24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E) PAGE 1 OF 1 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)			
Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS C C00343137			
Check if 24-hour report 48-hour report Mew report Amends report filed on Amends report Amends report Amends report 48-hour report			
	Full Name of Payee Gumbinner & Davies Communications		Date of Public Distribution/Dissemination
	Mailing Address 3430 Connecticut Avenue NW, 11813		Amount
-	City State	Zip Code	32512.32
	Washington DC	20008	Transaction ID : 11438202 Date of Disbursement or Obligation
	Purpose of Expenditure Production/Postage/Lists	Category/ Type 003	10 28 7 2022
ľ	Name of Federal Candidate	x Support	Office Sought:
	Jones, Kermit, , ,	Oppose	President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: Primary General 2022 Other (specify) ▶
	Full Name of Payee		Date of Public Distribution/Dissemination
	Mailing Address		Amount
	City State	Zip Code	
		1	Date of Disbursement or Obligation
	Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
ľ	Name of Federal Candidate	Support	Office Sought: House District:
		Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures			
•			7 7 7
(c) TOTAL Independent Expenditures		32512.32
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
	Igram, M, , Cassim, MD,FAAOS [Electron	nically Filed] Date	10 28 2022
	Signature		