04/08/2006 11:27

Image# 26960032664

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1.	NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT ₩	Example:If typing over the lines	, type	
	OB-GYNS FOR WOMEN'S	HEALTH PAC		1 1 1 1 1 1 1 1	
AD	DRESS (number and street)	409 12TH STREET SW			
	Check if different than previously reported. (ACC)	WASHINGTON		DC	20024
2.	FEC IDENTIFICATION NUM	IBER ♥ CI	TY 🛕	STATE	ZIPCODE 🛕
	C00364158		I A I	NEW OR	AMENDED (A)
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: X April 15 Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Year Report(Non-election Year Only) (MY) Termination Report (TER)	1) (c) 12-Day PRE-Election Report for the: 3) Electi (d) 30-Day Post -Election Report for the:	r 20 (M3) r 20 (M4) Primary (12F Convention (on on General (300)	Jun 20 (M6) S Jul 20 (M7) C P) Gener 12C) Specia	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Oct 20 (M10) Jan 31 (YE) al (12G) In the State of Special (30S) in the State of
5.	Covering Period 0 1	01 2006	through	03 31	2006
	ertify that I have examined this I pe or Print Name of Treasurer	Report and to the best of my kn	owledge and belief it is	true, correct and comple	te.
Sig		nically Filed by LUCIA DIVE			4 0 8 2 0 0 6 the penalties of 2 U.S.C 437g.
	Office Use Only				FEC FORM 3X (Rev. 02/2003)

Image# 26960032665

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name **OB-GYNS FOR WOMEN'S HEALTH PAC** D D " D 0 1 0 1 2006 0.3 3 1 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 78839.62 [°]2006 January 1 (b) Cash on Hand at 78839.62 Begining of Reporting Period 136370.00 136370.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 215209.62 215209.62 6(a) and 6(c) for Column B) 65481.29 65481.29 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 149728.33 149728.33 (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. 02/2003) Page 3

Write or Type Committee Name

OB-GYNS FOR WOMEN'S HEALTH PAC

(subtract Line 18(c) from Line 19)

0 1 3^D1 м N 0 1 М М 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 127725.00 127725.00 (i) Itemized (use Schedule A) 8645.00 8645.00 (ii) Unitemized (iii) TOTAL (add 136370.00 136370.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 136370.00 136370.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 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 Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 136370.00 136370.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 136370.00 136370.00

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
21. O (a	perating Expenditures: a) Shared Federal/Non-Federal		
(4	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b	o) Other Federal Operating Expenditures	47731.29	47731.29
(c	c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	47731,29	47731.29
2. Tı	ransfers to Affiliated/Other Party		
3. C	ommitteesontributions to	0.00	0.00
ar	ederal Candidates/Committeesd Other Political Committees	16500.00	16500.00
(u	dependent Expenditure use Schedule E)	0.00	0.00
b. Co Co (u	oordinated Expenditures Made by Party ommittees (2 U.S.C. 441a(d)) ise Schedule F)	0.00	0.00
	pan Repayments Made	0.00	0.00
7. Lo	pans Made	0.00	0.00
8. R (a	efunds of Contributions To: i) Individuals/Persons Other Than Political Committees	1250.00	1250.00
	man Folitical Committees		
(b	,	0.00	0.00
(c	c) Other Political Committees (such as PACs)	0.00	0.00
(d	,	1250.00	1250.00
	(add Lines 28(a), (b), and (c))	1250.00	1250.00
9. O	ther Disbursements	0.00	0.00
	ederal Election Activity (2 U.S.C 431(20))		
((a) Shared 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
1. T	otal Disbursements (add Lines 21(c), 22,		
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	65481.29	65481.29
	Total Federal Disbursements		
•	subtract Line 21(a)(ii) from Line 30(a)(ii)	65491.20	GE404.00
tr	rom Line 31)	65481.29	65481.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	ontributions/Operating openditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ions (other than loans)	136370.00	136370.00
34. Total Contribut (from Line 28(c	ion Refunds	1250.00	1250.00
	ns (other than loans) 34 from Line 33)	135120.00	135120.00
	operating Expenditures (i) and Line 21(b))	47731.29	47731.29
·	rating Expenditures page 3)	0.00	0.00
88. Net Operating B	Expenditures 37 from Line 36)	47731.29	47731.29

PAGE 6/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) LORI A. ABRAMS Date of Receipt Mailing Address 1921 WALDEMERE 03 20 2006 Zip Code City State Transaction ID: SA11A1.9661 **SARASOTA** 34239 FI Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer ABRAMS CENTER FOR WOMEN Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. RIDDICK ACKERMAN, III Date of Receipt Mailing Address 400 CONSTANCE STREET 03 06 2006 City Zip Code Transaction ID: SA11A1.9558 State **WALTERBORO** SC 29488 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOHN S. ADAMS Date of Receipt Mailing Address 1930 AVIARA DRIVE 03 20 2006 Citv State Zip Code Transaction ID: SA11A1.9663 **CHATTANOOGA** TN 37421 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer WOMEN'S HEALTH SERVICES Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/95
ıT	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
	., ., ., ., ., ., ., ., ., ., ., ., ., .			13 14 15 16 17
or	ny information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	r not be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH PAC			
_	Full Name (Last, First, Middle Initial)			
Α.	TOD C. AEBY			Date of Receipt
	Mailing Address 1319 PANAHUE STREET			03 16 2006
	City	State	Zip Code	Transaction ID: SA11A1.9621
	•	11	96826	Amount of Each Receipt this Period
	EFO ID asserbased and the first		00000	
	federal political committee.	;		250.00
	Name of Employer OC UNIVERSITY OF HAWAII	cupation	1	7
	UNIVERSITY OF HAWAII	HYSICI.	AN	
		ggregate	Year-to-Date ▼	
	Primary General	1	250.00	
	Other (specify)	1 1	250.00	
_	Full Name (Last, First, Middle Initial)			
В.	DARYL P. ALEXANDER			Date of Receipt
	Mailing Address 18411 CLARK STREET			03 20 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.9664
	TARZANA C	CA	91356	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	<u>, </u>		500.00
	Name of Employer	cupation	<u> </u>	-
	CELE EMBLOVED	HYSICI.		
			Year-to-Date ▼	
	Primary General	1 1	500.00	1
	Other (specify)		500.00	
_				
C.	Full Name (Last, First, Middle Initial) JODY L. ALEXANDER			Date of Receipt
	Mailing Address 1890 SW HEALTH PARKWA	AY		M M / D D / Y Y Y Y
				03 20 2006
	•	State	Zip Code	Transaction ID: SA11A1.9666
	NAPLES F	<u>-</u>	34109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee	<u>'</u>		1000.00
	federal political committee.			
	Name of Employer OC ESPECIALLY FOR WOMEN	cupation	1	7
	ESPECIALLY FOR WOMEN PH	HYSICI.	AN	
		ggregate	Year-to-Date ▼	
	Primary General	1	1000.00	
	Other (specify) ▼	1 1	1000.00	
,	LIPTOTAL of Possints This Boss (antional)		_	1750.00
\vdash	SUBTOTAL of Receipts This Page (optional)		······	
_	OTAL This Period (last page this line number only)			
	(pg			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 95				
ITEMIZED RECEIPTS			or each category of the		(check only one) X 11a 11b 11c 12			
			Detailed Summary Page	13	H 110 1	11c	16	□ 17
Any informa or for comm	tion copied from such Reports and Staterical purposes, other than using the na	tements may ame and add	not be sold or used by any persoress of any political committee to	n for the pur	ose of soli	citina contri	butions	
NAME O	F COMMITTEE (In Full)							
OB-GY	NS FOR WOMEN'S HEALTH PA	vC						
	e (Last, First, Middle Initial) J. ALTMAN			Date of	Receipt			
Mailing A	ddress 1507 PATTERSON ROA	ND		0 1	3 (2 0 0 6	
City		State	Zip Code	Transa	ction ID: S	A11A1.9	360	
MODES	STO	CA	95357	Amoun	t of Each R	eceipt this	Period	
	number of contributing olitical committee.	C				1	1000.0	0
Name of GOULD	Employer MEDICAL GROUP	Occupation PHYSICIA						
Receipt I		Aggregate	Year-to-Date ▼	.				
	mary General ner (specify) ▼		1000.00					
_	e (Last, First, Middle Initial) S. AMDUR			Date of	Receipt			
Mailing A	Mailing Address 425 MONTAUK AVENUE						2006	
City		State	Zip Code	Transaction ID: SA11A1.9622 Amount of Each Receipt this Period				
<u>NEW L</u>	ONDON	CT	06320					
FEC ID r federal p	number of contributing olitical committee.	C					250.0	0
Name of SELF-E	Employer MPLOYED	Occupation PHYSICIA						
Receipt I		Aggregate	Year-to-Date ▼					
	mary General ner (specify) ♥		250.00					
	e (Last, First, Middle Initial) US L. ANDERSON			Date of	Receipt			
Mailing A	ddress 2350 SIMPSON STREE	Т		0 3	/ 22		2006	
City		State	Zip Code	Transa	ction ID: S	SA11A1.9	594	
DUBUC		IA	52003	Amoun	t of Each R	eceipt this	Period	
	number of contributing olitical committee.	C					250.0	0
Name of DUBUQ	Employer UE OB/GYN	Occupation PHYSICIA						
Receipt F		Aggregate	Year-to-Date ▼					
	mary General ner (specify) ▼		250.00					
SUBTOTA	L of Receipts This Page (optional)					1	500.0	0
	- , , ,		-	-				-

