Image# 13964503591 PAGE 1 / 34

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORW 3X	For Other Than An Aut	horized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
American Academy of	Neurology BrainPAC	;	
ADDRESS (number and street)	401 C St NE		
Check if different			
than previously reported. (ACC)	Washington		DC 20002 -
2. FEC IDENTIFICATION N	UMBER ▼ CIT	ΓY ▲	STATE ▲ ZIP CODE ▲
C C00435933		S THIS X NEW (N) (AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 ((Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M2) Jul 20 (M4)	(Non-Election Year Only)
April 15 Quarterly Report (0	O1)		
July 15 Quarterly Report (0	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 0	7 01 / 2013	through 0	7 31 2013
I certify that I have examined the	his Report and to the best of	my knowledge and belief it	s true, correct and complete.
Type or Print Name of Treasure	er Mr. Timothy J. Engel		
Signature of Treasurer Mr.	Timothy J. Engel	[Electronically Filed]	Date 08 / 08 / 2013
NOTE: Submission of false, error	neous, or incomplete informatio	n may subject the person sign	ng this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Academy of Neurology BrainPAC 07 01 2013 07 2013 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 127133.00 January 1, 2013 (b) Cash on Hand at 106372.00 Beginning of Reporting Period..... 187957.00 13418.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 119790.00 315090.00 6(a) and 6(c) for Column B)..... 32000.00 227300.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 87790.00 87790.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Neurology BrainPAC

I. Receipts ibutions (other than loans) From: Individuals/Persons Other In Political Committees In Itemized (use Schedule A)	Total This Period	Calendar Year-to-Date
ndividuals/Persons Other Than Political Committees i) Itemized (use Schedule A)	9504.00	135137.00
Than Political Committees i) Itemized (use Schedule A)	9504.00	135137.00
i) Itemized (use Schedule A)	9504.00	135137.00
ii) Unitemized		
	3914.00	47820.00
iii) TOTAL (add		
Lines 11(a)(i) and (ii)	13418.00	182957.00
Political Party Committees	0.00	0.00
Other Political Committees	0.00	
such as PACs)	0.00	0.00
otal Contributions (add Lines		
1(a)(iii), (b), and (c)) (Carry		400057.00
	13418.00	182957.00
Committees	0.00	0.00
	0.00	0.00
ans Received	0.00	0.00
_		
	0.00	0.00
·	0.00	0.00
1 - 1	0.00	0.00
	0.00	5000.00
	0.00	3000.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
Total Concession (10)		0.00
win Funda (franc Cabadula IIF)	0.00	0.00
evili Funds (Irom Schedule H5)	7 /5	0.00
tal Transfers (add 18(a) and 18(b))	0.00	0.00
nai Transiers (add To(a) and To(b))	0.00	0.00
	Political Party Committees Other Political Committees such as PACs) Total Contributions (add Lines	Political Party Committees

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
	ted Federal/Non-Federal		Caronaar Four to Bate
	y (from Schedule H4) ederal Share	0.00	0.00
(1)	oderal chare		
` '	Ion-Federal Share	0.00	0.00
	Federal Operating additures	0.00	0.00
	Operating Expenditures	0.00	3.00
	21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers 1	to Affiliated/Other Party		
Committee Contributio	s	0.00	0.00
Federal Ca and Other	andidates/Committees Political Committees	32000.00	227000.00
-	nt Expenditures	0.00	0.00
. Coordinate	dule E)	3.00	0.00
(2 U.S.C. use Sche	§441a(d)) dule F)	0.00	0.00
Loan Repa	ayments Made	0.00	0.00
·			
Loans Mad Refunds of	def Contributions To:	0.00	0.00
(a) Individ	duals/Persons Other Political Committees	0.00	300.00
man	Tollioar Committees		
(b) Politic	al Party Committees	0.00	0.00
(-)	Political Committees	0.00	0.00
(sucn	as PACs)	0.00	0.00
(d) Total	Contribution Refunds		
(add I	_ines 28(a), (b), and (c))▶	0.00	300.00
Other Dish	oursements	0.00	0.00
Othor Bloc	WIGOTION CO.	, , , ,	
	ection Activity (2 U.S.C. §431(20))		
` '	ted Federal Election Activity		
	Schedule H6) deral Share	0.00	0.00
(1)			
` '	evin" Share	0.00	0.00
	al Election Activity Paid Entirely	0.00	0.00
	Vith Federal Funds Federal Election Activity (add	0.00	0.00
	30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
Total Dish	ursements (add Lines 21(c), 22,		
	, 26, 27, 28(d), 29 and 30(c))	32000.00	227300.00
Total Fede	ral Disbursements		
	ine 21(a)(ii) and Line 30(a)(ii)	2000	
from Line	31)	32000.00	227300.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	13418.00	182957.00
4. Total Contribution Refunds (from Line 28(d))	0.00	300.00
6. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13418.00	182657.00
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) for each category of the Detailed Summary Page

I OIT LINE	NONDELL	. 17101	- 0 01	0.
