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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3A	For Oth	er Than An	Authorize	d Committ	tee		Office Use C	Only
NAME OF COMMITTEE (in full)		MAILING LAE OR PRINT		ample:If typing er the lines	g, type			
American College of Rheu	matology (Rh				1 1 1			
ADDRESS (number and street)	1800 C	Century Place						1
Check if different than previously reported. (ACC)	Atlanta					GA	3034	4300
2. FEC IDENTIFICATION N	JMBER 1		CITY A		;	STATE	ZIF	PCODE A
C00432823			3. IS THIS REPORT		NEW (N) OR		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	R	lonthly eport ue On:	Feb 20 (M2		May 20 (M5)	H	ug 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:		H	Mar 20 (M3		Jun 20 (M6)	H	ep 20 (M9)	(Non-Election Year Only)
April 15 Quarterly Report	` '	40 Day	Apr 20 (M4		Jul 20 (M7)		ct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report October 15		PRE-Election Report for the		Primary (12F	-	=	al (12G)	Runoff (12R)
Quarterly Report January 31 Quarterly Report	(YE)	E	Election on			• • •		the ate of
July 31 Mid-Year Report(Non-elec Year Only) (MY)	tion (d)) 30-Day Post -Elect Report for the		General (300	G)	Runoff	(30R)	Special (30S)
Termination Rep (TER)	ort	·	Election on					the ate of
5. Covering Period	07	1 200	9	through	12	3 1	2009	
I certify that I have examined thi			ny knowledge	and belief it is	true, correct	and complet	e.	
Type or Print Name of Treasure	er Fred I	Dietz						
Signature of Treasurer Elect	tronically Filed	d by Fred Die	etz		D	ate 0	1 22	2010
NOTE : Submission of false, er	roneous, or ir	ncomplete infor	mation may s	ubject the pers	on signing thi	s Report to t	he penalties of	2 U.S.C 437g.
Office Use							FEC F	ORM 3X

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) 2/32 Write or Type Committee Name American College of Rheumatology (RheumPAC) D " D 0.7 0 1 2009 12 31 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 49394.84 January 1 (b) Cash on Hand at 83371.14 Begining of Reporting Period 24641.69 66759.27 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 108012.83 116154.11 6(a) and 6(c) for Column B) 18294.11 26535.39 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 89718.72 89618.72 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed 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) 3 / 32

Write or Type Committee Name

American College of Rheumatology (RheumPAC)

Report Covering the Period:

From:

M M D D D 0 1

2009

то.

м м 12 D D 31

^Y 2009

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	17290.00	49240.00
	(ii) Unitemized	6650.00	15914.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	23940.00	65154.00
((b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	23940.00	65154.00
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3. /	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
((Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
t	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	701.69	1605.27
	Transfers from Non-Federal and Levin Funds		
((a) Non-Federal Account (from Schedule H3)	0.00	0.00
((b) Levin Funds (from Schedule H5)	0.00	0.00
((c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	24641.69	66759.27
	Fotal Federal Receipts subtract Line 18(c) from Line 19)	24641.69	66759.27

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/32

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures	0.00	0.00
2	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Committees	0.00	0.00
3.	Contributions to		
	Federal Candidates/Committeesand Other Political Committees	17000.00	24000.00
	Independent Expenditure		
	(use Schedule E)	0.00	0.00
).	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
3	Loan Repayments Made	0.00	0.00
٥.	Loan repayments wade		
7.	Loans Made	0.00	0.00
	Refunds of Contributions To:		
	(a) Individuals/Persons Other Than Political Committees	250.00	500.00
		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))	250.00	500.00
).	Other Disbursements	1044.11	2035.39
٥.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	18294.11	26535.39
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	18294.11	26535.39
	from Line 31)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 32