PAGE 9/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) Date of Receipt JOHN T. ANSTEY Mailing Address 15 HORTENSE PLACE 03 2006 13 City Zip Code State Transaction ID: SA11A1.9533 ST. LOUIS MO 63108 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer ST. LOUIS OB/GYN SOCIETY Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** THOMAS F. ARNOLD Date of Receipt Mailing Address 938 2ND AVENUE WEST 03 16 2006 City Zip Code State Transaction ID: SA11A1.9623 **DICKINSON** ND 58601 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer DICKINSON CLINIC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. DIANE M. ASHTON Date of Receipt Mailing Address 128 ST. MARKS AVENUE 03 20 2006 Citv State Zip Code Transaction ID: SA11A1.9668 **BROOKLYN** NY 11217 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MARCH OF DIMES Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 95
TEMIZED RECEIPTS			or each category of the	(check only one)
•	EMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and State	ements may	not be sold or used by any perso	
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	OB-GYNS FOR WOMEN'S HEALTH PAGE	C		
۹.	Full Name (Last, First, Middle Initial) GUY AUDET			Date of Receipt
	Mailing Address 1600 WEST WALNUT			03 15 2006
	City	State	Zip Code	Transaction ID: SA11A1.9608
	JACKSONVILLE	IL	62650	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI.		
	Receipt For:		Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify) ▼		1000.00	
3.	Full Name (Last, First, Middle Initial) KATHERINE ANN AVERILL			Date of Receipt
	Mailing Address 261 GLENDOBBIN ROAL)		0 1 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.9361
	WINCHESTER	VA	22601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer WINCHESTER WOMEN'S CARE	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	_ · · ·	300.00	1
	Other (specify) ▼		000.00	
Э.	Full Name (Last, First, Middle Initial) NORMAN A. BACK			Date of Receipt
	Mailing Address 501 IRON BRIDGE ROAL	D		M M / D D / Y Y Y Y
	City	State	Zip Code	0 2 1 0 2 0 0 6 Transaction ID: SA11A1.9407
	FREEHOLD	NJ	07728	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional)			1800.00
т	OTAL This Period (last page this line number onl	v)		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/95
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y 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) OB-GYNS FOR WOMEN'S HEALTH PA	AC		
Α.	Full Name (Last, First, Middle Initial) DAVID A. BECK			Date of Receipt
	Mailing Address 1402 WEST 4TH STRE	ET		03 20 2006
	City GILETTE	State WY	Zip Code	Transaction ID: SA11A1.9672
	FEC ID number of contributing federal political committee.	C	82716	Amount of Each Receipt this Period 1000.00
	Name of Employer WOMEN'S HEALTHCARE	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) SCOTT A. BECKMAN Mailing Address 613 DORBETT STREE	г		Date of Receipt
		03 20 2006		
	City JASPER	State IN	Zip Code 47546	Transaction ID: SA11A1.9674
	FEC ID number of contributing federal political committee.	C	4/340	Amount of Each Receipt this Period 500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL D. BENSON			Date of Receipt
	Mailing Address 720 OSTERMAN AVEN	UE		M M / D D / Y Y Y Y Y O O O O O
	City DEERFIELD	State IL	Zip Code 60015	Transaction ID: SA11A1.9676 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00013	500.00
	Name of Employer CENTER FOR WOMEN'S HEALTH	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			2000.00
Ļ	OTAL This Period (last page this line number o	nlv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 12/95	
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b] 11c
			, ,	13 14	15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of solice solicities solicities solicited and solicities are solicited as the solicites are solicited as the solic	iting contributions such committee.
\setminus	NAME OF COMMITTEE (In Full)				
	OB-GYNS FOR WOMEN'S HEALTH PA	AC .			
Α.	Full Name (Last, First, Middle Initial) JOSE A. BERMUDEZ-SEGARRA			Date of Receipt	
	Mailing Address PASEO SAN PABLO 10	00		0 3 2 0	
	City	State	Zip Code	Transaction ID: S	
	BAYAMON	PR	00959	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	С			500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00		
В.	Full Name (Last, First, Middle Initial) JANICE L. BIRD			Date of Receipt	
		2003 MEDICAL PARKWAY			2006
	City	State	Zip Code	Transaction ID: S	
	ANNAPOLIS	MD	21401	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer WOMEN'S OB/GYN	Occupation PHYSICI			
	Receipt For:	-	e Year-to-Date ▼		
	Primary General	-	500.00	1	
	Other (specify)	0 0	000.00		
C.	Full Name (Last, First, Middle Initial) DONALD BISHOP			Date of Receipt	
	Mailing Address 2760 DOGWOOD ROA	.D		M M / D D	
	City	Ctata	7in Codo	02 27	
	City CARBONDALE	State IL	Zip Code 62901	Transaction ID: Sa Amount of Each Re	
	FEC ID number of contributing		1 1 1 1 1	7 Amount of Edon He	
	federal political committee.	C			500.00
	Name of Employer SHAWNEE WOMEN'S HEALTH	Occupation PHYSICI	AN		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00		
s	UBTOTAL of Receipts This Page (optional)				1500.00
H	. 5 (1)				
т	OTAL This Period (last page this line number o	nly)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 13/95
ITEMIZED RECEIPTS			or each category of the	(check only one)	44. 🗆 40
• •			Detailed Summary Page	X 11a 11b 1	11c 12 15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso		
or		ame and add	dress of any political committee to	solicit contributions from si	uch committee.
\rangle	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	AC			
۹.	Full Name (Last, First, Middle Initial) MARIA T. BITAR			Date of Receipt	
	Mailing Address 32 STIRLING TERRACE		7'- 0-1-	02 / 27	2006
	City TOTOWA	State NJ	Zip Code 07512	Transaction ID: SA Amount of Each Rec	
	FEC ID number of contributing		07012	Amount of Lacif Nec	
	federal political committee.	C			350.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	350.00		
 3.	Full Name (Last, First, Middle Initial) MAURICIO Y. BITRAN			Date of Receipt	
	Mailing Address 4302 ALTON ROAD			0 3 0 6	2006
	City	State	Zip Code	Transaction ID: SA	11A1.9559
	MIAMI BEACH	FL	33140	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	С			1000.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼		1000.00		
<u> </u>	Full Name (Last, First, Middle Initial) JEFFREY W. BITTNER			Date of Receipt	
	Mailing Address 1005 PENNSYLVANIA	AVENUE		M M / D D D D D D D D D D D D D D D D D	2006
	City	State	Zip Code	Transaction ID: SA	11A1.9614
	OTTUMWA	IA	52501	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer OTTUMWA OB/GYN	Occupation PHYSICI		7	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
s	UBTOTAL of Receipts This Page (optional)				1600.00
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T	OTAL This Period (last page this line number or	าly)			