(check only	one)			
X 11a	11b	11c	12	
13	14	15	16	17

NAME OF COMMITTEE (In Full) American Academy of Neurolo	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Richard D. Brower		Date of Receipt
Mailing Address 712 Twin Hills Drive		07 01 2013 _
City	State Zip Code	Transaction ID: 36198752
El Paso	TX 79912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Texas Tech University HSC Dept. of Neu	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Lily Jung Henson		Date of Receipt
Mailing Address 9420 SE 54th St		M = M / D = D / Y = Y = Y
City	State Zip Code	07 02 2013
Mercer Island	WA 98040-5121	Transaction ID : 36204242 Amount of Each Receipt this Period
FEC ID number of contributing	000 10 0 12 1	Amount of Each Heceipt this Period
federal political committee.	C	400.00
Name of Employer	Occupation	
Swedish Neurosci. Institute, Swedish H	Physician	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1300.00	
Full Name (Last, First, Middle Initial) Dr. Zeyad Morcos		Date of Receipt
Mailing Address 289 Pleasant St Ste 604 Sleep Medicien & Neurology	l.	07 03 2013
City Fall River	State Zip Code MA 02721-3005	Transaction ID : 36206901
	MA 02721-3005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	>	950.00

	FOR LINE NUMBER: P.	AGE / OF
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c	c 12
	13 14 15	5 □16 □

		1.0
	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Neurolo	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Anna S. Tseng Mailing Address 7515 Greenville Ave Ste 400 City Dallas FEC ID number of contributing federal political committee. Name of Employer Neurologic Consultants of Dallas, PA Receipt For: Primary General Other (specify)	State Zip Code TX 75231-3860 C Occupation Neurologist Aggregate Year-to-Date ▼	Date of Receipt 07 03 2013 Transaction ID: 36209183 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. Gary Birnbaum Mailing Address 4225 Golden Valley Rd Minneapolis Clinic of Neurol City Golden Valley FEC ID number of contributing federal political committee. Name of Employer MS Treatment & Research Center Receipt For: Primary General Other (specify)	State Zip Code MN 55422-4215 C Occupation Neurologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt 07 09 2013 Transaction ID: 36223465 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Michael J. Kushner Mailing Address 1110 Salem Street City Wilson FEC ID number of contributing federal political committee. Name of Employer Wilson Orthopedic Surgery & Neurology Receipt For: Primary General Other (specify)	State Zip Code NC 27893 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 07 09 2013 Transaction ID: 36223472 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1000.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

34

for each category of the Detailed Summary Page 14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Shiv U. Navada Date of Receipt Mailing Address 527 Medical Park Dr Ste 107 09 2013 City Zip Code State Transaction ID: 36223580 WV 26330-9009 Bridgeport Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation United Hospital Center Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Norman V. Kohn Date of Receipt Mailing Address 122 S Michigan Ave Ste 1300 07 09 2013 City State Zip Code Transaction ID: 36223585 IL Chicago 60603-6184 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. James M. Gilchrist Date of Receipt Mailing Address 800 Williams Blvd 09 07 2013 City State Zip Code Transaction ID: 36223589 IL Springfield 62704 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation SIU School of Med. Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 9 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) American Academy of Neurology Brain	PAC	
Full Name (Last, First, Middle Initial) Dr. Lisa Grant Mailing Address 1810 E 19th St Ste 225 City State The Dalles OR FEC ID number of contributing federal political committee. Name of Employer Occupat Self Receipt For: Primary General Other (specify) Or Aggrega		Date of Receipt 07 09 2013 Transaction ID: 36223591 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Gregory L. Barkley Mailing Address 2890 Burlington St City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer Henry Ford Hospital Receipt For: Primary Other (specify) General Other (specify)		Date of Receipt 07 15 2013 Transaction ID: 36234108 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Dr. Bruce H. Cohen Mailing Address 3141 Neille Lane City State Twinsburg OH FEC ID number of contributing federal political committee. Name of Employer Children's Hospital and Med. Center of Receipt For: Primary General Other (specify)		Date of Receipt 07 15 2013 Transaction ID: 36234111 Amount of Each Receipt this Period 175.00
SUBTOTAL of Receipts This Page (optional)	>	525.00

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Tara Cook Date of Receipt Mailing Address 70 Birch Hill Drive 2013 City Zip Code State Transaction ID: 36234114 ΑK Joint Base Elmendorf-Rich 99505 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation United States Air Force Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David A. Evans Date of Receipt Mailing Address 715 Kessler Woods Trail 07 15 2013 City State Zip Code Transaction ID: 36234117 Dallas TX 75208 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Texas Neurology** COO Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Glen R. Finney Date of Receipt Mailing Address 9235 NW 26th Avenue 07 15 2013 City State Zip Code Transaction ID: 36234909 FL Gainesville 32606-9180 Amount of Each Receipt this Period FEC ID number of contributing 84.00 С federal political committee. Name of Employer Occupation Univ. of FL Dept. of Neurology Behavioral Neurology Receipt For: Aggregate Year-to-Date ▼ Primary General 588.00 Other (specify) 234.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. William S. Gilmer Date of Receipt Mailing Address 2323 Dunstan Rd 2013 City State Zip Code Transaction ID: 36234911 TX 77005-2613 Houston Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 595.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Steven L. Lewis Date of Receipt Mailing Address 1725 W Harrison St Ste 1106 07 15 2013 City State Zip Code Transaction ID: 36234914 IL Chicago 60612-3845 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation Rush Univ. Med. Ctr. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Nancy L. Mueller Date of Receipt Mailing Address 34 Stonybrook Road 07 15 2013 City Zip Code State Transaction ID: 36235084 NJ Tenafly 07670 Amount of Each Receipt this Period FEC ID number of contributing 415.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2905.00 Other (specify) 650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 12 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Neurolo	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Daniel C. Potts Mailing Address 136 Covey Chase City Tuscaloosa FEC ID number of contributing federal political committee. Name of Employer AL Neurology and Sleep Medicine, P.C. Receipt For: Primary General Other (specify)	State Zip Code AL 35406-1801 C Occupation Physician Aggregate Year-to-Date ▼ 700.00	Date of Receipt 07
Full Name (Last, First, Middle Initial) Dr. Faisal M. Qazi Mailing Address 1240 West Valencia Mesa D City Fullerton FEC ID number of contributing federal political committee. Name of Employer Inland Neurologic Consultants Receipt For: Primary General Other (specify)	State Zip Code CA 92833 C Occupation Neurologist Aggregate Year-to-Date ▼ 525.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Dario M. Zagar Mailing Address 201 Fairmount Terrace City Fairfield FEC ID number of contributing federal political committee. Name of Employer Associated Neurologists of So. Ct. Receipt For: Primary General Other (specify)	State Zip Code CT 06825 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt 07 15 2013 Transaction ID : 36235280 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)	····	225.00
