization Name		Da	ite of	f Re	ece	ipt					
	Mailing Address 7122 S Sheridan Rd			_		M M / D D / Y Y Y Y 06 30 2017									
	City Tulsa	State OK		Zip Code 74133					-		-	A11AI.(
	FEC ID number of contributing federal political committee.	C	-			An	noun	t of	Ea	ich F	Rec	eipt thi		eriod 300.0	0
	Name of Employer (for Individual) USACS Medical Group, LTD		•	tion (for Individual) te Medical Director		650	M .00/r	emc nont							
	Receipt For: 2017 Primary General Vother (specify) Other	Aggregate	Yea	ar-to-Date ▼ 300.00											
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than us	and Statements may not be sold or used by any p ing the name and address of any political committee							
NAME OF COMMITTEE (In Full)								
Full Name of Individual (Last, First, Mid Radford, Shawn, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Radford, Shawn, , ,							
Mailing Address 263 Shawmont Avenue		06 / D / Y Y Y Y 2017						
City Philadelphia	State Zip Code PA 19128	Transaction ID : SA11AI.6979 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	600.00						
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Interim Medical Director	Memo Item \$100.00/monthly						
Receipt For: 2017 Primary General ★ Other (specify) ★ Other	Aggregate Year-to-Date ▼ 600.00]						
Full Name of Individual (Last, First, Mid B. Romano, Frederick, , ,	Date of Receipt							
Mailing Address 4516 Tuscana Drive	06 30 2017							
City Sarasota	StateZip CodeFL34241	Transaction ID : SA11AI.6836 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	600.00						
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Emergency Physician	\$100.00/monthly						
Receipt For: 2017 Primary General ★ Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 600.00]						
Full Name of Individual (Last, First, Mid C. Rudis, Steven, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rudis, Steven,							
Mailing Address 9796 Diversified Lane		06 / Y Y Y Y Y 06 2017						
City Ellicott City	State Zip Code MD 21042	Transaction ID : SA11AI.6983						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period						
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Emergency Physician	Memo Item \$300.00/monthly						
Receipt For: 2017 Primary General Conter (specify) Other	Aggregate Year-to-Date ▼ 600.00]						
SUBTOTAL of Receipts This Page (option	nal)	1800.00						
TOTAL This Period (last page this line nu	umber only)							

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ITEMIZED RECEIPTS	;	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In USACS PAC	Full)		
Full Name of Individual (Last Slabinski, Mark, , , Mailing Address 3004 Edisor City Uniontown	, First, Middle Initial) or Full C o St. NW State OH	Zip Code 44685	Date of Receipt
FEC ID number of contributin federal political committee. Name of Employer (for Indiv USACS Medical Group, LTD Receipt For: 2017	dual) Occ Vice Aggregate	upation (for Individual) e President Year-to-Date ▼ 499.98	Memo Item \$83.33/monthly
Full Name of Individual (Last B. Snyder, Aaron, , , Mailing Address 9925 Silver City Rockville FEC ID number of contributing federal political committee. Name of Employer (for Individual MEP Health, LLC Receipt For: 2017 Primary Generation Other (specify) Conterval Other (specify) Conterval Con	idual)	Zip Code 20850 upation (for Individual) O MidAtlantic Year-to-Date ▼ 900.00	Date of Receipt
Full Name of Individual (Last C. Snyder, Eric, , , Mailing Address 311 East Ca PO Box 384 City Carrolltown FEC ID number of contributi federal political committee. Name of Employer (for Indiv AHN Medical Group, LLC Receipt For: 2017 Primary Gene Cother (specify)	dual)	Zip Code 15722	Date of Receipt 06 ' 30 ' 2017 Transaction ID : SA11AI.6828 Amount of Each Receipt this Period 260.00 Memo Item \$20.00/monthly
SUBTOTAL of Receipts This F	age (optional))	1659.98
TOTAL This Period (last page	this line number only))	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
	for commercial purposes, other than using th			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
Α.	Full Name of Individual (Last, First, Middle Ir Srivastava, Geetanjali, , , Mailing Address 5447 N Seguoia Ave	Date of Receipt							
	City	State	Zip Code	06 30 2017 Transaction ID : SA11AI.6839					
	Fresno	CA	93711-2849	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	Name of Employer (for Individual) USACS Medical Group, LTD		cupation (for Individual) dical Director	Memo Item \$100.00/monthly					
	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00]					
в.	Full Name of Individual (Last, First, Middle Ir Tirheimer, Wenzel, , ,	Date of Receipt							
	Mailing Address 13404 Golf Crest Way	06 / Y Y Y Y 06 30 2017							
	City Tampa	State FL	Zip Code 33618	Transaction ID : SA11AI.7021 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С	750.00						
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		cupation (for Individual) hergency Physician	Memo Item \$150.00/monthly					
	Receipt For: 2017 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 750.00]					
<u>с</u> .	Full Name of Individual (Last, First, Middle Ir Tucker, Jeremy, , ,	nitial) or Full C	Drganization Name	Date of Receipt					
	Mailing Address 23959 Meredith Court			06 / D D / Y Y Y Y 2017					
	City Hollywood	State MD	Zip Code 20636	Transaction ID : SA11AI.6869 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		600.00					
	Name of Employer (for Individual) MEP Health, LLC Receipt For: 2017	Reg	cupation (for Individual) gional Medical Director	Memo Item \$100.00/monthly					
	Primary General Vother (specify) Other	Aggregate	Year-to-Date ▼ 600.00]					
s	UBTOTAL of Receipts This Page (optional)			1850.00					
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Use separate schedule(s)

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PAGE 26 OF

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	y information copied from such Reports and Sta for commercial purposes, other than using the r						se of s				
	NAME OF COMMITTEE (In Full)	lame and ad	duress of any political co			ntribut	ions in	SITI SUCI	1 COMM	llee.	