PAGE 14/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) RICHARD H. BLUM Date of Receipt Mailing Address 10 AVON ROAD 0.1 25 2006 City State Zip Code Transaction ID: SA11A1.9303 **SPRINGFIELD** 07081 NJ Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. ALLAN T. BOMBARD Date of Receipt Mailing Address 2870 EVERGREEN STREET 03 13 2006 City Zip Code State Transaction ID: SA11A1.9534 SAN DIEGO CA 92106 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SHARP HEALTHCARE Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. BRANDON E. BOURGEOUS Date of Receipt Mailing Address 26 SCHWARTZ DRIVE 03 15 2006 Citv State Zip Code Transaction ID: SA11A1.9615 **OTTUMWA** IΑ 52501 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer OTTUMWA REGIONAL HEALTH Occupation PHYSICIAN CENTER Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/95		
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\setminus	NAME OF COMMITTEE (In Full)					
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH PA	AC				
	Full Name (Lant. First. Middle Latin)					
Α.	Full Name (Last, First, Middle Initial) JAMES T. BREEDEN			Date of Receipt		
	Mailing Address 1200 NORTH MOUNTA	IN STREE	 T	M M / D D / Y Y Y Y		
				02 24 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9483		
	CARSON CITY	NV	89703	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer CARSON MEDICAL GROUP	Occupation				
		PHYSICI				
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1		
	Other (specify) ▼		1000.00			
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_	Full Name (Last, First, Middle Initial)					
В.	-			Date of Receipt		
	Mailing Address 5601 WEST EUGIE AVENUE			03 02 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9554		
	GLENDALE	AZ	85304	Amount of Each Receipt this Period		
	FEC ID number of contributing	С	1 1 1 1 1	1000.00		
	federal political committee.					
	Name of Employer DESERT WEST OB/GYN	Occupation	n			
		PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify)		1000.00			
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_	Full Name (Last, First, Middle Initial)					
C.	CATHERINE P. BROWNE			Date of Receipt		
	Mailing Address 1401 SOUTH 5TH STR	EET		02 17 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9507		
	TACOMA	WA	98405	Amount of Each Receipt this Period		
	FEC ID number of contributing			1800.00		
	federal political committee.	C		1800.00		
	Name of Employer U.S. ARMY	Occupation	n			
	U.S. ARMY	PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
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	Other (specify) ▼	0 0		1		
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/9	5	
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\setminus	NAME OF COMMITTEE (In Full)				
\rangle	OB-GYNS FOR WOMEN'S HEALTH P	AC			
Α.	Full Name (Last, First, Middle Initial) STEVE P. BUCHANAN			Date of Receipt	
	Mailing Address 1400 WALLIS ROAD			03 / 13 / 2000	
	City	State	Zip Code	Transaction ID: SA11A1.9536	
	ALEDO	TX	76008	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.0	00
	Name of Employer UNIVERSITY OF NORTH TEXAS	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	'''	500.00		
	Other (specify) ▼	0 0			
В.	Full Name (Last, First, Middle Initial) MARY C. BURKE			Date of Receipt	
	Mailing Address 1949 LAKESHORE DR	IVE		01 25 2000	
	City	State	Zip Code	Transaction ID: SA11A1.9304	
	KLAMATH FALLS	OR	97601	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		1000.0	00
	Name of Employer WOMEN CARE	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	1	1000.00		
	Other (specify) ▼	0 0			
C.	Full Name (Last, First, Middle Initial) RONALD T. BURKMAN			Date of Receipt	
	Mailing Address 284 ARDSLEY ROAD			M M / D D / Y Y Y	
	-			02 03 2000	6
	City	State	Zip Code	Transaction ID: SA11A1.9425	
	LONGMEADOW	MA	01106	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.0	00
	Name of Employer BAYSTATE MEDICAL CENTER	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		500.00		
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SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 17/95		
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	NAME OF COMMITTEE (In Full)					
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH F	PAC				
Α.	Full Name (Last, First, Middle Initial) DAVID M. BURKONS			Date of Receipt		
	Mailing Address 1611 SOUTH GREEN	ROAD		01 06 7 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9267		
	CLEVELAND	OH	44121	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI				
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Other (specify) ▼	0 0	500.00			
— В	Full Name (Last, First, Middle Initial) LONNIE S. BURNETT			Date of Receipt		
υ.	Mailing Address 78 CONCORD PARK \	WEST		M M / D D / Y Y Y Y		
	011	01-1-	7'- 0-1-	02 10 2006		
	City NASHVILLE	State TN	Zip Code	Transaction ID: SA11A1.9408		
		IIN	37205	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer VANDERBILT UNIVERSITY	Occupation PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		1000.00			
	Full Name (Last, First, Middle Initial) MAURICE J. BUTLER			Date of Receipt		
J .	Mailing Address 4809 19TH STREET			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O		
	City	State	Zip Code	Transaction ID: SA11A1.9364		
	LUBBOCK	TX	79407	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		250.00		
	Name of Employer RETIRED	Occupation PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00	1		
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				1750.00		
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 95				
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NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH F	AC.						
Full Name (Last, First, Middle Initial) CYNTHIA S. CANNON Mailing Address 832 NORTHCLIFFE DI City SALT LAKE CITY FEC ID number of contributing federal political committee.	State UT	Zip Code 84103	Date of Receipt M M				
Name of Employer SELF-EMPLOYED Receipt For: Primary General Other (specify) ▼	Occupation PHYSICI Aggregate						
Full Name (Last, First, Middle Initial) DIVYA B. CANTOR Mailing Address 309 PEPPERBUSH RC	DAD		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City LOUISVILLE	State KY	Zip Code 40207	Transaction ID: SA11A1.9477 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40207	250.00				
Name of Employer SELF-EMPLOYED Receipt For: Primary General	Occupation PHYSICI Aggregate						
Other (specify)	0 0	250.00					
Full Name (Last, First, Middle Initial) ILONA M. CARLOS Mailing Address 125 SOUTH JEFFERS	ON STREE	Т	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City CHICAGO	State II	Zip Code 60661	Transaction ID: SA11A1.9306 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		1000.00				
Name of Employer LAKEVIEW WOMEN'S HEALTH Receipt For:	Occupation PHYSICI Aggregate						
Primary General Other (specify) ▼		1000.00					
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PAGE 19/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) Date of Receipt ROBERT M. CATES Mailing Address 94 TWIN LAKE ROAD 03 2006 09 City State Zip Code Transaction ID: SA11A1.9584 **ROME** GA 30165 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer RETIRED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. SAMUEL R. CHACON Date of Receipt Mailing Address 1200 NORTH MOUNTAIN STREET 03 16 2006 City Zip Code Transaction ID: SA11A1.9625 State **CARSON CITY** NV 89703 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer CARSON MEDICAL GROUP Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. DONALD C. CHAMBERS Date of Receipt Mailing Address 16 BRICKFORD LANE 02 0 1 2006 Zip Code Citv State Transaction ID: SA11A1.9432 **PIKESVILLE** MD 21208 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer RETIRED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 20 / 95	
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$\overline{}$	NAME OF COMMITTEE (In Full)				7
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	AC			
۹.	Full Name (Last, First, Middle Initial) BEN H. CHEEK			Date of Receipt	_
	Mailing Address 2000 HAMILTON ROAD			03 / 15 / 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9617	
	COLUMBUS	GA	31904	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	1	500.00		
	Other (specify) 🔻	0 0	000.00		
3.	Full Name (Last, First, Middle Initial) PETER H. CHEROUNY			Date of Receipt	
	Mailing Address 43 PHEASANT WAY			02 22 22 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9499	
	SOUTH BURLINGTON	VT	05403	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer UNIVERSITY OF VERMONT	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary ☐ General Other (specify) ▼		1000.00		
	Full Name (Last, First, Middle Initial) JOSE S. CISNEROS			Date of Receipt	_
-•	Mailing Address 1001 CALLE MILAGRO	S		M M / D D / Y Y Y Y	
				01 25 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9307	
	BROWNSVILLE	TX	78526	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer BROWNSVILLE CENTER OF 0B/- GYN	Occupation PHYSICI			
<u>gin</u>		Aggregate	e Year-to-Date ▼		
			250.00		
	Other (specify)	0 0	250.00		
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PAGE 21/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 **1** 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) GABRIEL M. COHN Date of Receipt Mailing Address 6 PINE GROVE CIRCLE 03 2006 16 City Zip Code State Transaction ID: SA11A1.9627 **EAST LONGMEADOW** MA 01028 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer BAYSTATE MEDICAL CENTER Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. TERRY L. COLE Date of Receipt Mailing Address 168 NORTH BRENT STREET 25 2006 City State Zip Code Transaction ID: SA11A1.9308 **VENTURA** CA 93003 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. MICHAEL K. CONLEY Date of Receipt Mailing Address 1414 WEST FAIR AVENUE 0.1 25 2006 Citv State Zip Code Transaction ID: SA11A1.9309 **MARQUETTE** MI 49855 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/95
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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	/C		
Α.	Full Name (Last, First, Middle Initial) ALICIA M. CONSTANTINO			Date of Receipt
	Mailing Address 315 EAST 1ST STREET	_		02 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.9450
	TUCSON	AZ	85705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer MARINA HEALTH CENTER	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	1000.00	
	Other (specify) 🔻	0 0	1000.00	
В.	Full Name (Last, First, Middle Initial) GREGORY C. COOK			Date of Receipt
	Mailing Address 736 GREENFIELD ABB	03 16 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9629
	MARTINEZ	GA	30907	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer AUGUSTA GYN, INC.	Occupation PHYSICIA		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) JOSE CORTES			Date of Receipt
	Mailing Address 2559 NORTH SCENIC I	DRIVE		0 2 D D D D D D D D D D D D D D D D D D
	City	State	Zip Code	Transaction ID: SA11A1.9484
	ALAMOGORDO	NM	88310	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer WOMEN'S HEALTH CENTER	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼		250.00	
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				1500.00
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SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 23 / 95
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or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	AC .		
Α.	Full Name (Last, First, Middle Initial) LYNNE M. COSLETT-CHARLTON			Date of Receipt
	Mailing Address 271 HARRIS HILL ROA	.D		03 01 2006
	City	State	Zip Code	Transaction ID: SA11A1.9547
	SHAVERTOWN	PA	18708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer OB ASSOCIATES	Occupation PHYSICI.		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) RAYMOND L. COX			Date of Receipt
	Mailing Address 2111 PARKSIDE DRIVE	02 17 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9508
	MITCHELLVILLE	MD	20721	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer PRINCE GEORGES HOSPITAL CENTER	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) VINCENT A. CULOTTA			Date of Receipt
	Mailing Address 6301 BERTHA DRIVE			03 22 2006
	City	State	Zip Code	Transaction ID: SA11A1.9595
	NEW ORLEANS	LA	70122	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer EAST JEFFERSON HOSPITAL	Occupation PHYSICI.		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
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or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	OB-GYNS FOR WOMEN'S HEALTH PA	40		
Α.	Full Name (Last, First, Middle Initial) LUIS B. CURET			Date of Receipt
	Mailing Address P.O. BOX 50519	03 13 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9537
	ALBUQUERQUE	NM	87181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer UNIVERSITY OF NEW MEXICO	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) DIANA CURRAN			Date of Receipt
	Mailing Address 2325 SOUTH 88TH STF	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: SA11A1.9630
	OMAHA	NE	68124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIVERSITY OF NEBRASKA	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) ANNA M. D'AMICO			Date of Receipt
	Mailing Address 7 BUCKRIDGE DRIVE	03 15 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9618
	WILMINGTON	DE	19807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer CROZER KEYSTONE	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼		300.00	1
s	UBTOTAL of Receipts This Page (optional)			1250.00