	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)	23940.00	65154.00
34.	Total Contribution Refunds (from Line 28(d))	250.00	500.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	23690.00	64654.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 32 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Rheumatology (F	e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Howard Epstein Mailing Address 26900 Cedar Rd Ste 325 South City Beachwood FEC ID number of contributing federal political committee. Name of Employer Cleveland Clinic Beachwood Receipt For:	State OH C Occupatio physician		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Marius C Teodorescu	Aggregate	250.00	Date of Receipt
Mailing Address 6776 Fieldstone Drive City Burr Ridge FEC ID number of contributing federal political committee. Name of Employer Thera Test Labs Inc Receipt For: Primary General Other (specify) ▼	State IL C Occupatio physician		Transaction ID: 8044708 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Kevin Kempf Mailing Address 19272 Stone Oak Pkw City San Antonio FEC ID number of contributing federal political committee. Name of Employer Rheumatology Assoc. of So. TX Receipt For: Primary General Other (specify)	State TX C Occupation rheumator		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		•	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/32 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Rheumatology		, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Herbert Baraf			Date of Receipt
Mailing Address 2730 University Blv	d W Ste 310		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wheaton	State MD	Zip Code 20902	Transaction ID: 8048782 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20002	500.00
Name of Employer Arthritis & Rheumatism As- sociates, P.C Receipt For:	Occupation physician Aggregate		
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Everett Allen	!		Date of Receipt
Mailing Address 19272 Stone Oak P	kwy, Ste. 101		07 21 2009
City	State	Zip Code	Transaction ID: 8076882
San Antonio	TX	78258	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Gary M Kammer			Date of Receipt
Mailing Address 382 Blossom LN.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 8091411
Chagrin Falls FEC ID number of contributing federal political committee.	OH C	44022-5111	Amount of Each Receipt this Period 250.00
Name of Employer Arthritis Associates, INC	Occupation Rheumat		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
			1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Rheumatolo	and Statements may not be sold or used by any person ng the name and address of any political committee to solve (RheumPAC)	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	gy (rindami 70)	Date of Receipt
Mailing Address 875 Cotswolds C	Т	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 8101201
Richardson	TX 75081	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Rheumatology Associates	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dennis Boulware		Date of Receipt
Mailing Address 1603 Olalahina P	1	07 31 YYYYY 2009
City	State Zip Code	Transaction ID: 8107652
<u>Honolulu</u>	HI 96817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hawaii Permanente Medical Grou	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Talat J Kheshgi		Date of Receipt
Mailing Address 5809 Dove Creek	Lane	07 31 7 2009
City <u>Plano</u>	State Zip Code TX 75093	Transaction ID: 8107695 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rheumatology Associates	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9/32 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Rheumatolog		, , , ,	
Full Name (Last, First, Middle Initial) David Rosenstock			Date of Receipt
Mailing Address 3443 West Wheatl	and Road		M M / D D / Y Y Y Y Y O O O O O
City Dallas	State TX	Zip Code 75237	Transaction ID: 8109291
FEC ID number of contributing federal political committee.	C	13231	Amount of Each Receipt this Period 250.00
Name of Employer Solo Practice	Occupation Rheumat		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Bessie M Sullivan			Date of Receipt
Mailing Address 35-37 Progress St	#A 2		0 8 2 1 Y Y Y Y Y
City Edison	State NJ	Zip Code 08820-1179	Transaction ID: 8164041
FEC ID number of contributing federal political committee.	C	00020-1179	Amount of Each Receipt this Period 250.00
Name of Employer Bessie M Sullivan, MD, PA	Occupation physician		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Melvin Britton			Date of Receipt
Mailing Address 167 Toyon Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Attierton	State CA	Zip Code 94027	Transaction ID: 8235010
FEC ID number of contributing federal political committee.	C	34027	Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (options			1000.00