TOTAL This Period (last page this line number	er only)	7

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Adele B. Ackell Date of Receipt Mailing Address 374 E View Dr 2013 City Zip Code State Transaction ID: 36235917 37404-5938 TN Chattanooga Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Chattanooga Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. William J. Hamilton Date of Receipt Mailing Address 7100 Carson Lane 07 12 2013 City State Zip Code Transaction ID: 36235920 Spanish Fort ΑL 36527 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Volunteer Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Baldev S. Rai Date of Receipt Mailing Address 5 Vista Tramonto 07 12 2013 State Zip Code Transaction ID: 36235922 CA **Newport Coast** 92657 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. David M. Labiner Date of Receipt Mailing Address 1501 N Campbell Ave Rm 6205 Box 245023 Neurology 2013 City Zip Code State Transaction ID: 36260166 Tucson ΑZ 85724-0001 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Arizona Health Sciences Center Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Nicholas L. Schlageter Date of Receipt Mailing Address 6N169 Woodview Ct 07 22 2013 City State Zip Code Transaction ID: 36260511 Saint Charles IL 60175-6266 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Tri-City Neurology, SC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Braden Nago Date of Receipt Mailing Address 904 7th Avenue 07 26 2013 City Zip Code State Transaction ID: 36275421 WA Seattle 98104 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation The Polyclinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Charles C. Flippen II Date of Receipt Mailing Address 11319 Isleta Street 2013 City State Zip Code Transaction ID: 36279834 CA Los Angeles 90049 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation County of LA/ UCLA Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Madeleine Geraghty Date of Receipt Mailing Address 1803 E Westminster Lane 07 29 2013 City State Zip Code Transaction ID: 36279839 WA Spokane 99223 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Providence Stroke and TIA Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. John W. Henson Date of Receipt Mailing Address 9420 SE 54th Street 07 29 2013 City Zip Code State Transaction ID: 36279843 WA Mercer Island 98040-5121 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Swedish Neuroscience Institute Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF 34 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Lily Jung Henson Date of Receipt Mailing Address 9420 SE 54th St 2013 City Zip Code State Transaction ID: 36279856 WA Mercer Island 98040-5121 Amount of Each Receipt this Period FEC ID number of contributing 600.00 federal political committee. Name of Employer Occupation Swedish Neurosci. Institute, Swedish H Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Edgar J. Kenton III Date of Receipt Mailing Address 2 Clearview Dr 07 29 2013 City State Zip Code Transaction ID: 36279871 PA Danville 17821 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Geisinger Health system Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Bibhuti Mishra Date of Receipt Mailing Address 5801 Potomac Ave NW 07 29 2013 City Zip Code State Transaction ID: 36279875 DC Washington 20016-2517 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Inova Fairfax Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Gregory T. Pupillo Date of Receipt Mailing Address 225 9th Street S, 2013 City Zip Code State Transaction ID: 36279976 WI La Crosse 54601-4145 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation Franciscan-Skemp Healthcare Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Amy E. Sanders Date of Receipt Mailing Address 1793 Riverside Dr Apt 3E 07 29 2013 City State Zip Code Transaction ID: 36279980 NY New York 10034-5340 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Mmc Medical Center** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Bruce Sigsbee Date of Receipt Mailing Address 1199 Sennebec Rd 07 29 2013 City State Zip Code Transaction ID: 36279982 MF Union 04862-4628 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Penobscot Bay Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 295.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 15 16 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 Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Sarah Song Date of Receipt Mailing Address 2045 W. Concord Place, #405 2013 City Zip Code State Transaction ID: 36279984 Chicago IL 60647 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Rush Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Joseph S. Kass Date of Receipt Mailing Address One Baylor Plaza NB-302 07 30 2013 City State Zip Code Transaction ID: 36280390 TX Houston 77030 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Baylor College of Medicine** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Joseph S. Kass Date of Receipt Mailing Address One Baylor Plaza NB-302 07 30 2013 City Zip Code State Transaction ID: 36281127 TX Houston 77030 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Baylor College of Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... 9504.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 19 OF	34
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
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	NAME OF COMMITTEE (In Full)				
$ \rangle$	American Academy of Neurology B	BrainPAC			
_	Full Name (Last, First, Middle Initial)			2.4.7.1	
A.	Pallone For Senate			Date of Disbursement	
	Mailing Address PO Box 3176			07 09 7 2013	
	City	State Zip Code		Transaction ID : 36222281	
	Long Branch	NJ 07740		Transaction ID . 30222201	
	Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period	d
	Candidate Name		Category/	5000.00	П
	Frank Pallone Jr Office Sought: House Disbursen	ment For: 2013	Туре	5550.00	
	X Senate	Primary General		Campaign Contribution	
	State: NJ District:	Other (specify) ▼ Special-Primary2	2013		
_	Full Name (Last, First, Middle Initial)	Openial i iiiiai yz	2010		
В.	Renee Ellmers For Congress Com	mittee		Date of Disbursement	
	Mailing Address PO Box 99567			07 09 7 2013	
	Raleigh	State Zip Code NC 27624		Transaction ID: 36222282	
	Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period	d
	Candidate Name		Category/	1000.00	П
	Rep. Renee Ellmers RN Office Sought:	ment For: 2014	Type	7	
	Senate	Primary General Other (specify) ▼		Campaign Contribution	
_	Full Name (Last, First, Middle Initial)				
C.	Kaine For Virginia			Date of Disbursement	
	Mailing Address 20 West Maple Street			07 09 7 2013	
	,	State Zip Code VA 22301		Transaction ID: 36222283	
	Purpose of Disbursement Campaign Contribution		- au		
	Candidate Name		011	Amount of Each Disbursement this Perio	d
	Timothy Kaine		Category/ Type	1000.00	
	•	ment For: 2018	. 7 7 7		
		Primary General Other (specify) ▼		Campaign Contribution	
_	State: VA District:				
s	SUBTOTAL of Disbursements This Page (optional)		······	7000.00	
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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 20 OF 34	_
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	21b	22 🗙 23 24 25 26	
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NAME OF COMMITTEE (In Full)				