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PAGE 25/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) MONA DAVANESAN Date of Receipt Mailing Address 2151 45TH STREET 02 17 2006 City State Zip Code Transaction ID: SA11A1.9509 WEST PALM BEACH 33407 FI Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. LAURA J. DAVID Date of Receipt Mailing Address 5323 MEADOW WOOD BOULEVARD 03 8 0 2006 City State Zip Code Transaction ID: SA11A1.9578 **LYNDHURST** OH 44124 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIVERSITY HOSPITALS Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. LEON D. DAVIS Date of Receipt Mailing Address 128 DOCKSIDE DRIVE 0.1 25 2006 Citv State Zip Code Transaction ID: SA11A1.9310 **JACKSONVILLE** NC 28546 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer WOMEN'S HEALTHCARE ASSOCI-Occupation PHYSICIAN **ATES** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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	OB CHICA ON WOMEN ONE MENTINA	.0		
	Full Name (Last, First, Middle Initial)			
A.	LAURA A. DEAN			Date of Receipt
	Mailing Address 14 HIGHWAY 96 EAST			M M / D D / Y Y Y Y
				03 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.9573
	DELLWOOD	MN	55110	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Familian	10		_
	Name of Employer STILLWATER MEDICAL GROUP	Occupation		
	Descript Form	PHYSICI		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	250.00	
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_	Full Name (Last, First, Middle Initial)			+
В.	ROBERT H. DEBBS			Date of Receipt
	Mailing Address 2 SASSAFRAS COURT	M M / D D / Y Y Y Y		
	2 3/100/11/10 000/11	03 13 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9549
	VOORHEES	NJ	08043	Amount of Each Receipt this Period
	FEC ID number of contributing			1000.00
	federal political committee.	C		1000.00
	Name of Familian	10	_	_
	Name of Employer UNIVERSITY OF PENNSYLVANIA	Occupation PHYSICI		
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C.	CHARLES H. DEBROVNER			Date of Receipt
	Mailing Address 338 EAST 30TH STREE	ĒΤ		M M / D D / Y Y Y Y
				02 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.9391
	NEW YORK	NY	10016	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer	Occupation	<u> </u>	┥
	Name of Employer SELF-EMPLOYED	PHYSICI		
	Receipt For:	1	Year-to-Date ▼	7
	Primary General	-50		1
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	: PAGE 27/95			
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or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from	n such committee.		
$ \rangle$	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	С					
\angle	OB GING FOR WOMEN OF TEXE						
Δ	Full Name (Last, First, Middle Initial) ROBERTO M. DECASTRO			Date of Receipt			
Λ.	Mailing Address 2222 NORTHWEST LOV	/EJOY ST	REET	⊣) / Y 'Y 'Y 'Y		
				03 1			
	City PORTLAND	State OR	Zip Code 97210	Transaction ID: S			
	FEC ID number of contributing		97210	Amount of Each F			
	federal political committee.	C			250.00		
	Name of Employer NORTHWEST WOMEN'S CLINIC	Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼	1	250.00				
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В.	Full Name (Last, First, Middle Initial) MARK S. DEFRANCESCO			Date of Receipt			
	Mailing Address 35 TERRELL FARM ROA	AD		03 1			
	City	•		Transaction ID: 5	SA11A1.9632		
	CHESHIRE	CT	06410	Amount of Each F	Receipt this Period		
	FEC ID number of contributing federal political committee.	С			250.00		
	Name of Employer PHYSICIANS FOR WOMEN'S HE- ALTH	Occupation PHYSICI					
	Receipt For:		Year-to-Date ▼				
	Primary General		250.00				
	Other (specify) ▼						
<u>С.</u>	Full Name (Last, First, Middle Initial) JAMES E. DELMORE			Date of Receipt			
Ο.	Mailing Address 851 NORTH HILLSIDE			M M / D I) / Y Y Y Y		
				03 0	7 2006		
	City WICHITA	State KS	Zip Code 67214	Transaction ID: S			
	FEC ID number of contributing		0/214	Amount of Each F	Receipt this Period		
	federal political committee.	C			500.00		
	Name of Employer ASSOCIATES IN WOMEN'S HEA- LTH	Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		500.00				
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\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH P.	AC		
\angle	- H			1
Α.	Full Name (Last, First, Middle Initial) GREGORY W. DEMEO			Date of Receipt
	Mailing Address 1020 KENT ROAD			M M / D D / Y Y Y Y
				03 13 2006
	City	State	Zip Code	Transaction ID: SA11A1.9538
	WILMINGTON	DE	19807	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer FIRST STATE WOMEN'S CARE	Occupation		
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	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)	' '	250.00	
	care (epos.ij) \	0 0		-
_	Full Name (Last, First, Middle Initial)			
В.	T. CLIFFORD DEVENY			Date of Receipt
	Mailing Address 525 EAST MARKET ST	REET		0 1 2 5 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.9311
	AKRON	ОН	44304	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer	Occupation	2	_
	Name of Employer SUMMA HEALTH SYSTEM	PHYSICI		
	Receipt For:		e Year-to-Date ▼	
	Primary General	-	250.00	7
	Other (specify) ▼		250.00	
_	Full Name (Last First Middle Initial)			
C.	Full Name (Last, First, Middle Initial) PAUL M. DICKER			Date of Receipt
	Mailing Address 549 ALOSIO DRIVE			M M / D D / Y Y Y
	0.1	01-1-	7'- 0-4-	02 22 2006
	City RIVER VALE	State NJ	Zip Code 07675	Transaction ID: SA11A1.9500 Amount of Each Receipt this Period
			07073	
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	l Ossunstia		
Name of Employer SELF-EMPLOYED		Occupation PHYSICI		
			Year-to-Date ▼	
Primary General				7
	Other (specify) ▼		500.00	1
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\setminus	NAME OF COMMITTEE (In Full)			
	OB-GYNS FOR WOMEN'S HEALTH PA	AC .		
A.	Full Name (Last, First, Middle Initial) VIVIAN M. DICKERSON			Date of Receipt
	Mailing Address 6150 EAST WEST VIEV			02 27 2006
	City	State	Zip Code	Transaction ID: SA11A1.9479
	ORANGE	CA	92869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIVERSITY OF CALIFORNIA - IRVINE	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	500.00	
	Other (specify)	1 1	300.00	
В.	Full Name (Last, First, Middle Initial) JANE ANN S. DIMER			Date of Receipt
	Mailing Address 4631 90TH AVENUE SE	03 16 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9633
	MERCER ISLAND	WA	98040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer GROUP HEALTH PERMANENTE	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	250.00	
	Other (specify)		230.00	
<u> </u>	Full Name (Last, First, Middle Initial) SCOTT A. DINESEN			Date of Receipt
	Mailing Address 3335 BYRON DRIVE			0 1 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.9366
	DOYLESTOWN	PA	18901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer DINESEN & ASSOCIATES	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)			1750.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 95		
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\rangle	OB-GYNS FOR WOMEN'S HEALTH P	AC			
A.	Full Name (Last, First, Middle Initial) PATRICIA M. DIX			Date of Receipt	
	Mailing Address 100 EAST PRIMROSE			03 08 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9580	
	SPRINGFIELD	MO	65807	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		500.00		
	Other (specify) ▼		300.00		
В.	Full Name (Last, First, Middle Initial) CHRISTOPHER C. DOTSON			Date of Receipt	
	Mailing Address 10150 NATIONAL BOU	JLEVARD		01 25 7 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9312	
	LOS ANGELES	CA	90034	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer YOULOM MEDICAL CORPORATION	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
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C.	Full Name (Last, First, Middle Initial) JOSIAH O. EKUNNO			Date of Receipt	
	Mailing Address 11125 DUNN ROAD			0 1 2 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.9313	
	ST. LOUIS	MO	63136	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
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PAGE 31/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) ROBERT F. ELDER Date of Receipt Mailing Address 1928 ALCOA HIGHWAY 02 2006 07 City State Zip Code Transaction ID: SA11A1.9451 **KNOXVILLE** ΤN 37920 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UNIVERSITY OF TENNESSEE Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** DENISE M. ELSER Date of Receipt Mailing Address 8522 JOHNSTON ROAD 03 8 0 2006 City State Zip Code Transaction ID: SA11A1.9581 **BURR RIDGE** IL 60527 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer ILLINOIS UROGYNECOLOGY Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. LISA ENG Date of Receipt Mailing Address 8 78TH STREET 0.1 25 2006 Zip Code Citv State Transaction ID: SA11A1.9314 **BROOKLYN** NY 11209 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)

