Image# 29993460568

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example:If typing, type over the lines

Cooperative of American Physicians Federal Political Action Committee

ADDRESS (number and street) 333 S. Hope Street, 8th Floor

Check if different than previously reported. (ACC)

Los Angeles | CA | 90071 -

2. **FEC IDENTIFICATION NUMBER** C00161604

CITY | STATE | ZIPCODE

3. IS THIS REPORT [X] NEW (N) **OR** [ ] AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report(Q1)
- [ ] July 15 Quarterly Report(Q2)
- [ ] October 15 Quarterly Report(Q3)
- [ ] January 31 Quarterly Report(YE)
- [ ] July 31 Mid-Year Report(Non-election Year Only) (MY)
- [ ] Termination Report (TER)

(b) Monthly Report Due On:

- [ ] Feb 20 (M2)
- [ ] Mar 20 (M3)
- [ ] Apr 20 (M4)
- [ ] May 20 (M5)
- [ ] Jun 20 (M6)
- [ ] Jul 20 (M7)
- [ ] Aug 20 (M8)
- [ ] Sep 20 (M9)
- [ ] Oct 20 (M10)
- [ ] Nov 20 (M11) (Non-Election Year Only)
- [X] Dec 20 (M12) (Non-Election Year Only)
- [ ] Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the:

- [ ] Primary (12P)
- [ ] General (12G)
- [ ] Runoff (12R)
- [ ] Convention (12C)
- [ ] Special (12G)

Election on ____ in the State of ____

(d) 30-Day **Post** -Election Report for the:

- [ ] General (30G)
- [ ] Runoff (30R)
- [ ] Special (30S)

Election on ____ in the State of ____

5. Covering Period 11 01 2009 through 11 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kirk Alan Pessner

Signature of Treasurer Electronically Filed by Kirk Alan Pessner Date 12 08 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 12/2004)

FE6AN026

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name
Cooperative of American Physicians Federal Political Action Committee

Report Covering the Period: From: M M 1 1 D D 0 1 Y Y Y Y 2 0 0 9 To: M M 1 1 D D 3 0 Y Y Y Y 2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2009		73694.47
(b) Cash on Hand at Begining of Reporting Period	149017.22	
(c) Total Receipts (from Line 19)	5775.00	117897.75
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	154792.22	191592.22
7. Total Disbursements (from Line 31)	1000.00	37800.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	153792.22	153792.22
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	

[X] This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

Cooperative of American Physicians Federal Political Action Committee

Report Covering the Period: From: 11 01 2009 To: 11 30 2009

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)	3750.00	69368.75
(ii) Unitemized	2025.00	48529.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	5775.00	117897.75
(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)	5775.00	117897.75
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	5775.00	117897.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5775.00	117897.75

II. DISBURSEMENTS	**COLUMN A Total This Period**	**COLUMN B Calendar Year-to-Date**
21. Operating Expenditures: (a) Shared 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
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	37700.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	100.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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))	1000.00	37800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1000.00	37800.00

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	5775.00	117897.75
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5775.00	117797.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Image# 29993460573

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 10
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Cooperative of American Physicians Federal Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Ashim Arora, MD
Mailing Address 1687 Erringer Rd # 203
City: Simi Valley | State: CA | Zip Code: 93065
FEC ID number of contributing federal political committee. C
Name of Employer: Ashim Arora, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 / 20 / 2009
Transaction ID: 11AI-73597
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Sharon Dreeben, MD
Mailing Address 4130 La Jolla Village Drive
City: La Jolla | State: CA | Zip Code: 92037
FEC ID number of contributing federal political committee. C
Name of Employer: Sharon Dreeben, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 500.00

Date of Receipt: 11 / 04 / 2009
Transaction ID: 11AI-73598
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Gail Jackson, MD
Mailing Address 8635 W. Third St., #680 W
City: Los Angeles | State: CA | Zip Code: 90048
FEC ID number of contributing federal political committee. C
Name of Employer: Gail Jackson, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 1000.00

Date of Receipt: 11 / 09 / 2009
Transaction ID: 11AI-73586
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 29993460574