Mailing Address 445 Biltmore Center, Suite 306 City State Zip Code NC 28801 FEC ID number of contributing federal political committee. Name of Employer Asheville Arthrifis physician Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) George A Housley Mailing Address 101 Edgewater Cove City State Zip Code Tran Belden MS 38826 FEC ID number of contributing federal political committee. Name of Employer North MS Med Clinics physician Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) C C C C C C C C C C C C C C C C C C C	NE NUMBER: PAGE 10 / 32 only one) la 11b 11c 12 3 14 15 16 11
A. Full Name (Last, First, Middle Initial) Ellison Smith Mailing Address 445 Biltmore Center, Suite 306 City State Zip Code Tran Asheville NC 28801 FEC ID number of contributing federal political committee. Name of Employer Asheville Arthrifts Primary General Other (specify) ▼	urpose of soliciting contributions tributions from such committee.
City State Zip Code Asheville NC 28801 FEC ID number of contributing federal political committee. Name of Employer Asheville Arthrifis Dotter (specify) ▼	e of Receipt
Asheville NC 28801 FEC ID number of contributing federal political committee. Name of Employer Asheville Arthritis Receipt For: Primary General Other (specify) ▼ State Zip Code MS 38826 FEC ID number of contributing federal political committee. Name of Employer Asheville Arthritis Primary General Other (specify) ▼ Tran MS 38826 Name of Employer North MS Med Clinics Name of Employer North MS Med Clinics Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran Primary General Other (specify) ▼ Primary General Other (specify) ▼ Primary General Other (specify) ▼ Page of Employer Occupation	
FEC ID number of contributing federal political committee. Name of Employer Asheville Arthritis Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) George A Housley Mailing Address 101 Edgewater Cove City State Zip Code MS 38826 FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C C State Zip Code Tran Aggregate Year-to-Date ▼ FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran FEC ID number of contributing federal political committee. C C	saction ID: 8239614
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) George A Housley Mailing Address 101 Edgewater Cove City State Zip Code MS 38826 Amm FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Primary General Other (specify) ▼ City State Zip Code Tran Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code MS 38826 Amm FEC ID number of contributing Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran FEC ID number of contributing federal political committee. Name of Employer Coccupation	ount of Each Receipt this Period
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) George A Housley Mailing Address 101 Edgewater Cove City State Zip Code Belden MS 38826 FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Receipt For: Primary General Other (specify) ▼ City State Zip Code Tran Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran FEC ID number of contributing federal political committee. Name of Employer Cuty State Zip Code Tran Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Other Cast State Other Cast State Date Manuel Cast, First, Middle Initial) City State City State Zip Code Tran Manuel Cast, First, Middle Initial) City State Zip Code Tran Other Cast State Date Manuel Cast, First, Middle Initial) City State Date Manuel Cast, First, Middle Initial Date Manuel Cast State Da	
Address 101 Edgewater Cove City State Zip Code MS 38826 FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran Most State Zip Code Tran Mo	
City State Zip Code Belden MS 38826 FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Receipt For: Primary General Other (specify) ▼ Cull Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code West Linn OR 97068 FEC ID number of contributing federal political committee. Name of Employer Cultivation Cult	e of Receipt
Belden FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran West Linn FEC ID number of contributing federal political committee. Name of Employer Name of Employer Occupation Occupation Date Tran Amo City State Zip Code Tran Amo Company Com	
FEC ID number of contributing federal political committee. Name of Employer Norht MS Med Clinics Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code Tran West Linn OR 97068 FEC ID number of contributing federal political committee. Name of Employer Occupation City State Zip Code Tran Amount Code Amount Code	saction ID: 8246612
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State West Linn OR Primary Other (specify) ▼ Date Most Linn OR Primary State OR Primary State OR OR OR Primary One City State OR OR OR OR OR OR OCcupation OCcupation	ount of Each Receipt this Period
Primary General Other (specify) Cher (
Elizabeth Tindall Mailing Address 1255 SW Schaeffer Rd City State Zip Code West Linn OR 97068 FEC ID number of contributing federal political committee. Name of Employer Occupation	
City State Zip Code Tran West Linn OR 97068 FEC ID number of contributing federal political committee. Name of Employer Occupation	e of Receipt
West Linn OR 97068 Amo FEC ID number of contributing federal political committee. Name of Employer Occupation	9 25 7 2009
FEC ID number of contributing federal political committee. Name of Employer Occupation	saction ID: 8246615
	ount of Each Receipt this Period
Receipt For: Primary Other (specify) Aggregate Year-to-Date 1100.00	
SUBTOTAL of Receipts This Page (optional)	1250.00