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Mailing Addit	213 WOOLAWAHAN ST	NEET		0 2 1 7	2006					
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<u>ROANOKE</u>		VA	24014	Amount of Each Rec						
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federal politic		C			300.00					
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	ess 9 CARRIAGE HILL RO	AD		M M / D D	/ Y Y Y Y					
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federal politic	al committee.	<u> </u>								
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	ast, First, Middle Initial)			B (5 .) .						
C. NATHAN G. F				Date of Receipt						
Mailing Addre	ess 1329 LUSITANA STRE	EI		02 / 17	2006					
City		State	Zip Code	Transaction ID: SA	11A1.9512					
<u>HONOLUL</u>	U	HI	96813	Amount of Each Rec	eipt this Period					
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PAGE 33 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) LYNDON B. GAINES Date of Receipt Mailing Address 90 JACKSON PIKE 02 22 2006 City State Zip Code Transaction ID: SA11A1.9496 **GALLIPOLIS** OH 45631 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer HOLZER CLINIC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. DEBRAS. GANTER Date of Receipt Mailing Address 3555 LUTHERN PARKWAY 0.1 25 2006 City Zip Code State Transaction ID: SA11A1.9316 WHEAT RIDGE CO 80033 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ASSOCIATES IN WOMEN'S HEA-Occupation **PHYSICIAN** <u>LTH</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOHN S. GARRA Date of Receipt Mailing Address 234 JEFFERSON AVENUE 03 07 2006 Zip Code Citv State Transaction ID: SA11A1.9460 **HADDONFIELD** NJ 08033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer OUR LADY OF LOURDES CENTER Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional)

PAGE 34/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) MARIA L. GASCA-HOLTZ Date of Receipt Mailing Address 2091 CHICO LANE 02 02 2006 City State Zip Code Transaction ID: SA11A1.9288 **YUMA** 85365 ΑZ Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer HEALTH CONNECTIONS Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. JOHN M. GIBBONS, JR. Date of Receipt Mailing Address 1000 ASYLUM AVENUE 03 16 2006 City State Zip Code Transaction ID: SA11A1.9636 **HARTFORD** CT 06105 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. JANICE A. GIVIER Date of Receipt Mailing Address 2106 HILDA AVENUE 03 16 2006 Citv State Zip Code Transaction ID: SA11A1.9637 **MISSOULA** MT 59801 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer WESTERN MISSOULA CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

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	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH F	AC		
Α.	Full Name (Last, First, Middle Initial) LARRY R. GLAZERMAN Mailing Address 6900 HAMILTON BOU	I EVARD		Date of Receipt
	City	State	Zip Code	0 3 0 6 2 0 0 6 Transaction ID: SA11A1.9561
	TREXLERTOWN	PA	18087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SELF-EMPLOYED	Occupatio PHYSICI		
	Receipt For:		e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) PAUL A. GLUCK			Date of Receipt
	Mailing Address 8950 NORTH KENDALL DRIVE			02 03 2006
	City	State	Zip Code	Transaction ID: SA11A1.9426
	MIAMI	FL	33176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer VITAL MD	Occupatio PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) GORDON M. GOLDMAN			Date of Receipt
	Mailing Address 312 FALLING LEAVES	COURT		0 2 2 7 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.9480
	ST. LOUIS	MO	63141	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SELF-EMPLOYED	Occupatio PHYSICI		
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	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional))	1000.00
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COUEDING A (FEC Forms OV)				FOR LINE NUMBER: PAGE 36 / 95
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
۸r	ay information copied from such Paperts and Sta	tomonte may	y not be cold or used by any perce	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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)				
OB-GYNS FOR WOMEN'S HEALTH PAC				
Α.	Full Name (Last, First, Middle Initial) ALAN D. GOLDSMITH			Date of Receipt
	Mailing Address 2300 HAGGERTY ROAD			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: SA11A1.9502
	WEST BLOOMFIELD	MI	48323	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer WALNUT LAKE OB/GYN	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		500,00	1
	Other (specify)		500.00	
В.	Full Name (Last, First, Middle Initial) LAURIE R. GOLDSTEIN			Date of Receipt
	Mailing Address 134 EAST 93RD STREET			M M / D D / Y Y Y Y
	20			01 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.9317
	NEW YORK	NY	10128	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1000.00
	federal political committee.			
	Name of Employer EAST SIDE WOMEN'S OB/GYN	Occupation		7
		PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00]
	Other (specify)			J.
	Full Name (Last, First, Middle Initial)			+
C.	ANDREW E. GOOD			Date of Receipt
	Mailing Address 933 PAXTON ROAD, SW			M M / D D / Y Y Y Y
	Cit.	04-4-	7:- Oada	02 17 2006
	City	State	Zip Code	Transaction ID: SA11A1.9392
	ROCHESTER	MN	55902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer MAYO CLINIC	Occupation	1	7
	MAYO GLINIG	PHYSICI	AN	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General	050.00		1
	Other (specify)		250.00	1
_				
s	UBTOTAL of Receipts This Page (optional)			1750.00
\vdash	<u> </u>		'	-

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 37 / 95		
	ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12	
			Detailed Summary Page	13 14 15 16 1	7
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
7	NAME OF COMMITTEE (In Full)		-		
	OB-GYNS FOR WOMEN'S HEALTH P.	AC		_	
A.	Full Name (Last, First, Middle Initial) SANDRA D. GOTTWALD			Date of Receipt	
	Mailing Address 380 EAST DAPHNE RC)AD		02 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.9503	
	MILWAUKEE	WI	53217	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		500.00	
	Name of Employer ADVANCED HEALTHCARE	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	500.00		
В.	Full Name (Last, First, Middle Initial) THEODORE V. HAAS			Date of Receipt	
	Mailing Address 1005 PENNSYLVANIA	AVENUE		03 / 20 / Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.9681	
	OTTUMWA	IA	52501	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer OTTUMWA OB/GYN P.C.	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	250.00		
<u> </u>	Full Name (Last, First, Middle Initial) VIRGINIA M. HACKENBERG			Date of Receipt	_
	Mailing Address 39862 MEADOWLARK	DRIVE		M M / D D / Y Y Y Y Y O D D D D D D D D D D D D D D	
	City	State	Zip Code	Transaction ID: SA11A1.9513	
	PAEONIAN SPRINGS	VA	20129	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer LOUDOUN MEDICAL GROUP	Occupation PHYSICI			
			e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
s	UBTOTAL of Receipts This Page (optional)			1000.00	
T	OTAL This Period (last page this line number o	nly)			

TOTAL This Period (last page this line number only)

PAGE 38/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) CHARLES B. HAMMOND Date of Receipt Mailing Address P.O. BOX 3853 02 2006 24 City State Zip Code Transaction ID: SA11A1.9485 **DURHAM** NC 27710 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer DUKE UNIVERSITY Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** THOMAS F. HARMAN Date of Receipt Mailing Address 1000 J.D. ANDERSON DRIVE 0.1 25 2006 City State Zip Code Transaction ID: SA11A1.9319 **MORGANTOWN** WV 26505 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. CLAIRE E. HARRAGHY Date of Receipt Mailing Address 137 21ST AVENUE 0.1 25 2006 Citv State Zip Code Transaction ID: SA11A1.9320 **HICKORY** NC 28601 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer THE WOMEN'S CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 39 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) BEVERLY M. HARRIS Date of Receipt Mailing Address 2251 STANTONSBURG ROAD 2006 25 City Zip Code State Transaction ID: SA11A1.9321 **GREENVILLE** NC 27834 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer GREENVILLE WOMEN'S CLINIC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. SUSAN M. HARVEY Date of Receipt Mailing Address 8912 46TH AVENUE NORTHEAST 03 16 2006 City Zip Code State Transaction ID: SA11A1.9639 **SEATTLE** WA 98115 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. RUTH E. HASKINS Date of Receipt Mailing Address 3444 SMOKEY MOUNTAIN CIRCLE 03 22 2006 Citv State Zip Code Transaction ID: SA11A1.9596 **EL DORADO HILLS** CA 95762 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIVERSITY OF CALIFORNIA Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 40 / 95		
ITEMIZED RECEIPTS		or each category of the	(check only one)		
TI EMIZED TREOLIT TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and addi	not be sold or used by any pers	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)					
OB-GYNS FOR WOMEN'S HEALTH	PAC				
Full Name (Last, First, Middle Initial) THOMAS L. HATCHETT, JR.			Date of Receipt		
Mailing Address P.O. BOX 638			02 28 2006		
City	State	Zip Code	Transaction ID: SA11A1.9469		
DEMOREST	GA	30535	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer HABERSHAM OB/GYN	Occupation PHYSICIA	AN			
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼		250.00			
Full Name (Last, First, Middle Initial) B. SARA M. HAVERTY			Date of Receipt		
Mailing Address 1605 OLD MILL LANE			03 / 09 / 2006		
City	State	Zip Code	Transaction ID: SA11A1.9585		
SALISBURY	MD	21801	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer ATLANTIC GENERAL HOSPITAL	Occupation PHYSICIA				
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼		500.00			
Full Name (Last, First, Middle Initial) C. RICHARD W. HENDERSON			Date of Receipt		
Mailing Address 1709 CLEAVER LANE			02 02 2006		
City	State	Zip Code	Transaction ID: SA11A1.9290		
WILMINGTON	DE	19803	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer ST. FRANCIS HOSPITAL	Occupation PHYSICIA				
Receipt For:	Aggregate	Year-to-Date ▼			
Primary General Other (specify) ▼		250.00			
SUBTOTAL of Receipts This Page (optional) .	1		1000.00		