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 10
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Cooperative of American Physicians Federal Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Amir Moradi, MD
Mailing Address 2023 W. Vista Way #F
City: Vista | State: CA | Zip Code: 92083
FEC ID number of contributing federal political committee. C
Name of Employer: Amir Moradi, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 500.00

Date of Receipt: 11 / 09 / 2009
Transaction ID: 11AI-73606
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Leonard Newman, MD
Mailing Address 40 El Toyonal
City: Orinda | State: CA | Zip Code: 94563
FEC ID number of contributing federal political committee. C
Name of Employer: Leonard Newman, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 600.00

Date of Receipt: 11 / 20 / 2009
Transaction ID: 11AI-73582
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Dario Perez, MD
Mailing Address 1510 S. Central Ave., #200
City: Glendale | State: CA | Zip Code: 91204
FEC ID number of contributing federal political committee. C
Name of Employer: Dario Perez, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 / 04 / 2009
Transaction ID: 11AI-73599
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 29993460575

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 10
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Cooperative of American Physicians Federal Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Ernest Schreiber, MD
Mailing Address 856 Eighth St.
City: Manhattan Beach | State: CA | Zip Code: 90266
FEC ID number of contributing federal political committee: C
Name of Employer: Ernest Schreiber, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 / 20 / 2009
Transaction ID: 11AI-73603
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Benjamin Shwachman, MD
Mailing Address PO Box 4157
City: Covina | State: CA | Zip Code: 91723
FEC ID number of contributing federal political committee: C
Name of Employer: Benjamin Shwachman, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 / 05 / 2009
Transaction ID: 11AI-73608
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Paul Toomer, MD
Mailing Address 2190 Lynn Rd Ste 290
City: Thousand Oaks | State: CA | Zip Code: 91360
FEC ID number of contributing federal political committee: C
Name of Employer: Paul Toomer, MD
Occupation: Physician
Receipt For: 2009
[ ] Primary [ ] General [X] Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00

Date of Receipt: 11 / 05 / 2009
Transaction ID: 11AI-73587
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **750.00**

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

Image# 29993460576

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 10
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Cooperative of American Physicians Federal Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Kiet Tran, MD
Mailing Address 815 W. Cesar Chavez Ave., #201
City: Los Angeles | State: CA | Zip Code: 90012
FEC ID number of contributing federal political committee: C
Name of Employer: Kiet Tran, MD
Occupation: Physician
Receipt For: 2009
☐ Primary ☐ General
X Other (specify) Calendar Year
Aggregate Year-to-Date: 500.00
Date of Receipt: 11 / 20 / 2009
Transaction ID: 11AI-73588
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Thomas Watters, MD
Mailing Address 101 S. San Mateo Drive, #303
City: San Mateo | State: CA | Zip Code: 94401
FEC ID number of contributing federal political committee: C
Name of Employer: Thomas Watters, MD
Occupation: Physician
Receipt For: 2009
☐ Primary ☐ General
X Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 / 20 / 2009
Transaction ID: 11AI-73578
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Darryl Werner, MD
Mailing Address 720 N. Tustin Ave., #100
City: Santa Ana | State: CA | Zip Code: 92705
FEC ID number of contributing federal political committee: C
Name of Employer: Darryl Werner, MD
Occupation: Physician
Receipt For: 2009
☐ Primary ☐ General
X Other (specify) Calendar Year
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 / 04 / 2009
Transaction ID: 11AI-73601
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **750.00**

TOTAL This Period (last page this line number only) ..... ▶ **3750.00**

Image# 29993460577

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26	
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b	

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NAME OF COMMITTEE (In Full)
Cooperative of American Physicians Federal Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kirk for Senate

Mailing Address PO Box 8

City: Winnetka
State: IL
Zip Code: 60093

Purpose of Disbursement
Political Contribution

Candidate Name
Mark S Kirk

Category/ Type: 011

Office Sought: ☐ House ☒ Senate ☐ President
State: IL District:

Disbursement For: 2010
☒ Primary ☐ General ☐ Other (specify)

Transaction ID: 23-541

Date of Disbursement: MM / DD / YYYY: 11 / 04 / 2009

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	**1000.00**
TOTAL This Period (last page this line number only) ▶	**1000.00**