\rangle	USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Vaill, Samuel, , ,	l) or Full Or	rganization Name		Date o	f Rece	eipt				
	Mailing Address 1 R Horseshoe Lane	1			м м 06	/	D D 30	/ Y	Y Y 2017	Y	
	City South Hamilton	State MA	Zip Code 01982					SA11AI.	6972 iis Perio	d	
	FEC ID number of contributing federal political committee.	С				1			300	.00	
	Name of Employer (for Individual) USACS Management Group		upation (for Individual) of Development Officer		M \$50.00/r	emo li nonthi					
	Receipt For: 2017		Year-to-Date ▼		<i>\\</i> 00.00/1	nonan _.	,				
	Primary General ✔ Other (specify) ♥ Other		300	.00							
	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	rganization Name								
B.	Watling, Bradley, , ,				Date of	f Rece	eipt				
	Mailing Address 109 Viewpoint Lane		7.0.1		06 / D D / Y Y Y Y 2017						
	City Mooresville	State NC	Zip Code 28117	Transaction ID : SA11AI.6756 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C			633.34 Memo Item \$150.00/monthly						
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) System Medical Director									
	Receipt For: 2017 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 633								
	Other Other Full Name of Individual (Last, First, Middle Initia	l) or Full Or	rganization Name								
C.	Welsh, Ian, , ,	,			Date of	f Rece	eipt				
	Mailing Address 1027 Gardenia St				06 M	/	D D D 30	/ Y	2017 ^Y	Ŷ	
	City Fort Mill	State SC	Zip Code 29708	·				SA11AI.		4	
	FEC ID number of contributing federal political committee.	С]	Amount of Each R				300		
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) stant Medical Director		M \$50.00/r	emo l nonthl					
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s)

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PAGE 27 OF

	EMIZED RECEIPTS			for each category of the Detailed Summary Page		×	11a 13		11	· -	110	-	12 16	17	,
	y information copied from such Reports and State for commercial purposes, other than using the na						or the		pos	e of	solici	ting c	ontribu	utions	_
	NAME OF COMMITTEE (In Full)														
Α.	Full Name of Individual (Last, First, Middle Initial) Zayac, Carl, , , Mailing Address 5901 Velasco Ave		rgai				ate of	Re	_	pt 30	/		ү 2017	Ŷ	
	City Dallas	State TX		Zip Code 75206	-		Trans								
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	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2017A	Eme	erge	tion (for Individual) ency Physician ar-to-Date ▼		\$10	Me 00.00/	emo mor							
	Primary General ★ Other (specify) ▼ Other		- -	600.00											
B.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rgai	nization Name		D	ate of	Re	ecei	pt					_
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	Name of Employer (for Individual)	Осси	upa	tion (for Individual)		ŀ	Me	emo) Ite	əm					
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	Mailing Address					Γ	M = M	/	ſ	D D	/	Y	Y Y	Y	
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	Name of Employer (for Individual)	Осси	upat	tion (for Individual)		l	Me	emc	o Ite	əm					
	Receipt For: A Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼											
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SCHEDULE B (FEC Fo	orm 3X)			FC	OR LINF	NUMBER:	PAGE 28 OF 32						
ITEMIZED DISBURSEM		arate schedule(s) category of the		heck on	y one)								
			Summary Page		21b		23 26 27 28c 29 30b						
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NAME OF COMMITTEE (In Full)													
Full Name (Last, First, Middle Ini	tial)												
_	A. BEN CARDIN FOR SENATE, INC.					Date of Disbursement							
Mailing Address P.O. BOX 21093			1			03	102017						
City CATONSVILLE		State MD	Zip Code 21228			FEC Identific	cation Number						
Purpose of Disbursement Contribution				0	11		111587						
Candidate Name				Cate	egory/		tion ID : SB23.7045 Each Disbursement this Period						
CARDIN, BENJAMIN L		ment For: 2	2017		ype		2000.00						
Senate President	×	Primary Other (spec	General			Mama II							