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 / 95
ΙT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar	ny information copied from such Reports and State	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	solicit contributions from such committee.		
\rangle	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	vC		
۹.	Full Name (Last, First, Middle Initial) RICHARD W. HENDERSON			Date of Receipt
	Mailing Address 1709 CLEAVER LANE			03 / 06 / 2006
	City WILMINGTON	State DE	Zip Code 19803	Transaction ID: SA11A1.9563
			19803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ST. FRANCIS HOSPITAL	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
 3.	Full Name (Last, First, Middle Initial) RICHARD W. HENDERSON			Date of Receipt
	Mailing Address 1709 CLEAVER LANE			03 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.9605
	WILMINGTON	DE	19803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ST. FRANCIS HOSPITAL	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1250.00	
).	Full Name (Last, First, Middle Initial) SUSAN L. HENDRIX			Date of Receipt
	Mailing Address 544 GRATEN STREET			03 / 22 / 2006
	City	State	Zip Code	Transaction ID: SA11A1.9597
	BIRMINGHAM	ID	48009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer HUTZEL WOMEN'S HOSPITAL	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
_ s	UBTOTAL of Receipts This Page (optional)			1250.00
	. 5 ,			
Т	OTAL This Period (last page this line number or	ıly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 42/95	_		
TEMIZED RECEIPTS			or each category of the	(check only one)			
			Detailed Summary Page	X 11a	7		
Any information copied for for commercial purpo	from such Reports and Statem ses, other than using the name	nents may le and addi	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMIT	TEE (In Full)				\exists		
OB-GYNS FOR V	WOMEN'S HEALTH PAC			_			
Full Name (Last, First CARMELO A. HERNA				Date of Receipt			
Mailing Address 1	MEDICAL PARK AVENU	ΙE		0 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City		State	Zip Code	Transaction ID: SA11A1.9453			
BREVARD		NC	28712	Amount of Each Receipt this Period			
FEC ID number of co federal political comm		С		300.00			
Name of Employer SYLVAN VALLEY C	OB/GYN P	Occupation PHSICIAN					
Receipt For:		Aggregate	Year-to-Date ▼				
Primary Other (specify)	General ▼		300.00				
Full Name (Last, Firs				Date of Receipt	_		
Mailing Address 1001 NOBLE STREET				02 17 2006			
City		State	Zip Code	Transaction ID: SA11A1.9514			
FAIRBANKS	and the street	AK	99701	Amount of Each Receipt this Period	1		
FEC ID number of co		C		300.00			
Name of Employer TANANA VALLEY C	CLINIC O	Occupation PHYSICIA	AN				
Receipt For:		Aggregate	Year-to-Date ▼				
Primary Other (specify)	General	-	300.00				
(\$p\$50.13)		0 0	0 0 0 0 0 0 0				
Full Name (Last, First JOEL E. HIGGINS	st, Middle Initial)			Date of Receipt	_		
Mailing Address 12	208 ALICE STREET			0 1 2 5 2 0 0 6			
City		State	Zip Code	Transaction ID: SA11A1.9322			
WAYCROSS		GA	31501	Amount of Each Receipt this Period	1		
FEC ID number of confederal political comm		C		250.00			
Name of Employer SELF-EMPLOYED		Occupation PHYSICIA					
Receipt For:		Aggregate	Year-to-Date ▼				
Primary Other (specify)	General ▼	0 0	250.00				
SUBTOTAL of Receipt	UBTOTAL of Receipts This Page (optional)						
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TOTAL This Period (la	st page this line number only)		>		II.		

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 43/95
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PAR	0		
Α.	Full Name (Last, First, Middle Initial) JOEL E. HIGGINS			Date of Receipt
	Mailing Address 1208 ALICE STREET			0 2 1 4 2 0 0 6
	City	State	Zip Code	Transaction ID: SA11A1.9400
	WAYCROSS FEC ID number of contributing federal political committee.	GA C	31501	Amount of Each Receipt this Period 250.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) KATHERINE L. HILSINGER	_		Date of Receipt
	Mailing Address 2580 DAGGETT AVENU	E		01 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.9323
	KLAMATH FALLS	OR	97601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer WOMEN CARE	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
С.	Full Name (Last, First, Middle Initial) LISA M. HOLLIER			Date of Receipt
	Mailing Address 5656 KELLEY STREET			01 30 2006
	City HOUSTON	State TX	Zip Code 77026	Transaction ID: SA11A1.9368
	FEC ID number of contributing federal political committee.	C	11020	Amount of Each Receipt this Period 1000.00
	Name of Employer UNIVERSITY OF TEXAS	Occupation PHYSICI		
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)			2250.00
Ļ	OTAL This Period (last page this line number on	v)		