American Academy of Neurology B	rainPAC			
Full Name (Last, First, Middle Initial)				
A. Friends Of John Barrow			Date of Disbursement	
Mailing Address PO Box 1001			07 17 2013	
City	State Zip Code		Transaction ID - 26249470	_
, tagasta	GA 30903		Transaction ID: 36248479	
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Rep. John Barrow		Type	1000.00	
Senate	nent For: 2014 Primary General Other (specify) ▼		Campaign Contribution	
State: GA District: 12				
Full Name (Last, First, Middle Initial)				
B. Dutch Ruppersberger For Congres	s Committee		Date of Disbursement	
Mailing Address 22 W. Padonia Road Suite C-141			07 17 2013	
Timonium	State Zip Code MD 21093		Transaction ID : 36248480	
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Rep. C.A. Dutch Ruppersberger		Type	1000.00	
Senate	nent For: 2014 Primary General Other (specify) ▼		Campaign Contribution	
Full Name (Last, First, Middle Initial)				_
C. Walorski For Congress Inc			Date of Disbursement	
Mailing Address PO Box 954			07 18 2013	
City S Mishawaka	State Zip Code IN 46546		Transaction ID : 36252261	_
Purpose of Disbursement Campaign Contribution	10040	011		
Candidate Name		011	Amount of Each Disbursement this Period	
Jackie Walorski		Category/ Type	1000.00	
	nent For: 2014			
	Primary General Other (specify) ▼		Campaign Contribution	
02				Ė
SUBTOTAL of Disbursements This Page (optional)		·····	3000.00	
TOTAL This Period (last page this line number only).		·····•		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 21 OF 34					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER.					
	for each category of the Detailed Summary Page	21b	22 🗙 23 🔲 24 🔲 25 🖂 26					
		27	28a 28b 28c 29 30					
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or for commercial purposes, other than using the na	ne and address of any politi	cal committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	D D.A.O.							
American Academy of Neurology I	BrainPAC							
Full Name (Last, First, Middle Initial)								
A. Schakowsky For Congress			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address P.O. Box 5130			07 23 2013					
City	State Zip Code							
Evanston	IL 60204		Transaction ID: 36270019					
Purpose of Disbursement	0020.							
Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	4000.00					
Rep. Jan D. Schakowsky		Туре	1000.00					
	ment For: 2014							
Senate President	Primary General Other (specify)		Campaign Contribution					
State: IL District: 09	Officer (specify)							
Full Name (Last, First, Middle Initial)								
B. Lance For Congress			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address PO Box 225			07 23 2013					
-								
City Colonia	State Zip Code NJ 07067		Transaction ID: 36270020					
Purpose of Disbursement	110 07007							
Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
Rep. Leonard Lance		Type	1000.00					
	ment For: 2014							
Senate President	Primary General		Campaign Contribution					
State: NJ District: 07	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
C. Tom Reed For Congress			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address PO Box 450			07 23 2013					
City	Chata Zin Cada							
City Victor	State Zip Code NY 14564		Transaction ID: 36270021					
Purpose of Disbursement	11001							
Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	1500.00					
Rep. Tom Reed	_	Туре	1300.00					
Office Sought: House Disburse Senate	ment For: 2014							
President	Primary General Other (specify)		Campaign Contribution					
State: NY District: 23	Carior (opcony)							
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SUBTOTAL of Disbursements This Page (optional).			3500.00					
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	Detailed Summary Page	21b 27	22 X 23 24 28a 28b 28	4 25 26 3c 29 30b			
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or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
American Academy of Neurology	BrainPAC						
Full Name (Last, First, Middle Initial)							
A. Matheson For Congress			Date of Disbursement				
Mailing Address P O Box 521048			07 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code		Transaction ID - 2027	0000			
Salt Lake City	UT 84152		Transaction ID: 3627	0022			
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbur	sement this Period			
Candidate Name		Category/		1000.00			
Rep. Jim D. Matheson	oment Ferri 2011	Туре		1000.00			
Senate President	ement For: 2014 Primary General Other (specify) ▼		Campaign Contribution				
State: UT District: 04							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
B. Friends Of Lois Capps			M M / D D /	Y = Y = Y			
Mailing Address P.O. Box 23940			07 23	2013			
City Santa Barbara	State Zip Code CA 93121		Transaction ID : 3627	0023			
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Rep. Lois Capps		Type	1000.00				
	ement For: 2014 Primary General Other (specify) ▼		Campaign Contribution				
Full Name (Last, First, Middle Initial)							
c. Roskam For Congress Committee	e		Date of Disbursement	YYYY			
Mailing Address P. O. Box 713			07 23	2013			
City Wheaton	State Zip Code IL 60187		Transaction ID: 3627	0024			
Purpose of Disbursement Campaign Contribution		011					
Candidate Name			Amount of Each Disbur	sement this Period			
Rep. Peter Roskam		Category/ Type		2000.00			
	ement For: 2014			7			
Senate President	Primary General Other (specify) ▼		Campaign Contribution				
State: IL District: 06							
SUBTOTAL of Disbursements This Page (optional)		······		4000.00			
TOTAL This Period (last page this line number on	y)	·····•					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
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	Detailed Summary Page	27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,		
American Academy of Neurology E	BrainPAC		
Full Name (Last, First, Middle Initial)			D (D)
Mooney For Congress			Date of Disbursement
Mailing Address 151 Camelot Blvd			07 23 2013
,	State Zip Code		Transaction ID: 36270025
Falling Waters Purpose of Disbursement	WV 25419		
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
Alexander Mooney Office Sought:	nent For: 2014	Type	500.00
	Primary General Other (specify) ▼		Campaign Contribution
State: MD District: 06			
Full Name (Last, First, Middle Initial)			Data of Dialaymanant
B. Brady For Congress			Date of Disbursement
Mailing Address PO Box 8277			07 23 2013
The Woodlands	State Zip Code TX 77387		Transaction ID : 36270026
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name			
Rep. Kevin Patrick Brady		Category/ Type	1000.00
	nent For: 2014 Primary General Other (specify)		Campaign Contribution
Full Name (Last, First, Middle Initial)			
C. Ellison For Congress			Date of Disbursement
Mailing Address PO Box 6072			07 23 2013
City	State Zip Code		Transaction ID 00070007
	MN 55406		Transaction ID: 36270027
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each Disbursement this Feriod
Rep. Keith Ellison		Type	1000.00
Office Sought: House Disburser Senate President	nent For: 2014 Primary General		Campaign Contribution
State: MN District: 05	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)			2500.00
TOTAL This Period (last page this line number only)			

S	CHEDULE B (FEC Form 3X)	lla: -	anaka anka dala ()	FOR LINE	NUMBER: PAGE 24 OF 34						
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	(check only	only one)						
			Summary Page	21b 27	22 28a	23 28b	24 25 26 30b				
۸.	ry information copied from such Reports and Staten	l nente mov	not be sold or us								
or	for commercial purposes, other than using the nam	ne and add	dress of any politic	al committee to	solicit co	ntributions	from such committee.				
