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Image# 12962899611

### **FEC** FORM 3X

### **REPORT OF RECEIPTS AND DISBURSEMENTS**

TOTTIM OX FO	r Other Than An Ai	utnorized Commit	lee		Office Use Only
1. NAME OF TO COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typ over the lines.	ing, type	12FE4M5	
SOCIETY FOR CARDIOV	ASCULAR ANGIO	GRAPHY AND IN	ITERVEN	TIONS ASS	SOCIATION PAC
ADDRESS (number and street)	2400 N ST NW SUITE 60	4			
Check if different					
than previously reported. (ACC)	WASHINGTON			DC	20037
2. FEC IDENTIFICATION NUM	IBER ▼	CITY A		STATE A	ZIP CODE ▲
C C00519371	3.		NEW (N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	eb 20 (M2)	May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:		lar 20 (M3)	Jun 20 (M6)	H	(Non-Election Year Only)
April 15 Quarterly Report (Q1)		pr 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	PRE-Election	Primary (12		General (	
October 15 Quarterly Report (Q3)	Report for the:	Convention	(12C)	Special (	128)
January 31 Year-End Report (YE)	Elec	etion on	D   D /	Y   Y   Y   Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	X General (30	G)	Runoff (3	OR) Special (30S)
Termination Report (TER)	· ·	etion on 11	06	2012	in the State of
5. Covering Period 10	18 2012		M = M	26 /	2012
I certify that I have examined this	Report and to the best	of my knowledge and	belief it is tr	ue, correct and	d complete.
Type or Print Name of Treasurer	Norman Marc Linsky				
Signature of Treasurer Norman	Marc Linsky	[Electronical	ly Filed]	Date 12	06 / 2012
NOTE: Submission of false, erroneon	us, or incomplete informa	tion may subject the pe	rson signing	his Report to the	ne 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

#### SOCIETY FOR CARDIOVASCULAR ANGIOGRAPHY AND INTERVENTIONS ASSOCIATION PAC

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a	Cash on Hand January 1, 2012		0.00
(t	O) Cash on Hand at  Beginning of Reporting Period	19800.01	
(0	Total Receipts (from Line 19)	3050.00	30550.0
(0	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22850.01	30550.0
To	otal Disbursements (from Line 31)	5000.00	12700.00
R	ash on Hand at Close of eporting Period ubtract Line 7 from Line 6(d))	17850.01	17850.0
th	ebts and Obligations Owed <b>TO</b> e Committee (Itemize all on chedule C and/or Schedule D)	0.00	
th	ebts and Obligations Owed BY e Committee (Itemize all on chedule C and/or Schedule D)	0.00	

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

#### SOCIETY FOR CARDIOVASCULAR ANGIOGRAPHY AND INTERVENTIONS ASSOCIATION PAC

R	eport Covering the Period: From:	18 2012	To: 11 / 26 / 2012
	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	0750.00	20050.04
	(i) Itemized (use Schedule A)	2750.00	30250.01
	(ii) Unitemized(iii) TOTAL (add	200.00	200.00
	Lines 11(a)(i) and (ii)	2950.00	30450.01
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines		
10	11(a)(iii), (b), and (c)) (Carry  Totals to Line 33, page 5)  Transfers From Affiliated/Other	2950.00	30450.01
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.)		
16.	(Carry Totals to Line 37, page 5)  Refunds of Contributions Made	0.00	0.00
	to Federal Candidates and Other		
	Political Committees	100.00	100.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18.	Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account	0.00	0.00
	(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
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶  Total Federal Receipts	3050.00	30550.01
_0.	(subtract Line 18(c) from Line 19)▶	3050.00	30550.01

#### **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
1.	Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caronaa. Tour to Bato
	(i) Federal Share	0.00	0.00
	··		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating  Expenditures	0.00	0.00
	(c) Total Operating Expenditures	7	
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party		0.00
	Committees Contributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	5000.00	12700.00
	Independent Expenditures	0.00	0.00
	(use Schedule E)	7 7	5.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other		0.00
	Than Political Committees	0.00	0.00
	(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	0.00
	Other Disbursements	0.00	0.00
	Other Dissursements	3.00	
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(/) 1 333141 311413		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,	5000.00	The state of the s
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5000.00	12700.00
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	5000.00	40700.00
	from Line 31)	5000.00	12700.00

#### **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)	2950.00	30450.01
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2950.00	30450.01
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR	LINE	NU	MBER	:	PAGE	6	OF	9
(che	ck only	or	ne)					
×	11a		11b		11c	12		
	13		14		15	16		17

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

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) SOCIETY FOR CARDIOVASCUL	AR ANGIOGRAPHY AND INTERVE	NTIONS ASSOCIATION PAC
Α.			Date of Receipt
	Mailing Address 2701 Amherst Ave		11 18 2012
	City Dallas	State Zip Code TX 75225	Transaction ID : SA11AI.4207
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 500.00
	Name of Employer	Occupation	
	Cardio Consultants of Texas	Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) J. Ted Dodge Jr.		Date of Receipt
	Mailing Address 445 Lombard Lane  City	State Zip Code	11 14 2012
	Wenatchee	WA 98801	Transaction ID : SA11AI.4211  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	1000.00
	Name of Employer Wenatchee Valley Medical Cente	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
<del></del>	Full Name (Last, First, Middle Initial) Anju Gupta		Date of Receipt
	Mailing Address 110 South Paca Street		11 07 2012
	City Baltimore	State Zip Code MD 21201	Transaction ID : SA11AI.4213  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	University of Maryland	Physician	
	Receipt For:  Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	250.00	
s	UBTOTAL of Receipts This Page (optional)		1750.00
Т	OTAL This Period (last page this line number of	only)	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LIN	IE NUMBER	: PAGE	7 OF	9
(check c	only one)			
X 11a	11b	11c	12	
13	14	15	16	17

