

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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="2009"/>		<input type="text" value="247678.13"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="246668.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19669.00"/>	<input type="text" value="300277.93"/>
(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="266337.65"/>	<input type="text" value="547956.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4952.56"/>	<input type="text" value="286570.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="261385.09"/>	<input type="text" value="261385.09"/>
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

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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).....	15220.00	247199.51
(ii) Unitemized	4449.00	53078.42
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19669.00	300277.93
(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)	19669.00	300277.93
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 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))..... ▶	19669.00	300277.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19669.00	300277.93

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	452.56	5069.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	452.56	5069.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	281500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1.00
(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	1.00
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)) ..	4952.56	286570.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4952.56	286570.97

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)	19669.00	300277.93
34. Total Contribution Refunds (from Line 28(d))	0.00	1.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19669.00	300276.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	452.56	5069.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	452.56	5069.97

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

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

FOR LINE NUMBER: PAGE 6 OF 19
(check only one)

<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Leslie Shook Ledbetter
Full Name (Last, First, Middle Initial)
Mailing Address 106 N Garnet Bnd
City Spring State TX Zip Code 77382-2644
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed
Occupation Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2009
Transaction ID : A8E1BB3DE7BBD4ADC8D
Amount of Each Receipt this Period
300.00

B. Jami L. Miller
Full Name (Last, First, Middle Initial)
Mailing Address 3404 Springbrook Dr
City Nashville State TN Zip Code 37204-3403
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed
Occupation Physician
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
11 / 03 / 2009
Transaction ID : A88451F06AF424CC89F0
Amount of Each Receipt this Period
250.00

C. Robert Harvey Tankel
Full Name (Last, First, Middle Initial)
Mailing Address 15715 46th Ave
City Flushing State NY Zip Code 11355-2353
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation Physician
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
11 / 03 / 2009
Transaction ID : AC3C57D5350314E2194C
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **800.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Tho Q. Nguyen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3912 Hillwood Way
 City Bedford State TX Zip Code 76021-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N.E. Tarrant Dermatology Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 03 / 2009**
Transaction ID : A72F6E138BC0E4F1CB13
 Amount of Each Receipt this Period **500.00**

B. Aubrey Chad Hartmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 2017 Spyglass HI
 City Leander State TX Zip Code 78641-8850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **365.00**

Date of Receipt **11 / 03 / 2009**
Transaction ID : A0768B0BDA581449CA5B
 Amount of Each Receipt this Period **365.00**

C. Philip R. Hardin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2024 Mallard Point Rd
 City Mountain Home State AR Zip Code 72653-7102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Orthoderemics Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 03 / 2009**
Transaction ID : A37C229A60B774900811
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional).....	1115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. David R. Lane
Full Name (Last, First, Middle Initial)

Mailing Address 3016 Idlewood Cir

City Charlotte State NC Zip Code 28209-1414

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

Name of Employer Self Employed Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2009
Transaction ID : AD81BFA0FDBEC49CE915

Amount of Each Receipt this Period 250.00

B. Kimberly A. Kolar
Full Name (Last, First, Middle Initial)

Mailing Address 4385 Juniper Trl

City Reno State NV Zip Code 89519-2987

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

Name of Employer Self Employed Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2009
Transaction ID : AB76CDF6324A44D7F87A

Amount of Each Receipt this Period 250.00

C. Shawn R. Sabin
Full Name (Last, First, Middle Initial)

Mailing Address 8724 Meadow Ln

City Leawood State KS Zip Code 66206-1635

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

Name of Employer Derm & Skin Cancer Specialists Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2009
Transaction ID : A233246F213D6477B8A2

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Rita Weinstein
Full Name (Last, First, Middle Initial)
Mailing Address 51 Yorktown Rd
City East Brunswick State NJ Zip Code 08816-3305
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed
Occupation Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **11 / 06 / 2009**
Transaction ID : A3F11C6837CD64078BD3
Amount of Each Receipt this Period **200.00**

B. Donald Scott Waldorf
Full Name (Last, First, Middle Initial)
Mailing Address 57 N Middletown Rd
City Nanuet State NY Zip Code 10954-2312
FEC ID number of contributing federal political committee. **C**
Name of Employer Waldorf Dermatology & Laser Associates
Occupation Dermatologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 06 / 2009**
Transaction ID : A31F00BF566024C2098E
Amount of Each Receipt this Period **500.00**