9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 44 / 95	
	· · · · · · · · · · · · · · · · · · ·	Use separate schedule(s)		(check only one)	
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12	
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Ar	ny information copied from such Reports and S	tatements may	not be sold or used by any person	on for the purpose of soliciting contributions	
or	for commercial purposes, other than using the	solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)				
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH F	PAC			
Α.	Full Name (Last, First, Middle Initial) JOHN D. HOLMES			Date of Receipt	
	Mailing Address 1450 SOUTH DOBSOI	N ROAD		03 06 YYYYY 03 06 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9564	
	MESA	ΑZ	85202	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		7	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		500.00	7	
	Other (specify)	0 0	300.00		
	Full Name (Last, First, Middle Initial) SHELLY W. HOLMSTROM			Date of Receipt	
ъ.	Mailing Address 14705 CROYDON PLA	\CE		M M / D D / Y Y Y Y	
	Maining Address 14703 CHOT DON FLA	10L		03 22 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9599	
	TAMPA	FL	33618	Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	С		250.00	
	Name of Employer	Occupation	n	\dashv	
	Name of Employer UNIVERSITY OF SOUTH FLORI- DA	PHYSICI			
	Receipt For:		e Year-to-Date ▼		
	Primary General	00 0		7	
	Other (specify)		250.00		
_	Full Name (Last, First, Middle Initial)				
Ċ.	ANN L. HONEBRINK Mailing Address 130 VALLEY ROAD			Date of Receipt	
	Mailing Address 130 VALLEY ROAD			03 16 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9643	
	ARDMORE	PA	19003	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer UNIVERSITY OF PENNSYLVANIA	Occupation PHYSICI		7	
	Receipt For:		e Year-to-Date ▼	7	
	Primary General			7	
	Other (specify) ▼		500.00		
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s	UBTOTAL of Receipts This Page (optional)			1250.00	
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 45/95	
	ITEMIZED RECEIPTS		or each category of the	(check only one)	1
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۸۰	y information copied from such Reports and St	estamenta mai	, not be cold or used by any norse		
or	for commercial purposes, other than using the	solicit contributions from s	such committee.		
\setminus	NAME OF COMMITTEE (In Full)				
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH P	PAC			
<u></u>	Full Name (Last, First, Middle Initial)				
A.	WILLIAM J. HOSKINS			Date of Receipt	
	Mailing Address 158 GRAY'S CREEK D	RIVE		M M / D D D O O O O O O O O O O O O O O O O	
	City	State	Zip Code		2006
	SAVANNAH	GA	31410	Transaction ID: SA Amount of Each Rec	
			31410	Afficult of Each Net	eipt triis Feriod
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer MEMORIAL HEALTH CENTER	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		250.00	1	
	Other (specify)	0 0	230.00		
_	Full Name (Last, First, Middle Initial)				
В.	DAVID J. HUNTER			Date of Receipt	
	Mailing Address 7 GETNER TRAIL			0 1 1 0	2006
	City	State	Zip Code	Transaction ID: SA	
	NORWALK	CT	06854	Amount of Each Red	
	FEC ID number of contributing				500.00
	federal political committee.	C			300.00
	Name of Employer	Occupation	 n	=	
	Name of Employer NORWALK HOSPITAL	PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	' '	500.00	1	
	Other (specify) ▼		300.00		
<u></u>	Full Name (Last, First, Middle Initial) JAY D. IAMS			Date of Receipt	
	Mailing Address 1654 UPHAM DRIVE			M M / D D	/ Y Y Y Y
				01 09	2006
	City	State	Zip Code	Transaction ID: SA	
	COLUMBUS	OH	43210	Amount of Each Red	eipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer OHIO STATE UNIVERSITY	Occupation PHYSICI			
Receipt For: Ag		Aggregate	e Year-to-Date ▼		
Primary General			500.00	1	
	Other (specify) ▼				
Г					
s	UBTOTAL of Receipts This Page (optional)		1250.00		
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T	OTAL This Period (last page this line number of	only)	>		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 95			
ıт	EMIZED RECEIPTS		or each category of the	(check only one)			
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				13 14 15 16 17			
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
\setminus	NAME OF COMMITTEE (In Full)						
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	vC					
Α.	Full Name (Last, First, Middle Initial) HEATHER M. IRVIN			Date of Receipt			
	Mailing Address 600 18TH STREET			02 07 2006			
	City	State	Zip Code	Transaction ID: SA11A1.9454			
	PARKERSBURG	WV	26101	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer HCA HEALTHCARE	Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		500.00				
	Other (specify)		300.00				
В.	Full Name (Last, First, Middle Initial) SUDHEER M. JAYAPRABHU			Date of Receipt			
	Mailing Address 2805 LANDAN LANE	0 2 0 7 2 0 0 6					
	City	Transaction ID: SA11A1.9418					
	TEXARKANA	TX	75503	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
	Name of Employer WOMEN'S SPECIALIST	Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General			1			
	Other (specify)		1000.00				
<u> </u>	Full Name (Last, First, Middle Initial) MARK KALCHBRENNER			Date of Receipt			
	Mailing Address 3702 FAIRWAY PLACE			M M / D D / Y Y Y Y Y O O O O			
	City	State	Zip Code	Transaction ID: SA11A1.9324			
	ROCKFORD	IL	61107	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer HIGH RISK OB	Occupation PHYSICI					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00				
s	UBTOTAL of Receipts This Page (optional)			1750.00			
<u> </u>							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 47/95
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar or	ly information copied from such Reports and Star for commercial purposes, other than using the na	tements may ame and add	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.
	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	AC .		
Α.	Full Name (Last, First, Middle Initial) HAROLD A. KAMINETZKY			Date of Receipt
	Mailing Address 26 YARMOUTH COURT	-		03 16 2006
	City SCOTCH PLAINS	State NJ	Zip Code 07076	Transaction ID: SA11A1.9644 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07070	1000.00
	Name of Employer RETIRED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) DANIEL J. KAMINSKY	OTDEET		Date of Receipt
	Mailing Address 817 SOUTH PALOUSE			01 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.9325
	WALLA WALLA	WA	99362	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer WALLA WALLA CLINIC	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) GARY L. KAYE			Date of Receipt
	Mailing Address 31 SOUTH UNION AVE	NUE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CRANFORD	State NJ	Zip Code 07016	Transaction ID: SA11A1.9277 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07010	500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1750.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 48 / 95
ıт	EMIZED RECEIPTS	or each category of the		(check only one)
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Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	OB-GYNS FOR WOMEN'S HEALTH PA	AC .		
Α.	Full Name (Last, First, Middle Initial) THOMAS J. KENNEDY			Date of Receipt
	Mailing Address 336 ROSA AVENUE			03 7 2006
	City	State	Zip Code	Transaction ID: SA11A1.9461
	METAIRIE	LA	70005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer EAST JEFFERSON HOSPITAL	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	250.00	1
	Other (specify) 🔻	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) MASOOD A. KHATAMEE			Date of Receipt
	Mailing Address 875 PARK AVENUE	02 24 2006		
	City	Transaction ID: SA11A1.9486		
	NEW YORK	NY	10021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		275.00
	Name of Employer NYU	Occupation		7
	Receipt For:		Year-to-Date ▼	-
	Primary General	riggrogate	, real to Bate V	1
	Other (specify) ▼		275.00	
<u> </u>	Full Name (Last, First, Middle Initial) MASOOD A. KHATAMEE			Date of Receipt
	Mailing Address 875 PARK AVENUE			03 16 YYYYY 2006
	City	State	Zip Code	Transaction ID: SA11A1.9645
	NEW YORK	NY	10021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer NYU	Occupation PROFES		7
	Receipt For:		e Year-to-Date ▼	7
	Primary General		F0F 00	1
	Other (specify) ▼		525.00	
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s	UBTOTAL of Receipts This Page (optional)		\	775.00
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PAGE 49/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) PAMELA L. KIMBROUGH Date of Receipt Mailing Address 1045 15TH 25 2006 City State Zip Code Transaction ID: SA11A1.9327 **ARDMORE** OK 73401 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer ARDMORE OB/GYN Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. JUDITH M. KIMELMAN Date of Receipt Mailing Address 1101 MADISON 03 16 2006 City Zip Code State Transaction ID: SA11A1.9646 **SEATTLE** WA 98104 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SEATTLE OB/GYN GROUP Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JULIE A. KING Date of Receipt Mailing Address 555 BLACK OAK DRIVE 03 09 2006 Citv State Zip Code Transaction ID: SA11A1.9586 **MEDFORD** OR 97504 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 C federal political committee. Name of Employer MEDFORD WOMEN'S CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 50 / 95			
	TEMIZED RECEIPTS		or each category of the	(check only one)			
• •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions			
$\overline{}$	NAME OF COMMITTEE (In Full)						
\rangle	OB-GYNS FOR WOMEN'S HEALTH PAGE	C					
۹.	Full Name (Last, First, Middle Initial) VANESSA G. KING-JOHNSON			Date of Receipt			
	Mailing Address 3070 5TH STREET			03 / 16 / Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11A1.9647			
	MARIANNA	FL	32446	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer JACKSON HOSPITAL	Occupation PHYSICI.					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		500.00				
3.	Full Name (Last, First, Middle Initial) RICHARD M. KISHIUE			Date of Receipt			
	Mailing Address 865 LINCOLN ROAD			03 / 06 / 7 2006			
	City	State	Zip Code	Transaction ID: SA11A1.9565			
	BETTENDORF	IA	52722	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer GENESIS HEALTH GROUP	Occupation PHYSICI.					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		500.00				
 C.	Full Name (Last, First, Middle Initial) LUELLA KLEIN			Date of Receipt			
	Mailing Address 2200 DEFOORS FERRY	ROAD		03 16 2006			
	City	State	Zip Code	Transaction ID: SA11A1.9649			
	ATLANTA	GA	30318	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer EMORY UNIVERSITY	Occupation PHYSICI.					
		Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
s	SUBTOTAL of Receipts This Page (optional)						
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 95 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	С					
Full Name (Last, First, Middle Initial) THOMAS A. KLEIN Mailing Address 241 SOUTH 6TH STREET				Date of Receipt 0 2 1 7 2 0 0 6			
	City	State	Zip Code	Transaction ID: SA11A1.9393			
	PHILADELPHIA FEC ID number of contributing federal political committee.	C	19106	Amount of Each Receipt this Period 500.00			
	Name of Employer JEFFERSON MEDICAL COLLEGE Receipt For: Primary General Other (specify) ▼	Occupation PHYSICI Aggregate					
3.	Full Name (Last, First, Middle Initial) J. JOSHUA KOPELMAN Mailing Address 5 RED FOX LANE			Date of Receipt M 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: SA11A1.9369			
	GREENWOOD VILLAGE FEC ID number of contributing federal political committee.	CO	80111	Amount of Each Receipt this Period 250.00			
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI					
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00				
) .	Full Name (Last, First, Middle Initial) ROBERT G. KOSS			Date of Receipt			
	Mailing Address 1875 DEMPSTER STRE	ET		02 / 2006			
	City PARK RIDGE	State II	Zip Code 60068	Transaction ID: SA11A1.9431 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1000.00			
		Occupation PHYSICI		_			
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00				
s	UBTOTAL of Receipts This Page (optional)			1750.00			
т.	TAI. This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 52 / 95					
	•		Use separate schedule(s) or each category of the	(check only one)					
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
			_ common common , coge	13 14 15 16 17					
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
17	OB-GYNS FOR WOMEN'S HEALTH P	AC							
_	Full Name (Leat First Middle Initial)								
Α.	Full Name (Last, First, Middle Initial) ROBERT L. KRAUSS			Date of Receipt					
	Mailing Address 236 WEST NORTHVIE	W		M M / D D / Y Y Y Y					
	200 11201 11011111112	••		03 16 2006					
	City	State	Zip Code	Transaction ID: SA11A1.9650					
	PHOENIX	AZ	85021	Amount of Each Receipt this Period					
	FEC ID number of contributing			250.00					
	federal political committee.	C		250.00					
	Name of Canalagas	10		_					
	Name of Employer MERCY CARE PLAN	Occupation	L DIRECTOR						
	Receipt For:		Year-to-Date ▼	_					
	Primary General	riggrogato	real to Bate V	1					
	Other (specify) ▼		250.00						
				4					
	Full Name (Last, First, Middle Initial)								
В.				Date of Receipt					
	Mailing Address 1890 WEST GAUTHIE	R		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	Cit.	Ctata	7in Ondo	03 16 2006					
	City	State	Zip Code	Transaction ID: SA11A1.9651					
	LAKE CHARLES	LA	70605	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	rederal political committee.	-							
	Name of Employer SELF-EMPLOYED	Occupation	า						
		PHYSICI.	AN						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		500.00	1					
	Other (specify)		300.00						
	Full Name (Lost First Middle Initial)								
C.	Full Name (Last, First, Middle Initial) KOTESWARA R. KUNDA			Date of Receipt					
	Mailing Address 903 BELVIN STREET			M M / D D / Y Y Y Y					
				02 22 2006					
	City	State	Zip Code	Transaction ID: SA11A1.9504					
	SAN MARCOS	TX	78666	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		2000.00					
	Receipt For:			2500.00					
			1						
			AN						
			Year-to-Date ▼						
	Primary General	33 -3 3		1					
	Other (specify) ▼		2000.00						
s	UBTOTAL of Receipts This Page (optional)			2750.00					
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 53/95			
IT	ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b] 11c		
			Detailed Summary Page	13 14	15 16 17		
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any person	on for the purpose of solici	ting contributions		
	NAME OF COMMITTEE (In Full)	name and add	aress or any pointed committee to	Solicit Contributions from	such committee.		
\rangle	OB-GYNS FOR WOMEN'S HEALTH P	AC					
Α.	Full Name (Last, First, Middle Initial) JULIE H. LADOCSI			Date of Receipt			
	Mailing Address 14521 SARUM TERRA	CE		0 2 / D D D 1 7	2006		
	City	State	Zip Code	Transaction ID: SA			
	MIDLOTHIAN FEO.ID A CONTRACTOR OF THE CONTRACTOR	VA	23113	Amount of Each Re	ceipt this Period		
	FEC ID number of contributing federal political committee.	C			250.00		
	Name of Employer RICHMOND OB/GYN	Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0	250.00				
В.	Full Name (Last, First, Middle Initial) PATRICIA A. LARUE			Date of Receipt			
	Mailing Address 221 WEST COLORADO	01 25	2006				
	City	State	Zip Code		Transaction ID: SA11A1.9328		
	DALLAS	TX	75208	Amount of Each Re	ceipt this Period		
	FEC ID number of contributing federal political committee.	C			500.00		
	Name of Employer METHODIST HEALTH CENTER	Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		500.00				
<u> </u>	Full Name (Last, First, Middle Initial) HAL C. LAWRENCE			Date of Receipt			
	Mailing Address 93 VICTORIA ROAD			02 24	2006		
	City	State	Zip Code	Transaction ID: SA	A11A1.9488		
	ASHEVILLE	NC	28801	Amount of Each Re	ceipt this Period		
	FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY OF NORTH CAROL-INA Occupati PHYSIC				1000.00		
	Receipt For:	Aggregate	e Year-to-Date ▼	_			
	Primary General Other (specify) ▼		1000.00				
s	UBTOTAL of Receipts This Page (optional)				1750.00		
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		54 / 95			
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 15	12 16 17		
Ar	ly information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold or used by any perso	n for the purpose of soliciting contr	ibutions		
	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH P						
Α.	A. Full Name (Last, First, Middle Initial) DAVID J. LEVINE Mailing Address 232 SOUTH WOODS MILL ROA				Y		
	City CHESTERFIELD	State MO	Zip Code 63017	Transaction ID: SA11A1.9 Amount of Each Receipt this			
	FEC ID number of contributing federal political committee.				500.00		
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00				
В.	Full Name (Last, First, Middle Initial) SHUN H. LING	DOD		Date of Receipt			
	Mailing Address 945 NORTH OAK HAR		2006				
	City	State	Zip Code	Transaction ID: SA11A1.9			
	OAK HARBOR FEC ID number of contributing federal political committee.	C	98277	Amount of Each Receipt this	300.00		
	Name of Employer RETIRED	Occupation PHYSICI		1			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00				
C.	Full Name (Last, First, Middle Initial) CHARLES J. LOCKWOOD Mailing Address 33 LIBERTY STREET				Y Y Y Y 2 0 0 6		
	City	State	Zip Code	Transaction ID: SA11A1.9			
	MADISON	CT	06443	Amount of Each Receipt this	Period		
	FEC ID number of contributing federal political committee.	С			750.00		
YALE UNIVESITY PHYSIC		Occupation PHYSICI	AN				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00				
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Т	OTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		lloo concrete cobodulo(c)	FOR LINE NUMBER: PAGE 55 / 95
	•		Use separate schedule(s) or each category of the	(check only one)
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or		name and add	aress or any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	• •		
/	OB-GYNS FOR WOMEN'S HEALTH PA	AC		
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	JULIETTE LOMAX-HOMIER			Date of Receipt
	Mailing Address 1304 NORTH LAWNWO	OOD CIRC	LE	M M / D D / Y Y Y Y
	City	Ctoto	Zin Codo	01 30 2006
	City FORT PIERCE	State FL	Zip Code	Transaction ID: SA11A1.9370
		FL	34950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			250.00
	Name of Employer JUST LADIES HEALTH CARE	Occupation		
		PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	250.00	
	Carlor (opediny) 🔻		1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			
В.	LAURENCE F. MACK			Date of Receipt
	Mailing Address 80 ANDOVER ROAD			03 07 2006
	City	State	Zip Code	Transaction ID: SA11A1.9463
	ROCKVILLE CENTRE	NY	11570	Amount of Each Receipt this Period
	FEC ID number of contributing		11070	
	federal political committee.	C		1000.00
	V (5.1	10		
	Name of Employer INFERTILITY ASSOCIATES	Occupation PHYSICI.		
	Receipt For:		Year-to-Date ▼	_
	Primary General	Aggregate	Teal to Bate V	1
	Other (specify) ▼		1000.00	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	FEDERICO G. MARIONA Mailing Address 15801 PROVIDENCE D	DIVE		M M / D D / Y Y Y Y
	Mailing Address 15801 PROVIDENCE D	NIVE		01 09 2006
	City	State	Zip Code	Transaction ID: SA11A1.9272
	SOUTHFIELD	MI	48075	Amount of Each Receipt this Period
	FEC ID number of contributing	С		400.00
	federal political committee.			400.00
	Name of Employer	Occupation	n	
		PHYSICI		
			e Year-to-Date ▼	
			400.00	1
	Other (specify) ▼		400.00	
_	UDTOTAL (CD) 11 TH D			1650.00
	UBTOTAL of Receipts This Page (optional)			
1				