State: MD District: 03						Memo It	lem						
B. BRADY FOR CONGR	Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS												
Mailing Address PO BOX 8277													
City THE WOODLANDS		State TX	Zip Code 77387			FEC Identific	cation Number						
Purpose of Disbursement Contribution	Purpose of Disbursement						C C00311043						
Candidate Name)11 egory/	Transaction ID : SB23.7039 Amount of Each Disbursement this Period							
BRADY, KEVIN, , ,					ype								
Office Sought: X House Senate		ment For: 2 Primary	2017 General				5000.00						
State: TX District: 08	×	Other (spec				Memo It	tem						
Full Name (Last, First, Middle Ini	,	\$				Date of Dist	pursement						
C DR. RAUL RUIZ FOR CONGRESS													
Mailing Address PO BOX 3433			03	23 2017									
City PALM DESERT		State CA	Zip Code 92261			FEC Identifie	cation Number						
Purpose of Disbursement Contribution	Purpose of Disbursement				11		502575						
Candidate Name RUIZ, RAUL, , ,							Transaction ID : SB23.7050 Amount of Each Disbursement this Period						
Office Sought: X House Senate	Disburse		ype	5000.00									
State: CA District: 36		Primary Other (spec	ify) ▼			Memo It	tem						
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\backslash	NAME OF COMMITTEE (In Full)													
	USACS PAC													
A.	Full Name (Last, First, Middle Initial) EMERGENCY DEPARTMENT PRACTICE MANAG PAC)	GEMENT AS	SOCIATION PAC		Date of Disbursement							Y		
	Mailing Address 8400 WESTPARK DRIVE 2ND FLOOR									18			017	
	City MCLEAN	State VA	Zip Code 22102				FEC	Ident	ificatio	on N	Numbe	er		
	Purpose of Disbursement Contribution				11		С	CO	03884	170				
	Candidate Name EMERGENCY DEPARTMENT PRACTICE MANAGEMENT AS		OCIATION PAC (EDPMA-PAC) 011 Category/								sburse		49 t this F	Period
		ement For:		ly	ype		2500.00							
	Senate President	Primary Other (spe	X General cify) ▼				Ν	/lemo	Item					
_	State: District: Full Name (Last, First, Middle Initial)					_	-							
В.	FRIENDS OF CHRIS MURPHY							-	isburs	-	ent			_
	Mailing Address PO BOX 127						03 / 10 / Y Y Y Y Y 2017						Y	
	City CHESHIRE	State CT	Zip Code 06410				FEC	Ident	ificatio	on N	Numbe	er		
	Purpose of Disbursement Contribution			C)11	٦	C C00492645 Transaction ID : SB23.7041 Amount of Each Disbursement this Pe							
	Candidate Name MURPHY, CHRISTOPHER S MR			Cate		//							Period	
	Office Sought: House Disburse	, , , ement For:	2017	Туре			1000.00							
	✗ Senate✗✓	Primary Other (spe	General				_		,		,			
_	State: CT District: 00						Ν	/lemo	Item					
C.	Full Name (Last, First, Middle Initial)						Date	of D	isburs	eme	ent			
	Mailing Address PO BOX 30844						M 03			D 10	1		017	Y
	City BETHESDA	State MD	Zip Code 20824				FEC	Ident	ificatio	on N	Numbe	er		
	Purpose of Disbursement Contribution	011		11	٦	C C00415208								
	Candidate Name LONE STAR LEADERSHIP PAC			Cate	egory ype	//	Transaction ID : SB23.7044 Amount of Each Disbursement this Per					Period		
	Office Sought: House Disburse	ement For:			, PG				-				2000.0	0
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check				E NUMBER: PAGE 30 OF 3								
		Summary Page		21b 28a	22 X 23 26 27 28b 28c 29 30b								
Any information copied from such Reports and State or for commercial purposes, other than using the na													
NAME OF COMMITTEE (In Full)													
Full Name (Last, First, Middle Initial) A. QUIGLEY FOR CONGRESS					Date of Disbursement								
Mailing Address 2652 N SOUTHPORT AVENUE UNIT E		_			02 09 2017								
City CHICAGO	State IL	Zip Code 60614			FEC Identification Number								
Purpose of Disbursement Contribution			011		C C00457556								
Candidate Name QUIGLEY, MIKE, , ,			Catego Type		Transaction ID : SB23.7040 Amount of Each Disbursement this Period								
Office Sought: X House Disburse	ement For: Primary Other (spe	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		500.00								
State: IL District: 05		oliy) V			Memo Item								