C. Francis W. Iacobellis
Full Name (Last, First, Middle Initial)
Mailing Address 153 E 88th St
City New York State NY Zip Code 10128-2270
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed
Occupation Physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 06 / 2009**
Transaction ID : ACCBDE702BF9548648F5
Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional).....	950.00
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 10 OF 19
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Jerome R. Potozkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2502 Alamo Country Cir
 City Alamo State CA Zip Code 94507-1495
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **11 / 06 / 2009**
Transaction ID : A1166EDCF98C34BA2933
 Amount of Each Receipt this Period **300.00**

B. Richard Lawrence Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Tallmadge Gate
 City Setauket State NY Zip Code 11733-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **11 / 06 / 2009**
Transaction ID : A8772363325324E61857
 Amount of Each Receipt this Period **500.00**

C. Leah Press
 Full Name (Last, First, Middle Initial)
 Mailing Address 1340 W. Herndon Ave Suite 101
 City Fresno State CA Zip Code 93711-7180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Minarets Medical Group, Inc. Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 06 / 2009**
Transaction ID : A0CCABEF9A0D24FC79CC
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **1050.00**
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 19
<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Lisa R. Hynes
Full Name (Last, First, Middle Initial)

Mailing Address 13613 W Medlock Dr

City Litchfield Park State AZ Zip Code 85340-4052

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

Name of Employer Arrowhead Dermatology Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt 11 / 06 / 2009

Transaction ID : A69D0FE3A6A0A41DE878

Amount of Each Receipt this Period 365.00

B. Andrew D. Samel
Full Name (Last, First, Middle Initial)

Mailing Address 152 Emory St

City Attleboro State MA Zip Code 02703-2461

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

Name of Employer Self-Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 06 / 2009

Transaction ID : A1F5726AE22E84E46B08

Amount of Each Receipt this Period 250.00

C. Phyllis K. Murphy
Full Name (Last, First, Middle Initial)

Mailing Address 418 Saint Andrews Dr

City Belleair State FL Zip Code 33756-1935

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

Name of Employer Self-Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 09 / 2009

Transaction ID : AB7CDA206DF964279AF2

Amount of Each Receipt this Period 600.00

SUBTOTAL of Receipts This Page (optional).....▶	1215.00
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 12 OF 19
<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. J. Matthew Knight
Full Name (Last, First, Middle Initial)

Mailing Address 161 S Phelps Ave

City Winter Park State FL Zip Code 32789-5200

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

Name of Employer Knight Dermatology Institute Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 09 / 2009

Transaction ID : A27EB0B5FCD394995992

Amount of Each Receipt this Period 1000.00

B. Eduardo G. Rivera
Full Name (Last, First, Middle Initial)

Mailing Address 3652 Shoshonee Dr

City Columbus State IN Zip Code 47203-2522

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

Name of Employer Skin Solutions Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 09 / 2009

Transaction ID : AE5354A44C69F43D1BF8

Amount of Each Receipt this Period 1000.00

C. Curtis A. Raskin
Full Name (Last, First, Middle Initial)

Mailing Address 519 Oakshire Pl

City Alamo State CA Zip Code 94507-2327

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

Name of Employer Self Employed Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 09 / 2009

Transaction ID : A028608AB9D364A0C84D

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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 13 OF 19
	<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Douglas A. Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 8809 Montagna Dr

City Las Vegas State NV Zip Code 89134-6147

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

Name of Employer Self Employed
Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 09 / 2009
Transaction ID : ABDD5205E5742497AA1C

Amount of Each Receipt this Period
500.00

B. Daniel Kenneth McKenzie
Full Name (Last, First, Middle Initial)

Mailing Address 23772 Salvador Bay

City Dana Point State CA Zip Code 92629-4207

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

Name of Employer Self Employed
Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
11 / 10 / 2009
Transaction ID : A98AC3DDF768142E9A9A

Amount of Each Receipt this Period
350.00

C. Jennifer A. Palmer
Full Name (Last, First, Middle Initial)

Mailing Address 101 Pike Ct

City Pella State IA Zip Code 50219-7517

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

Name of Employer Iowa Dermatology Inc
Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 10 / 2009
Transaction ID : A99C3FD49F05F4A17A12

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
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 14 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Jonathan Scott Sanders
 Full Name (Last, First, Middle Initial)
 Mailing Address 2839 Saint Barts Sq
 City Vero Beach State FL Zip Code 32967-7583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TC Dermatology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 10 / 2009
Transaction ID : A34C03DC275EB408983D
 Amount of Each Receipt this Period 1000.00