TT EIWIEED	RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 15 16 11
or for commercia	copied from such Reports and S al purposes, other than using the OMMITTEE (In Full)	statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American (College of Rheumatology (F	RheumPAC)		
Allan H Morto				Date of Receipt
Mailing Addre	ess 30101 Hoover		7: 0 1	09 26 2009
City Warren		State MI	Zip Code 48093	Transaction ID: 8246618 Amount of Each Receipt this Period
FEC ID numb	ber of contributing all committee.	С		1000.00
Name of Emp Allan H Morto	oloyer on, D.O.P.C.	Occupation physician		
Receipt For: Primary Other (y General specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Herbert Baraf	ast, First, Middle Initial)			Date of Receipt
Mailing Addre	ess 2730 University Blvd V	V Ste 310		09 28 2009
City		State MD	Zip Code	Transaction ID: 8246824
Wheaton FEC ID numbers federal politics	ber of contributing al committee.	C	20902	Amount of Each Receipt this Period 500.00
Name of Emp Arthritis & Rh sociates, P.C	neumatism As-	Occupation physiciar		
Receipt For: Primary		Aggregate	Year-to-Date ▼ 1000.00	
Full Name (L Nilsa Cruz	ast, First, Middle Initial)	1		Date of Receipt
Mailing Addre	ess 2801 W KK River Pkw Ste. 375	у		09 30 7 2009
City <u>Milwaukee</u>		State WI	Zip Code 53215	Transaction ID: 8259125 Amount of Each Receipt this Period
FEC ID numb	ber of contributing al committee.	С		1000.00
nter	oloyer heumatology Ce-	Occupation rheumato	ologist	
Receipt For: Primary Other (y General specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of	Receipts This Page (optional)		I	2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Rheumatolog	nd Statements may not be sold or used by any person g the name and address of any political committee to sold (RheumPAC)	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mary Overman Mailing Address 3701 E Union St. City Seattle FEC ID number of contributing federal political committee. Name of Employer	State Zip Code WA 98122-3456 C Occupation	Date of Receipt M M O O O O O O O Transaction ID: 8285814 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) James Barry Lesser Mailing Address 7107 Daventry Wo	ods Drive State Zip Code	Date of Receipt 10 05 2009 Transaction ID: 8285820
West Bloomfield FEC ID number of contributing federal political committee. Name of Employer	MI 48322 C Occupation	Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify)	rheumatologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Benjamin Harris Mailing Address 516 E Stella Lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Phoenix FEC ID number of contributing	State Zip Code AZ 85012	Transaction ID: 8285821 Amount of Each Receipt this Period 500.00
federal political committee. Name of Employer Phoenix Rheumatology Specialis	Occupation Rheumatologist	300.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 32 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Rheumatolog	y (RheumPAC)		
Full Name (Last, First, Middle Initial) Michael C Schweitz			Date of Receipt
Mailing Address 7721 Pine Tree LN			10 08 2009
City	State	Zip Code	Transaction ID: 8300016
West Palm Beach FEC ID number of contributing federal political committee.	FL C	33406-7833	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	n	-
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Audrey Uknis			Date of Receipt
Mailing Address 11 Jacqueline Circl	le		M M / D D / Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City Richboro	State PA	Zip Code	Transaction ID: 8300724
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 200.00
Name of Employer Temple University	Occupation Physician		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Haddon C Alexander			Date of Receipt
Mailing Address 3474 Bleak House	Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 8667150
Earlysville FEC ID number of contributing federal political committee.	C	22936-2213	Amount of Each Receipt this Period 250.00
Name of Employer self employed	Occupation of the companion of the compa		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		1450.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	5)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 32 (check only one) X		
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any perso dress of any political committee to			
NAME OF COMMITTEE (In Full) American College of Rheumatology	(RheumPAC)				
Full Name (Last, First, Middle Initial) Rajat Dhar			Date of Receipt		
Mailing Address 442 Bldg D Commo	Mailing Address 442 Bldg D Commons Way				
City	State	Zip Code	Transaction ID: 8667152		
Toms River	NJ	08755	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer self employed	Occupation rheumato				
Receipt For:		Year-to-Date ▼	\dashv		
Primary General Other (specify) ▼	, iggregate	250.00			
Full Name (Last, First, Middle Initial) Gary Bryant	I		Date of Receipt		
Mailing Address 5429 Vining Point R	load		10 18 2009		
City	State	Zip Code	Transaction ID: 8667156		
Minnetonka	MN	55345	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer University of Minnesota	Occupation Physician		7		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Jonathan Kay			Date of Receipt		
Mailing Address 62 Olde Field Road			10 20 2009		
City	State	Zip Code	Transaction ID: 8667163		
Newton Centre	MA	02459	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		20.00		
Name of Employer Mass General Physicians Org	Occupation Physician		7		
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼	0 0	270.00			
			770.00		