Full Name (Last, First, Middle Initial) B. QUIGLEY FOR CONGRESS Mailing Address 2652 N SOUTHPORT AVENUE					Date of Disbursement 03 / D D / Y Y Y Y 23 2017								
City CHICAGO Purpose of Disbursement	State IL	Zip Code 60614			FEC Identification Number								
Contribution Candidate Name QUIGLEY, MIKE, , ,	Disbursement For: 2017			ory/	Transaction ID : SB23.7046 Amount of Each Disbursement this Period								
Office Sought: K House Disburse				•									
State: IL District: 05	Other (spe	ecify)			Memo Item								
Full Name (Last, First, Middle Initial) C. RUIZ VICTORY FUND					Date of Disbursement								
Mailing Address PO BOX 6116			03 / D D / Y Y Y Y 23 2017										
City LA QUINTA Purpose of Disbursement	State CA	Zip Code 92248			FEC Identification Number								
Contribution Candidate Name		011 Catego	ory/	C C00525402 Transaction ID : SB23.7047 Amount of Each Disbursement this Period									
RUIZ, RAUL, , , Office Sought:	ement For: Primary Other (spe	General	Туре)	5000.00								
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NI (check only o 21b 28a							
Any information copied from such Reports and State or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) USACS PAC									
Full Name (Last, First, Middle Initial) A. SALUD CARBAJAL FOR CONGF Mailing Address PO BOX 1290		Date of Disbursement							
City SANTA BARBARA Purpose of Disbursement Contribution Candidate Name CARBAJAL, SALUD O., , ,	State Zip Code CA 93102	011 Category/ Type	FEC Identification Number C C00576041 Transaction ID : SB23.7048 Amount of Each Disbursement this Period						
Office Sought: 🗶 House Disburs	ement For: 2017 Primary General Other (specify) ▼	Туре	500.00 Memo Item						
B. STABENOW FOR US SENATE Mailing Address P.O. BOX 4945	State Zip Code		Date of Disbursement						
City EAST LANSING Purpose of Disbursement Contribution Candidate Name STABENOW FOR US SENATE Office Sought: House Disburs	011 Category/ Type	FEC Identification Number C C00344473 Transaction ID : SB23.7042 Amount of Each Disbursement this Period 1000.00							
State: MI District: 00	Other (specify)		Memo Item						
Full Name (Last, First, Middle Initial) C. TIBERI FOR CONGRESS Mailing Address 2931 E DUBLIN GRANVILLE RC SUITE 190	AD		Date of Disbursement						
City COLUMBUS Purpose of Disbursement Contribution Candidate Name TIBERI, PATRICK J., , ,	011 Category/	FEC Identification Number C C00347492 Transaction ID : SB23.7043 Amount of Each Disbursement this Period							
	ement For: 2017 Primary General Other (specify) ▼	Туре	2000.00 Memo Item						
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/											
Full Name (Last, First, Middle Initial) A. Foley & Lardner LLP				Date of Disbursement							
Mailing Address 111 North Orange Ave, Suite 180	00			06 <u>30</u> <u>2017</u>							
City Orlando	State FL	Zip Code 32801		FEC Identification Number							
Purpose of Disbursement Legal Service			001	C Transaction ID : SB29.7053							
Candidate Name			Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	x General		1500.00							
State: District:		<i>,</i> , ,		Memo Item							
Full Name (Last, First, Middle Initial) 3. Foley & Lardner LLP Mailing Address 111 North Orange Ave, Suite 18	00			Date of Disbursement 06 / D D / Y Y Y Y 2017							
City Orlando	State FL	Zip Code 32801		FEC Identification Number							
Purpose of Disbursement Legal Services	1		001	C							
Candidate Name			Category/ Type	Transaction ID : SB29.7055 Amount of Each Disbursement this Period							
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	2017 x General ecify)		1500.00 Memo Item							
Full Name (Last, First, Middle Initial)				Date of Disbursement							
Mailing Address 111 North Orange Ave, Suite 180	00			06 30 2017							
City Orlando Purpose of Disbursement	State FL	Zip Code 32801		FEC Identification Number							
Legal Services Candidate Name			001 Category/ Type	Transaction ID : SB29.7057 Amount of Each Disbursement this Period							
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