B. Barbara Greenan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 New York Ave NW Suite 800
 City Washington State DC Zip Code 20005-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Academy of Dermatology Occupation Association Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 16 / 2009
Transaction ID : AFDF39DC2F6F842A1A7B
 Amount of Each Receipt this Period 25.00

C. Tim Ioannides
 Full Name (Last, First, Middle Initial)
 Mailing Address 1340 Olde Doubloon Dr
 City Vero Beach State FL Zip Code 32963-2455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 16 / 2009
Transaction ID : A738262B017094F79A8D
 Amount of Each Receipt this Period 1100.00

SUBTOTAL of Receipts This Page (optional).....▶	2125.00
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 15 OF 19
	<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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Stephen P. Stone
Full Name (Last, First, Middle Initial)

Mailing Address 2021 S Wiggins Ave

City Springfield State IL Zip Code 62704-3338

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

Name of Employer SIU School of Medicine Div of Dermatol Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 16 / 2009
Transaction ID : A166912F4EAD547CABED

Amount of Each Receipt this Period 1250.00

B. David E. Tart
Full Name (Last, First, Middle Initial)

Mailing Address 5704 Hidden Orchard Dr

City Greensboro State NC Zip Code 27410-2523

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

Name of Employer The Skin Surgery Center Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 18 / 2009
Transaction ID : A1F13D88AED4F4792913

Amount of Each Receipt this Period 200.00

C. Armando Jose Guardiola
Full Name (Last, First, Middle Initial)

Mailing Address 102 Calle De Diego E

City Mayaguez State PR Zip Code 00680-4864

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

Name of Employer Self-Employed Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 18 / 2009
Transaction ID : A21C6DBB94BB4426BBCD

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 19
	<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	

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Marc David Chalet
 Full Name (Last, First, Middle Initial)
 Mailing Address 10551 Wilshire Blvd Apt 1104
 City Los Angeles State CA Zip Code 90024-7309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Dermatopathologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 11 / 23 / 2009
Transaction ID : AC80B7F33E1F14EA9A00
 Amount of Each Receipt this Period 250.00

B. Vu Huu Nguyen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1027 Sagebrush Rd
 City Carlsbad State CA Zip Code 92011-3974
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mission Internal Medical Group Occupation Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 365.00

Date of Receipt 11 / 23 / 2009
Transaction ID : A4B013533044646F3B0B
 Amount of Each Receipt this Period 365.00

C. Maureen Ann Mooney
 Full Name (Last, First, Middle Initial)
 Mailing Address 2407 SW 149th Pl
 City Burien State WA Zip Code 98166-1624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cascade Eye & Skin Centers Occupation Dermatologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 11 / 23 / 2009
Transaction ID : AC7EEFFE565874B20992
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... **865.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 17 OF 19
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<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 Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Glenn H. Brown
Full Name (Last, First, Middle Initial)

Mailing Address 7540 N 65th St

City Paradise Valley State AZ Zip Code 85253-4803

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

Name of Employer Self Employed Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2009

Transaction ID : AD33626D8BC604A8ABA5

Amount of Each Receipt this Period
 300.00

B.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	15220.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address PO Box 6603

City Hagerstown State MD Zip Code 21741-6603

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	0	9		

Transaction ID : B0709AAA18C7547E0B2D

Amount of Each Disbursement this Period

6	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City Hagerstown State MD Zip Code 21741-6603

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	3			2	0	0	9		

Transaction ID : B2F0D0C1E4B664D89902

Amount of Each Disbursement this Period

2	1	1	.	0	4
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	0	9		

Transaction ID : B5155E0A6A62E45808FE

Amount of Each Disbursement this Period

1	8	1	.	5	2
---	---	---	---	---	---

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

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

4	5	2	.	5	6
---	---	---	---	---	---

4	5	2	.	5	6
---	---	---	---	---	---

**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

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 Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Friends of Sherrod Brown

Mailing Address PO Box 76187
Suite 800

City Washington State DC Zip Code 20013-6187

Purpose of Disbursement
2012 General

Candidate Name
Sen. Sherrod C. Brown

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2009

Transaction ID : B74B761EC29264B28B44

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Sherrod Brown

Mailing Address PO Box 76187
Suite 800

City Washington State DC Zip Code 20013-6187

Purpose of Disbursement
2012 General

Candidate Name
Sen. Sherrod C. Brown

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2009

Transaction ID : B655B3DBC57604E68B0D

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Nebraska Leadership Pac

Mailing Address PO Box 3325

City Omaha State NE Zip Code 68103

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼
State: District: Other2009

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2009

Transaction ID : BC4614AC5656E4C269CA

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

4500.00