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 32 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes.	d Statements may	, ,	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Rheumatology		area or any pointed committee to	
Full Name (Last, First, Middle Initial) Enrico Arguelles			Date of Receipt
Mailing Address 3232 Lloyd Mangrun	n Lane		10 20 20 9
City	State	Zip Code	Transaction ID: 8667166
Billings	MT	59106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Arthritis & Osteoporosis	Occupation Physician		
Cente Receipt For:		e Year-to-Date ▼	_
Primary General Other (specify) ▼	, iggi ogalo	500.00]
Full Name (Last, First, Middle Initial) Charles King			Date of Receipt
Mailing Address 179 Edgewater Cv			10 20 YYYYY 2009
City	State	Zip Code	Transaction ID: 8667169
Belden	MS	38826-9145	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer NMMCI	Occupation Physician		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Terence Starz			Date of Receipt
Mailing Address 179 Woodshire Dr			10 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 8667358
Pittsburgh	PA	15215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer UPMC	Occupation physician		
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼		500.00	
			1100.00

SCHEDULE A (FE)		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, o	other than using the name and ac	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Mic William Harvey Mailing Address 715 Al	ddle Initial) bany St	Zip Code	Date of Receipt 10 20 7 2009 Transaction ID: 8667719
Boston FEC ID number of contrib federal political committee		02118	Amount of Each Receipt this Period 500.00
Name of Employer Boston Medical Center Receipt For: Primary Other (specify)	Occupation Physicia Aggregat Physicia		
Full Name (Last, First, Mic Jonathan Kay Mailing Address 62 Old	, 		Date of Receipt 1 0 2 1 2 0 0 9
City Newton Centre FEC ID number of contrib		Zip Code 02459	Transaction ID: 8667730 Amount of Each Receipt this Period 20.00
Name of Employer Mass General Physicians Org Receipt For: Primary Other (specify)	Occupation Physicia		
Full Name (Last, First, Mid	ddle Initial) Academy Ave	0 0 0 0 0 0 0 0	Date of Receipt
City Danville	State PA	Zip Code 17822	Transaction ID: 8668250 Amount of Each Receipt this Period
FEC ID number of contribution federal political committee			250.00
Name of Employer Geisinger Medical Center Receipt For:	priysicia		
	eneral	250.00	
SUBTOTAL of Receipts Thi	s Page (optional))	770.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Benorts at	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 32 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Rheumatology	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert Lloyd		Date of Receipt
Mailing Address 3277 Rose Glen C	Г	10 21 2009
City	State Zip Code	Transaction ID: 8668267
Falls Church	VA 22042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Arthritis & Rheumatism As- soc.	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Arthur Huppert	I	Date of Receipt
Mailing Address 245 N Broad St Ste	e 403	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 8668270
Philadelphia	PA 19107-1518	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-Employed	Occupation Rheumatologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Timothy Laing		Date of Receipt
Mailing Address 5522 Warren Road		10 20 7 2009
City	State Zip Code	Transaction ID: 8668273
Ann Arbor	MI 48105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer University of Michigan	Occupation MD	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
SURTOTAL of Receipts This Page (options	l)	1140.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 32 (check only one) X				
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Rheumatology	the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) Jeffrey Lawson Mailing Address 20 Crescent Ave			Date of Receipt				
Mailing Address 20 Crescent Ave City	State	Zip Code	10 20 2009 Transaction ID: 8668275				
Greenville FEC ID number of contributing federal political committee.	SC C	29605	Amount of Each Receipt this Period 20.00				
Name of Employer Piedmont Arthritis Center	Occupatio Physicia						
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00					
Full Name (Last, First, Middle Initial) Michael C Schweitz Mailing Address 7721 Pine Tree LN	<u> </u>		Date of Receipt 10 20 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
City	City State Zip Code						
West Palm Beach	FL	33406-7833	Transaction ID: 8668276 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		20.00				
Name of Employer	Occupatio	n					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1270.00					
Full Name (Last, First, Middle Initial) William Harvey			Date of Receipt				
Mailing Address 715 Albany St			10 20 2009				
City	State	Zip Code	Transaction ID: 8668277				
Boston FEC ID number of contributing federal political committee.	C	02118	Amount of Each Receipt this Period 20.00				
Name of Employer Boston Medical Center	Occupatio Physicia						
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00					
SUBTOTAL of Receipts This Page (optional)			60.00				