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

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SOCIETY FOR CARDIOVASCUL	AR ANGIOGRAPHY AND INTERVE	ENTIONS ASSOCIATION PAC
Full Name (Last, First, Middle Initial)  Dr. Bonnie Weiner  Mailing Address Post Office Box 707		Date of Receipt
		10 20 2012
City Harvard	State Zip Code MA 01451	Transaction ID : SA11AI.4189
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Bonnie H Weiner MD PC	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  3000.00	
Full Name (Last, First, Middle Initial)  Dr. Bonnie Weiner  Mailing Address Post Office Box 707		Date of Receipt
City	State Zip Code	11 07 2012 Transaction ID : SA11AI.4210
Harvard  FEC ID number of contributing federal political committee.	MA 01451	Amount of Each Receipt this Period 500.00
Name of Employer Bonnie H Weiner MD PC	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	<u> </u>	2750.00

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

	F	OR	LINE	NU	<b>MBER</b>	:	PAGE	=	8	OF	9
Use separate schedule(s) for each category of the	(0	che	ck only	or	ne)						
Detailed Summary Page			11a		11b		11c		12		
			13		14		15	×	16		17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) SOCIETY FOR CARDIOVASCUL	AR ANGIOGRAPHY AND INTERVE	NTIONS ASSOCIATION PAC
Full Name (Last, First, Middle Initial)  JR, CHARLES W. BOUSTANY  Mailing Address 20 F Street NW, Suite 500		Date of Receipt
	Charles Tim Contin	10 18 2012
City Washington	State Zip Code DC 20001	Transaction ID : SA16.4200  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С н4LA07029	100.00
Name of Employer	Occupation	
Receipt For: 2012  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  100.00	
Full Name (Last, First, Middle Initial)  3.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Laur necespt this Period
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number	only)	100.00

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule		
I LIVIIZED DISDONSLIVILINIS			
	for each category of the	e liman	22 🔀 23 🗆 24 🗆 25 🗀 26
	Detailed Summary Pag	e 27	28a 28b 28c 29 30
Any information copied from such Reports and Sta	ements may not be sold or	used by any porce	on for the purpose of soliciting contributions
or for commercial purposes, other than using the r			
NAME OF COMMITTEE (In Full)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
SOCIETY FOR CARDIOVASCULA		NID INTEDVE	NITIONIS ASSOCIATION DAG
/ SOCIETT FOR CARDIOVASCULA	K ANGIOGRAPHY P	MIND HINTERVE	IN HONS ASSOCIATION PAC
Full Name (Last, First, Middle Initial)		ı	
• • • • • • • • • • • • • • • • • • • •			Date of Disbursement
- JR, CHARLES W. BOUSTANY			
Mailing Address 20 F Street NW, Suite 500			11 26 2012
Mailing Address 201 Street NVV, Suite 300			11 20 2012
City	State Zip Code		
Washington	DC 20001		Transaction ID : SB23.4203
Purpose of Disbursement			
•			Amount of Each Disbursement this Period
Candidate Name			
JR, CHARLES W. BOUSTANY		Category/ Type	2500.00
•	sement For: 2012	Турс	
Senate	Primary Genera		
President	✓ Other (specify) ▼	•	
State: LA District: 03	Runoff		
	ranon		
Full Name (Last, First, Middle Initial)			Data of Dichursoment
B. MCCONNELL SENATE COMMI	11EE 14		Date of Disbursement
Mailing Address DO DOV			M M / D D / Y Y Y Y
Mailing Address PO BOX 1496			11 26 2012
City	State 7in Code		
City LOUISVILLE	State Zip Code KY 40201		Transaction ID : SB23.4206
Purpose of Disbursement	40201		
. arposo or biobarooment			Amount of Each Disbursement this Period
Candidate Name			Amount of Each Bioburgoment this I endu
Callandato Italiio	TEE 14.4	Category/ Type	2500.00
MCCONNELL SENATE COMMI		I IVDE I	
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Office Sought: House Disbur	sement For: 2014		
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Office Sought:    House   Disbur	ement For: 2014 Primary General		
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address	ement For: 2014 Primary General Other (specify)		
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)	ement For: 2014 Primary General		
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City	ement For: 2014 Primary General Other (specify)		
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Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement	ement For: 2014 Primary General Other (specify)		
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Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name	ement For: 2014  Primary General Other (specify) ▼  State Zip Code		M M / D D / Y Y Y Y
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disbur	State Zip Code	Category/ Type	M   M
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name	ement For: 2014  Primary General Other (specify) ▼  State Zip Code	Category/ Type	M   M
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disbur	State Zip Code	Category/ Type	M M / D D / Y Y Y Y
Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Disbur	State Zip Code  State For:  Primary General  Other (specify)   State Zip Code  General  General  General	Category/ Type	M M / D D / Y Y Y Y
Office Sought:  House Senate President State:  District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought:  House Senate President  Disbur	State Zip Code  State For:  Primary General  Other (specify)   State Zip Code  General  General  General	Category/ Type	M M / D D / Y Y Y Y
Office Sought:  House Senate President State:  District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought:  House Senate President State:  District:	State Zip Code  State Zip Code  Sement For:  Primary General  General	Category/ Type	M   M
Office Sought:  House Senate President State:  District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought:  House Senate President  Disbur	State Zip Code  State Zip Code  Sement For:  Primary General  General	Category/ Type	Amount of Each Disbursement this Period