

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 America's Physician Groups PAC

ADDRESS (number and street) 915 WILSHIRE BLVD SUITE 1620 Los Angeles CA 90017-2658

2. FEC IDENTIFICATION NUMBER C00461756 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 / 01 / 2021 through 12 / 31 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Robinette, Shelley, Ms., Type or Print Name of Treasurer

Signature of Treasurer Robinette, Shelley, Ms. [Electronically Filed] Date 01 / 18 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**America's Physician Groups PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		155403.92
(b) Cash on Hand at Beginning of Reporting Period.....	154379.73	
(c) Total Receipts (from Line 19) .....	2759.33	10783.14
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	157139.06	166187.06
7. Total Disbursements (from Line 31).....	8503.00	17551.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	148636.06	148636.06
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

America's Physician Groups PAC

Report Covering the Period: From: 07 / 01 / 2021 To: 12 / 31 / 2021

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2750.00	10300.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2750.00	10300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2750.00	10300.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	464.55
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	9.33	18.59
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2759.33	10783.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2759.33	10783.14

**DETAILED SUMMARY PAGE**

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	503.00	1051.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	503.00	1051.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	16500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8503.00	17551.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8503.00	17551.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2750.00	10300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2750.00	10300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	503.00	1051.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	464.55
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	503.00	586.45

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

**A. Doshi, Rachit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 Shearwater  
 City Irvine State CA Zip Code 92604-4617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MemorialCare Medical Group Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 06 / 2021  
**Transaction ID : AE2726A00F72B4D50992**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Merkin, Richard, , Dr., MD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3115 Ocean Front Walk Apt 301  
 City Marina Del Rey State CA Zip Code 90292-5142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Heritage Provider Network Occupation (for Individual) President/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 22 / 2021  
**Transaction ID : AF3ACF61626CD432DBA2**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Interest

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	2750.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

**A. Merrill Lynch**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Spectrum Center Dr  
Ste 1100

City Irvine State CA Zip Code 92618-4978

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2021

FEC Identification Number: C

Transaction ID : BA09DB0E3E

Amount of Each Disbursement this Period: 31.75

Memo Item

**B. Merrill Lynch**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Spectrum Center Dr  
Ste 1100

City Irvine State CA Zip Code 92618-4978

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2021

FEC Identification Number: C

Transaction ID : B2DFE0C155

Amount of Each Disbursement this Period: 300.00

Memo Item

**C. Aristotle**

Full Name (Last, First, Middle Initial)

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2021

FEC Identification Number: C

Transaction ID : B0A1E549C3

Amount of Each Disbursement this Period: 12.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 344.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

Full Name (Last, First, Middle Initial) <b>A. Merrill Lynch</b>			Date of Disbursement MM / DD / YYYY 08 / 01 / 2021		
Mailing Address 100 Spectrum Center Dr Ste 1100			FEC Identification Number C [REDACTED] <b>Transaction ID : B986E276C5I</b> Amount of Each Disbursement this Period 31.75		
City Irvine	State CA	Zip Code 92618-4978	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Merrill Lynch</b>			Date of Disbursement MM / DD / YYYY 09 / 01 / 2021		
Mailing Address 100 Spectrum Center Dr Ste 1100			FEC Identification Number C [REDACTED] <b>Transaction ID : B7C12FA584I</b> Amount of Each Disbursement this Period 31.75		
City Irvine	State CA	Zip Code 92618-4978	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Merrill Lynch</b>			Date of Disbursement MM / DD / YYYY 10 / 01 / 2021		
Mailing Address 100 Spectrum Center Dr Ste 1100			FEC Identification Number C [REDACTED] <b>Transaction ID : BC4027F3C0I</b> Amount of Each Disbursement this Period 31.75		
City Irvine	State CA	Zip Code 92618-4978	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Bank Fee		Category/ Type	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.25
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

**A. Merrill Lynch**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Spectrum Center Dr  
Ste 1100

City Irvine State CA Zip Code 92618-4978

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 01 / 2021

FEC Identification Number: C

Transaction ID : B0839A3C9A

Amount of Each Disbursement this Period: 31.75

Memo Item

**B. Merrill Lynch**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Spectrum Center Dr  
Ste 1100

City Irvine State CA Zip Code 92618-4978

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 01 / 2021

FEC Identification Number: C

Transaction ID : B0E537811A4

Amount of Each Disbursement this Period: 31.75

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	63.50
<b>TOTAL</b> This Period (last page this line number only).....▶	503.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

**A. NANCY PELOSI FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 607 14th Street, NW  
Suite 800

M M M	/	D D D	/	Y Y Y Y Y
07		23		2021

City Washington State DC Zip Code 20005

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00213512
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Candidate Name  
**Pelosi, Nancy, , Rep.,**

**Transaction ID : BEE203C89D**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: CA District: 12

1000.00
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Memo Item

**B. MULLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3681

M M M	/	D D D	/	Y Y Y Y Y
12		15		2021

City MUSKOGEE State OK Zip Code 74402

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00498345
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**Transaction ID : BA1F1AD4B6**

Amount of Each Disbursement this Period

Candidate Name  
**Mullin, Markwayne, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: OK District: 02

1000.00
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Memo Item

**C. PEOPLE FOR PATTY MURRAY**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1602 Belle View Boulevard #510  
Attn: Tracey Buckman

M M M	/	D D D	/	Y Y Y Y Y
09		08		2021

City Alexandria State VA Zip Code 22307-6531

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00257642
---	-----------

**Transaction ID : B1FFE45F91**

Amount of Each Disbursement this Period

Candidate Name  
**Murray, Patty, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: WA District:

1000.00
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Memo Item

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

3000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

### A. DAN CRENSHAW FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 430965

M M M	/	D D D	/	Y Y Y Y Y
11		03		2021

City HOUSTON State TX Zip Code 77243

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00660795
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Candidate Name  
**Crenshaw, Daniel, , Rep.,**

Category/  
Type

Transaction ID : **B3FB26287F**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: TX District: 02

2500.00
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Memo Item

### B. PALLONE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3176

M M M	/	D D D	/	Y Y Y Y Y
10		27		2021

City Long Branch State NJ Zip Code 07740-3176

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00226928
---	-----------

Candidate Name  
**Pallone, Frank, , Rep., Jr.**

Category/  
Type

Transaction ID : **B9E8F900D24**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NJ District: 06

2500.00
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Memo Item

### C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y
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City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

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Memo Item

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

5000.00
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**TOTAL** This Period (last page this line number only)..... ▶

8000.00
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