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/32 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Rheumatology	(RheumPAC)		
Full Name (Last, First, Middle Initial) Charles Geringer			Date of Receipt
Mailing Address 12230 Arbor Trail			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State	Zip Code	Transaction ID: 8668278
Palos Heights FEC ID number of contributing federal political committee.	C	60463-1877	Amount of Each Receipt this Period 20.00
Name of Employer	Occupation	n tologist and Internest	7
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Neal Birnbaum			Date of Receipt
Mailing Address 97 Carte Alejo	10 20 2009		
City	State	Zip Code	Transaction ID: 8668279
Greenbrag FEC ID number of contributing federal political committee.	CA	94904	Amount of Each Receipt this Period 20.00
Name of Employer Pacific Rheumatology Asso-	Occupation Rheumat		
ciate Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) John A Goldman			Date of Receipt
Mailing Address 5800 Timberlane Te	errace		10 20 2009
City Atlanta	State GA	Zip Code 30328	Transaction ID: 8668280 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30320	20.00
Name of Employer John A Gold MAN MD PC	Occupation Rheumat		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optiona			60.00

SCHEDULE A (FEC Form 3X)

CHEDULE A (FEC Form 3X EMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 32 (check only one) X
ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (4.5 F. II)	d Statements may he name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Rheumatology	(RheumPAC)		
Full Name (Last, First, Middle Initial) Herbert Baraf			Date of Receipt
Mailing Address 2730 University Blvo		7'a Cada	10 20 2009
City Wheaton	State MD	Zip Code 20902	Transaction ID: 8668281 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Arthritis & Rheumatism As- sociates, P.C	Occupation physician		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1040.00	
Full Name (Last, First, Middle Initial) Jeffrey Lawson			Date of Receipt
Mailing Address 20 Crescent Ave			10 20 7 7 7 9
City	State	Zip Code	Transaction ID: 8668282
Greenville	SC	29605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Piedmont Arthritis Center	Occupation Physician		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		540.00	
Full Name (Last, First, Middle Initial) Edward Herzig			Date of Receipt
Mailing Address 419 Reilly Road			10 20 7 7 7 9
City	State	Zip Code	Transaction ID: 8668283
Cincinnati	OH	45215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Herzig Krall Medical Group	Occupation Physician	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1020.00	
SUBTOTAL of Receipts This Page (optional)			80.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 32 (check only one) X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	American College of Rheumatology (RheumPAC)		
Α.	Full Name (Last, First, Middle Initial) Joseph Flood Mailing Address 751 Jaeger Street			Date of Receipt
		10 20 2009		
	City	State	Zip Code	Transaction ID: 8668285
	Columbus FEC ID number of contributing	OH	43206-2272	Amount of Each Receipt this Period
	federal political committee.	C		40.00
	Name of Employer Musculoskeletal Med Speci- alist	Occupation Physicia	n n Rheumatologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼			
- В.	Full Name (Last, First, Middle Initial) David Fox	Date of Receipt		
	Mailing Address 200 Barton N. Dr			10 20 2009
	City	State	Zip Code	Transaction ID: 8668286
	Ann Arbor	MI	48105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer University of Michigan	Occupation Physicia		
	Receipt For:	, ' · · ·	e Year-to-Date ▼	
	Primary General Other (specify) ▼		270.00	