	NAME OF COMMITTEE (In Full)										
	American Academy of Neurology B	BrainPA	C								
_	Full Name (Last, First, Middle Initial)										
Α.	Bilirakis For Congress				Date o	f Disburse					
	Mailing Address PO Box 606				07 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code		T	antina ID	- 20270020				
	Tarpon Springs	FL	34688		Trans	Saction ID	: 36270028				
	Purpose of Disbursement Campaign Contribution			011	Amoun	t of Each	Each Disbursement this Period				
	Candidate Name			Category/			1000.00				
	Rep. Gus M. Bilirakis Office Sought: House Disbursen	nent For:	2014	Туре			.550.00				
	Senate President	Primary Other (spe	General		Campai	ign Contrib	pution				
_	State: FL District: 12										
В.	Full Name (Last, First, Middle Initial) Kirk For Senate				Date o	f Disburse	ment				
	Mailing Address P.O. Box 8				07 23 2013						
	Winnetka	State IL	Zip Code 60093		Trans	saction ID	: 36270040				
	Purpose of Disbursement Campaign Contribution			011	Amount of Each Disbursement this Period						
	Candidate Name			Category/	1000.00						
	Sen. Mark Steven Kirk Office Sought:	ant Fari	2010	Type			100.00				
	Senate	nent For: Primary Other (spe	General		Campa	ign Contrib	oution				
_	Full Name (Last, First, Middle Initial)										
C.	Mooney For Congress				Date o	f Disburse					
	Mailing Address 151 Camelot Blvd				07	23					
	,	State WV	Zip Code 25419		Trans	saction ID	: 36270071				
	Purpose of Disbursement										
	Void - Mooney For Congress			011	Amoun	t of Each	Disbursement this Period				
	Candidate Name Alexander Mooney			Category/			-500.00				
	•	nent For:	2014	Туре		7					
	Senate President	Primary Other (spe	General		Void - N	looney Fo	r Congress				
_	State: MD District: 06										
s	UBTOTAL of Disbursements This Page (optional)			·····•			1500.00				
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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 25 OF 34					
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	(check only	k only one)					
			Summary Page	21b 27	22 28a	23 28b	24 25 26 30b			
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	NAME OF COMMITTEE (In Full)									
$ \rangle$	American Academy of Neurology B	BrainPA	C							
_	Full Name (Last, First, Middle Initial)									
Α.	Mooney For Congress					f Disburse				
	Mailing Address 151 Camelot Blvd				07 23 2013					
	,	State	Zip Code		Trans	action ID	: 36270072			
	Falling Waters Purpose of Disbursement	WV	25419		riune					
	Campaign Contribution			011	Amoun	t of Each	Disbursement this Period			
	Candidate Name			Category/	_		500.00			
	Alexander Mooney Office Sought:	aont Fair	0011	Туре		7	300.00			
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_	State: MD District: 06									
B	Full Name (Last, First, Middle Initial)				Data o	f Disburse	umont			
٠.	Schakowsky For Congress				M M	/ D				
	Mailing Address P.O. Box 5130			07						
	Evanston	State IL	Zip Code 60204		Transaction ID : 36270080					
	Purpose of Disbursement Campaign Contribution			011	Amount of Each Disbursement this Period					
	Candidate Name			Category/	1000.00					
	Rep. Jan D. Schakowsky			Type						
	Senate	nent For: Primary Other (spe	General		Campa	ign Contrik	oution			
	Full Name (Last, First, Middle Initial)									
C.	Lance For Congress					f Disburse				
	Mailing Address PO Box 225				07	2				
	•	State NJ	Zip Code 07067		Trans	saction ID	: 36270081			
	Purpose of Disbursement Campaign Contribution			011						
	Candidate Name			011	Amoun	t of Each	Disbursement this Period			
	Rep. Leonard Lance			Category/ Type			1000.00			
	Office Sought: House Disbursen	nent For: Primary Other (spe	General		Campai	gn Contrib	oution			
	State: NJ District: 07									
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S	CHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 26 OF 34
т	EMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
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or	for commercial purposes, other than using the nam	e and address of any politic	cal committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Academy of Neurology B	rainPAC		
<u>/</u>				
_	Full Name (Last, First, Middle Initial)			B
Α.	Schakowsky For Congress			Date of Disbursement
	Mailing Address D.O. D. 5400			M M / D D / Y Y Y Y
	Mailing Address P.O. Box 5130			07 23 2013
	City	State Zip Code		
	Evanston	IL 60204		Transaction ID: 36270145
	Purpose of Disbursement			
	Void - Schakowsky For Congress		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	
	Rep. Jan D. Schakowsky		Type	-1000.00
	Office Sought: House Disbursem	nent For: 2014		
	Senate	Primary General		Void - Schakowsky For Congress
		Other (specify) ▼		
	State: IL District: 09			
_	Full Name (Last, First, Middle Initial)			
В.	Kirk For Senate			Date of Disbursement
	NA 111			M M / D D / Y Y Y Y
	Mailing Address P.O. Box 8			07 23 2013
	City	State Zip Code		
	Winnetka	IL 60093		Transaction ID: 36270187
	Purpose of Disbursement			
	Campaign Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	
	Sen. Mark Steven Kirk		Type	1000.00
		nent For: 2016		
		Primary General		Campaign Contribution
		Other (specify) ▼		
	State: IL District: 02			
_	Full Name (Last, First, Middle Initial)			B
C.	Tom Reed For Congress			Date of Disbursement
	Mailing Address DOD 450			M M / D D / Y Y Y Y
	Mailing Address PO Box 450			07 23 2013
	City	State Zip Code		
	-	NY 14564		Transaction ID: 36270269
	Purpose of Disbursement			
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	Candidate Name		Category/	4500.00
	Rep. Tom Reed		Type	1500.00
		nent For: 2014		
		Primary General		Campaign Contribution
		Other (specify) ▼		
	State: NY District: 23			
				1500.00
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S	CHEDULE B (FEC Form 3X)						FOR LINE NUMBER: PAGE 27 OF 34							
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or	for commercial purposes, other than using the nar	ne and addre	ess of any polition	cal con	nmitte	ee to s	solicit co	ntrib	utions	fror	n such	comm	ittee.	