С. С.	Full Name (Last, First, Middle Initial) Paul Goldfarb			Date of Receipt
	Mailing Address 2113 Palmbrooke Ct			10 21 2009
	City	State	Zip Code	Transaction ID: 8668588
	Lexington	KY	40513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Occupation rheumate		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
Γ		0 0	0 0 0 0 0 0 0	
	SUBTOTAL of Receipts This Page (optional) .			1060.00
ſ	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 32 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	
American College of Rheumatology	(RheumPAC)	
Full Name (Last, First, Middle Initial) Gloria Higgins		Date of Receipt
Mailing Address 2202 Bryden Rd.	01.1. 7° 0.1.	11 06 2009
City Columbus	State Zip Code OH 43209	Transaction ID: 8709328 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Ohio State University and Pediatric Ac	Occupation physician	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ronald E Krauser		Date of Receipt
Mailing Address 35 Broad Leaf Trail		1 1 1 1 9 2 0 0 9
City	State Zip Code	Transaction ID: 8742842
<u>Malvern</u>	PA 19355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ronald E Krauser, MD, PC	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Salahuddin Kazi		Date of Receipt
Mailing Address 9301 N Central Expr	essway Ste 675	12 05 2009
City	State Zip Code	Transaction ID: 8775239
Dallas	TX 75231-0823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Arthritis Consulation Ctr	Occupation physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	
SUBTOTAL of Receipts This Page (optional)		800.00

A.

В.

PAGE 23/32 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Rheumatology (RheumPAC) Full Name (Last, First, Middle Initial) Date of Receipt Steven Wees Mailing Address 16120 W. Dodge Ro 23 12 2009 City State Zip Code Transaction ID: 8820931 Omaha NE 08118 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Physicians Clinic Occupation Rheumatologist Receipt For: Aggregate Year-to-Date General Primary 250.00 Other (specify) Full Name (Last, First, Middle Initial) Everett Allen Date of Receipt Mailing Address 19272 Stone Oak Pkwy, Ste. 101 07 21 2009 City State Zip Code Transaction ID: 8890269 San Antonio TX 78258 Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date [MEMO ITEM] Primary General Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$25-

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	<u> </u>	17290.00

250.00

Other (specify)

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 32 (check only one) 11a 11b 11c 12 13 14 15 16 17 11
A	ny information copied from such Reports and for commercial purposes, other than using the	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Rheumatology (
∠ \.	Full Name (Last, First, Middle Initial) American College of Rheumatology	Date of Receipt		
	Mailing Address	01-1-	7. 0.4	07 29 2009
	City	State	Zip Code	Transaction ID: 8107656 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.86
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1044.44	
 s.	Full Name (Last, First, Middle Initial) American College of Rheumatology	Date of Receipt		
	Mailing Address			08 17 2009
	City	State	Zip Code	Transaction ID: 8154739
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 105.22
	Name of Employer	Occupatio	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1149.66	
	Full Name (Last, First, Middle Initial) American College of Rheumatology	-		Date of Receipt
	Mailing Address			0 9 1 6 2 0 0 9
	City	State	Zip Code	Transaction ID: 8235220 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.04
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1274.70	
Г	SUBTOTAL of Receipts This Page (optional)	1		371.12

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page		R LINE ck only 11a 13		MBER: e) 11b 14	11c 15	25 / 32 12 16	2 17
	ny information copied from such Reports and Statem for commercial purposes, other than using the name									
$\sqrt{\ \ }$	NAME OF COMMITTEE (In Full) American College of Rheumatology (Rheur	mPAC)								
_										
	Full Name (Last, First, Middle Initial) American College of Rheumatology				ate of	Red	ceipt			
	Mailing Address				м м 1 1	′	30	/ Y	0 0 9	
	City	State	Zip Code	Tı	ransac	tio	n ID: 87	49622		
	FEC ID number of contributing federal political committee.	C		_ A	mount	of	Each Re	ceipt th	eriod 30.57	
	Name of Employer Or	ccupation	ו							
	Receipt For: Primary General Other (specify) ▼	ggregate	Year-to-Date ▼ 1605.27							

SUBTOTAL of Receipts This Page (optional)	•	330.57
TOTAL This Period (last page this line number only)	•	701.69

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name	for each category of the Detailed Summary Page (check only 21b 27 ents may not be sold or used by any person the control of the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check only 21b 27 ents may not be sold or used by any person the check of the check only 21b 27 ents may not be sold or used by any person the check of the check o	22 23 24 25 26 X 28a 28b 28c 29 30b for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Rheumatology (Rheun		
Full Name (Last, First, Middle Initial) Everett Allen Mailing Address 19272 Stone Oak Pkwy, S	Ste. 101	Transaction ID: 8056933 Date of Disbursement O 7
7	tate Zip Code TX 78258 010 Category/ Type	Amount of Each Disbursement this Period 250.00
	nent For: Primary General Other (specify)	Refund of Corporate Contribution received 6/30

SUBTOTAL of Disbursements This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	•	250.00

	Use separate schedule(s) FOR (chec		eck only		•	1 7	AGE 27	7 32
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 28c	25 29	9 🗆
Any Information copied from such Reports and Stator for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)	aric and address of any point	zar committ	CC 10 30	mon conting	ations no	II Sucii (201111111111	
American College of Rheumatology (Rh	eumPAC)							
Full Name (Last, First, Middle Initial)					ction ID:		34	
Wyden For Senate					Disburser		/ /	V ° V
Mailing Address 232 Ne 9th Avenue				07	1;	3 /	20	0 9 °
City Portland	State Zip Code OR 97232			Amoun	t of Each [Disburse	ment th	is Perio
Purpose of Disbursement	011 07202		-				1000.	.00
Event July 22		011	I					
Candidate Name Sen. Ron Wyden		Catego Typo	•					
	rsement For: 2009 Primary X Genera			Event .	luly 22			
X Senate President	Other (specify)	u						
State: OR District:								
Full Name (Last, First, Middle Initial)				Transa	ction ID:	80569	36	
Anna Eshoo For Congress					Disburser		/ V	V * V
Mailing Address 555 Capitol Mall, Suite	1425			07	[/] 1;	3 / [Ž 0	ŏ 9 ˇ
City Sacramento	State Zip Code CA 95814			Amoun	t of Each [Disburse	ment th	is Perio
Purpose of Disbursement			-				1500.	.00
Event July 16		011						
Candidate Name Rep. Anna Eshoo		Catego Type	-					
Office Sought: X House Disbu	rsement For: 2009			Event .	luly 16			
Senate President	Primary X Genera	d		Lvent	raly 10			
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Full Name (Last, First, Middle Initial) Mike Thompson For Congress					ction ID:		20	
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American College of Rheumatolog	y (RheumPAC)										
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Full Name (Last, First, Middle Initial)											32957	89			
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NAME OF COMMITTEE (In Full)										
/ American College of Rheumatology (Rheu	mPAC)									
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American College of Rheumatology (Rheu	mPAC)		
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Mailing Address PO Box 622227			
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