$ \setminus $	NAME OF COMMITTEE (In Full)													
$ \rangle$	American Academy of Neurology E	BrainPAC												
\angle	Full Name (Last, First, Middle Initial)													
Α.	Lance For Congress						Date o	f Dis	sburse	emer	nt			
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	Mailing Address PO Box 225							07 23 2013						
		State	State Zip Code NJ 07067					sacti	ion ID	: 36	270329			
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В.	Tom Reed For Congress						Date of Disbursement							
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	Victor	NY	14564				ITAIIS	Saci	טו ווטו	. 30	210392			
	Purpose of Disbursement Void - Tom Reed For Congress	244					Amount of Each Disbursement this Period						ادما	
	Candidate Name		O11 Category/ Type				Amount of Each Disbursement this Period -1500.00							
	Rep. Tom Reed													
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	Senate	Primary	General				Void - Tom Reed For Congress							
	President	Other (spec	ify) ▼				voiu - roiti Reeu Foi Congress							
	State: NY District: 23													
	Full Name (Last, First, Middle Initial)													
C.	Matheson For Congress						Date o	f Dis	sburse	men	it			
	Mailing Address D.O.D. 504040						M = M	7		D		γ γ 2012	■ Y	
	Mailing Address P O Box 521048						07	-	2	23		2013		
	City	State	Zip Code								070 100			
	Salt Lake City	UT	84152				irans	sacti	ion ID	: 36	270408			
	Purpose of Disbursement Campaign Contribution					$\neg \top$								
	Candidate Name			0	11		Amoun	t of	Each	Disk	ourseme	nt this	Peri	od
	Rep. Jim D. Matheson				egory ype	'/						100	00.00	
	•	ment For: 2	014	1)	ype	-			7	_	7			-
	Senate Session	Primary	General				Campaign Contribution							
	President								JOH 1111	Julio				
_	State: UT District: 04													
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\setminus	NAME OF COMMITTEE (In Full)									
$ \rangle$	American Academy of Neurology B	BrainPA	C							
_	Full Name (Last, First, Middle Initial)									
Α.	Matheson For Congress				Date o	f Disburse				
	Mailing Address P O Box 521048				07 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code				2222474			
	Salt Lake City	UT	84152		Trans	action ID	: 36270474			
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	Candidate Name			Category/			.1/	000.00		
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_	State: UT District: 04									
D	Full Name (Last, First, Middle Initial)				Doto	f Diaburaa	mont			
О.	Friends Of Lois Capps				M = M	f Disburse				
	Mailing Address P.O. Box 23940			0.		2	3 2013			
	Santa Barbara	State CA	Zip Code 93121		Trans	saction ID	: 36270519			
	Purpose of Disbursement Campaign Contribution			011	Amoun	t of Each	Disbursement th	is Period		
	Candidate Name			Category/			10	000.00		
	Rep. Lois Capps			Туре	1000.00					
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_	Full Name (Last, First, Middle Initial)				Data	f Disburse	mont			
C.	Friends Of Lois Capps					_				
	Mailing Address P.O. Box 23940				07	2				
	City	State	Zip Code		Trans	action ID	. 26270506			
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	Rep. Lois Capps			Category/ Type			-10	00.00		
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	Senate President	Primary Other (spe	General		Void - F	riends Of	Lois Capps			
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 29 OF 34
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NAME OF COMMITTEE (In Full)			
American Academy of Neurology B	rainPAC		
Full Name (Last, First, Middle Initial)			
A. Roskam For Congress Committee			Date of Disbursement
Mailing Address P. O. Box 713			07 23 2013
City	State Zip Code		Transaction ID : 36270634
Wheaton	IL 60187		11alisaction ib : 30270034
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Peter Roskam		Туре	2000.00
Senate President	nent For: 2014 Primary General Other (specify)		Campaign Contribution
State: IL District: 06			
Full Name (Last, First, Middle Initial)			Data of Dishurasment
B. Roskam For Congress Committee		Date of Disbursement	
Mailing Address P. O. Box 713		07 23 2013	
Wheaton	itate Zip Code IL 60187		Transaction ID : 36270644
Purpose of Disbursement Void - Roskam For Congress Committee		011	Amount of Each Disbursement this Period
Candidate Name		Category/	-2000.00
Rep. Peter Roskam Office Sought: House Disbursen	ant Fam. 2011	Туре	2550.55
Senate	nent For: 2014 Primary General Other (specify) ▼		Void - Roskam For Congress Committee
Full Name (Last, First, Middle Initial)			
C. Brady For Congress			Date of Disbursement
Mailing Address PO Box 8277			07 23 2013
,	State Zip Code TX 77387		Transaction ID : 36270718
Purpose of Disbursement Campaign Contribution	17667	011	
Candidate Name			Amount of Each Disbursement this Period
Rep. Kevin Patrick Brady		Category/ Type	1000.00
Senate President	nent For: 2014 Primary General Other (specify)		Campaign Contribution
State: TX District: 08			
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 30 OF 34								
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NAME OF COMMITTEE (In Full)											
American Academy of Neurology I	BrainPAC										
Full Name (Last, First, Middle Initial)											
A. Brady For Congress			Date of Disbursement								
Mailing Address PO Box 8277			07 23 2013								
City	State Zip Code		Transaction ID - 26270774								
The Woodlands	TX 77387		Transaction ID . 30270774								
Void - Brady For Congress		011	Amount of Each Disbursement this Period								
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State: TX District: 08											
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B. Ellison For Congress											
Mailing Address PO Box 6072			07 23 2013								
City Minneapolis	State Zip Code MN 55406		Transaction ID : 36270819								
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period								
Candidate Name		Category/	1000.00								
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			Campaign Contribution								
Full Name (Last, First, Middle Initial)											
C. Ellison For Congress			Date of Disbursement								
Mailing Address PO Box 6072			07 23 2013								
City Minneanolis	State Zip Code MN 55406		Transaction ID: 36270821								
Purpose of Disbursement											
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Senate President	Primary General Other (specify) ▼		Void - Ellison For Congress								
55											
Full Name (Last, First, Middle Initial) Brady For Congress Mailing Address PO Box 8277 City State Zip Code Tx 77387 Purpose of Disbursement Vold - Brady For Congress Candidate Name Rep. Keith Ellison Office Sought: State Zip Code Type Office Sought: Primary General State: Tx District: 08 State Zip Code Type Other (specify) Vold - Brady For Congress Date of Disbursement this Period Category/ Type Other (specify) Vold - Brady For Congress Date of Disbursement this Period Category/ Type Other (specify) Vold - Brady For Congress Date of Disbursement Other (specify) Vold - Brady For Congress Date of Disbursement Other (specify) Vold - Brady For Congress Date of Disbursement Transaction ID: 36270874 Amount of Each Disbursement Other (specify) Vold - Brady For Congress Transaction ID: 36270819 Date of Disbursement Other (specify) Vold - Brady For Congress Date of Disbursement Other (specify) Vold - Brady For Congress Date of Disbursement this Period Category/ Type Other (specify) Vold - Brady For Congress Transaction ID: 36270819 Amount of Each Disbursement this Period Category/ Type Other (specify) Vold - Brady For Congress Date of Disbursement this Period Campaign Contribution Campaign Contribution Campaign Contribution Campaign Contribution Campaign Contribution Transaction ID: 36270821 Transaction ID: 36270821 Amount of Each Disbursement this Period Cardidate Name Rep. Keith Ellison Office Sought: Yold - Ellison For Congress Vold - Ellison For Congress Vold - Ellison For Congress											
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$\overline{\ }$	NAME OF COMMITTEE (In Full)						
\rangle	American Academy of Neurology B	BrainPA	3				
	Full Name (Last, First, Middle Initial)						
Α.	,				Date of Di	sbursement	
	Mailing Address PO Box 606				07	23 2013	
	City	State	Zip Code				
	Tarpon Springs	FL	34688		Transact	ion ID : 36270866	
	Purpose of Disbursement						
	Void - Bilirakis For Congress			011	Amount of	Each Disbursement this Per	riod
	Candidate Name			Category/		-1000.0	
	Rep. Gus M. Bilirakis			Туре		1000.0	,
	Senate	nent For: Primary Other (spe	General		Void - Bilira	ikis For Congress	
	State: FL District: 12						
	Full Name (Last, First, Middle Initial)						
В.	Bilirakis For Congress				Date of Di	sbursement	
	Mailing Address PO Box 606				07	23 2013	
	City S Tarpon Springs	State FL	Zip Code 34688		Transaction ID : 36270928		
	Purpose of Disbursement						
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	Rep. Gus M. Bilirakis Office Sought:	nent For:	204.4	Туре		7 7 7	
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С.	Full Name (Last, First, Middle Initial) Kirk For Senate				Date of Di	sbursement	
C.	Kirk For Senate				M M /	D D / Y Y Y Y	1
С.							
C.	Kirk For Senate Mailing Address P.O. Box 8	State	Zip Code		M M /	23 / 2013]
C.	Kirk For Senate Mailing Address P.O. Box 8 City Winnetka	State IL	Zip Code 60093		M M /	D D / Y Y Y Y]
C.	Kirk For Senate Mailing Address P.O. Box 8 City			011	M M M / O7	23 / 2013	riod
C.	Kirk For Senate Mailing Address P.O. Box 8 City S Winnetka Purpose of Disbursement Void - Kirk For Senate Candidate Name				M M M / O7	23 / 2013 cion ID: 36270967 Each Disbursement this Per	-
C.	Kirk For Senate Mailing Address P.O. Box 8 City S Winnetka Purpose of Disbursement Void - Kirk For Senate Candidate Name Sen. Mark Steven Kirk	IL	60093	011 Category/ Type	M M M / O7	23 / 2013 zion ID : 36270967	-
C.	Kirk For Senate Mailing Address P.O. Box 8 City Senate Winnetka Purpose of Disbursement Void - Kirk For Senate Candidate Name Sen. Mark Steven Kirk Office Sought: House Senate		60093 2016 General	Category/	M M M / O7	23 / 2013 ion ID : 36270967 Each Disbursement this Per-1000.06	-
C.	Kirk For Senate Mailing Address P.O. Box 8 City Senate Winnetka Purpose of Disbursement Void - Kirk For Senate Candidate Name Sen. Mark Steven Kirk Office Sought: House Senate	nent For:	60093 2016 General	Category/	Transact Amount of	23 / 2013 ion ID : 36270967 Each Disbursement this Per-1000.06	-
c.	Kirk For Senate Mailing Address P.O. Box 8 City S Winnetka Purpose of Disbursement Void - Kirk For Senate Candidate Name Sen. Mark Steven Kirk Office Sought: House Senate President Disbursen	nent For: : Primary Other (spe	60093 2016	Category/ Type	Transact Amount of	23 / 2013 ion ID : 36270967 Each Disbursement this Per-1000.06)
	Kirk For Senate Mailing Address P.O. Box 8 City Summer Senate Candidate Name Sen. Mark Steven Kirk Office Sought: House Senate President State: IL District: 02	nent For: ; Primary Other (spe	60093 2016	Category/ Type	Transact Amount of	23 / 2013 sion ID : 36270967 Each Disbursement this Period -1000.00)

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\setminus	NAME OF COMMITTEE (In Full)									
	American Academy of Neurology B	BrainPAC								
_	Full Name (Last, First, Middle Initial)				Б.					
A.	Fattah For Congress					f Disburse				
	Mailing Address 3900 Ford Road				07 30 2013					
	Suite 120		·			07 30 2013				
		·				action ID	: 36280388			
	Philadelphia Purpose of Disbursement	PA 19131								
	Campaign Contribution			011	Amoun	this P	eriod			
	Candidate Name			Category/				4000	00	
	Rep. Chaka Fattah			Type				1000.	UU	
		nent For: 2014								
	Senate President	Primary General Other (specify) ▼	ı		Campai	gn Contrik	oution			
	State: PA District: 02									
_	Full Name (Last, First, Middle Initial)									
В.	Bera For Congress				Date of	f Disburse	ment			
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	Mailing Address Post Office Box 582496			07		3	0 2	013		
	City S Elk Grove	State Zip Code CA 95758				Transaction ID: 36280391				
	Purpose of Disbursement	90100	T							
	Campaign Contribution			011	Amoun	t of Each	Disbursement	this P	eriod	
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	State: CA District: 07									
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C.	Pascrell For Congress					f Disburse				
	Mailing Address PO Box 100				07	3		013	Y	
		State Zip Code			Trans	action ID	: 36280392			
	Teaneck Purpose of Disbursement	NJ 07666								
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	Rep. William J. Pascrell Jr.			Type				2500.0	JU	
		nent For: 2014								
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NAME OF COMMITTEE (In Full)	D : D40					
American Academy of Neurology	/ BrainPAC					
Full Name (Last, First, Middle Initial)						
A. Gardner For Congress	Date of Disbursement O7 30 2013					
Mailing Address 9227 E. Lincoln Ave., #200-234						
City	State Zip Code					
Lone Tree	CO 80124		Transaction ID: 36280393			
Purpose of Disbursement						
Campaign Contribution		011	Amount of Each Disbursement this Period			
Candidate Name		Category/	1000.00			
Rep. Cory Gardner Office Sought: House Disbu	sement For: 2014	Туре	1000.00			
Office Sought: House Disbu	Sement For: 2014 ✓ Primary General		On any along On deliberthe			
President	Other (specify)		Campaign Contribution			
State: CO District: 04						
Full Name (Last, First, Middle Initial)						
B. Tiberi For Congress			Date of Disbursement			
			M - M / D - D / Y - Y - Y - Y			
Mailing Address 2931 E Dublin Granville Road Suite 190			07 30 2013			
City	State Zip Code		Transaction ID: 36280394			
Columbus	OH 43231		Transaction 12 1 0020000 1			
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Candidate Name			Amount of Each Disbursement this Feriod			
Rep. Pat J. Tiberi		Category/ Type	1000.00			
	sement For: 2014	71				
Senate	Y Primary General		Campaign Contribution			
President	Other (specify) ▼					
State: OH District: 12						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
C. North Star Fund						
Mailing Address 10 G St. NE			07 30 2013			
City	State Zip Code		Transaction ID : 36280396			
Washington Purpose of Disbursement	DC 20002					
Leadership PAC contribution		011	Amount of Each Dichumannout this Davied			
Candidate Name			Amount of Each Disbursement this Period			
		Category/ Type	1000.00			
Office Sought: House Disbu	sement For:					
Senate	Primary General		Leadership PAC contribution			
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NAME OF COMMITTEE (In Full)						
American Academy of Neurology B	rainPAC					
Full Name (Last, First, Middle Initial)				_		
A. Dave Camp For Congress				Date of Disbursement		
Mailing Address 5915 Eastman Avenue Suite 100				07	3	1 2013
,	State	Zip Code		Trans	action ID	: 36281285
Midland Purpose of Disbursement	MI	48640				
Campaign Contribution			011	Amoun	t of Each	Disbursement this Period
Candidate Name			Category/			2500.00
Rep. David Lee Camp			Туре		7	2500.00
Senate	nent For: 2 Primary Other (spec	General		Campai	ign Contrib	oution
State: MI District: 04						
Full Name (Last, First, Middle Initial)				Dete	f Dial	
3. Heartand Values PAC					f Disburse	
Mailing Address PO Box 505				07	3	1 2013
Souix Falls	State SD	Zip Code 57101		Trans	saction ID	: 36281288
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Candidate Name			Category/ Type			0.00
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Full Name (Last, First, Middle Initial) - Heartand Values PAC				Date o	f Disburse	ment
Mailing Address PO Box 505				07	/ 3·	
,	State SD	Zip Code 57101		Trans	saction ID	: 36314826
Purpose of Disbursement	<u> </u>	37101				
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