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 56 / 95		
	,		Use separate schedule(s)	(check only one)		
IT	ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12		
			Detailed Suffilliary Fage	13 14 15 16 17		
Ar	y information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	OB-GYNS FOR WOMEN'S HEALTH P	AC				
A.	Full Name (Last, First, Middle Initial) SANFORD M. MARKHAM			Date of Receipt		
	Mailing Address 11 PARTRIDGE COUR	łT		03 06 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9566		
	IOWA CITY	IA	52246	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer UNIVERSITY OF IOWA	Occupation PHYSICI.				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		250.00	7		
	Other (specify)		250.00			
— В.	Full Name (Last, First, Middle Initial) ROBERT J. MAROTZ			Date of Receipt		
	Mailing Address 4545 EAST CHANDLEI	M M / D D / Y Y Y Y				
		02 24 2006				
	City	State	Zip Code	Transaction ID: SA11A1.9489		
	PHOENIX	<u>AZ</u>	85048	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		1000.00		
	federal political committee.					
	Name of Employer NEW HORIZON WOMEN'S CARE	Occupation PHYSICI.				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		1000.00	7		
	Other (specify)	0 0	1000.00	1		
<u> </u>	Full Name (Last, First, Middle Initial) CLIFFORD G. MARTIN			Date of Receipt		
	Mailing Address 828 WEISS DRIVE			M M / D D / Y Y Y Y		
	-			02 02 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9294		
	SHEBOYGAN	WI	53083	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI.				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	-	250.00	7		
	Other (specify)		250.00	1		
_	IIDTOTAL of Docainto This Dans (antique)			1500.00		
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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 57/95
ITEMIZED RECEIPTS	or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		13 14 15 16 17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and	may not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PAC		
Full Name (Last, First, Middle Initial) A. MICHELLE MARTIN		Date of Receipt
Mailing Address 5109 MASOTA ROAD		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: SA11A1.9330
RALEIGH NC	27612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250.00
Name of Employer WILKERSON OB/GYN PHYS		
Receipt For: Primary General Other (specify) ▼	gate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. REBECCA P. MCALISTER		Date of Receipt
Mailing Address 3145 BARRETT STATION ROA		0 1 2 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State ST. LOUIS MO	Zip Code 63122	Transaction ID: SA11A1.9331 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300.00
Name of Employer WASHINGTON UNIVERSITY PHYS		
	pate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) C. MARK W. MCCORMICK		Date of Receipt
Mailing Address 628 RIVER ROAD		0 1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code	Transaction ID: SA11A1.9278
BEAVER PA FEC ID number of contributing	15009	Amount of Each Receipt this Period
federal political committee.		500.00
Name of Employer TRI-STATE GYNECOLOGY PHYS	ICIAN	
Primary General	gate Year-to-Date ▼ 500.00	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number only))	

PAGE 58 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) JOHN J. MCHUGH Date of Receipt Mailing Address 1829 SOUTHBAY DRIVE 03 2006 16 City State Zip Code Transaction ID: SA11A1.9652 **PENSACOLA** FI 32506 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer U.S. NAVY Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. GEORGE A. MCMILLAN Date of Receipt Mailing Address 614 EASTERN PARKWAY 0.1 09 2006 City Zip Code State Transaction ID: SA11A1.9273 **BROOKLYN** NY 11225 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer MCMILLAN & ASSOCIATES Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) C. MICHAEL T. MENNUTI Date of Receipt Mailing Address 1311 HILLSIDE ROAD 02 02 2006 Citv State Zip Code Transaction ID: SA11A1.9295 WYNNWOOD PA 19096 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer UNIVERSITY OF PENNSYLVANIA Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1550.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 95 (check only one) X 11a 11b 11c 12	
An	y information copied from such Reports and Stat	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions	
or 1	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.	
\rangle	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	vC			
	Full Name (Last, First, Middle Initial) KENNETH W. MERKITCH, JR.	D.DI.AGE		Date of Receipt	
	Mailing Address W5732 HEATHERWOO	D PLACE		02 01 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9435	
	LACROSSE	WI	54601	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer GUNDERSEN LUTHERAN	Occupation PHYSICI			
	Receipt For:		Year-to-Date ▼	-	
	Primary General Other (specify) ▼		500.00		
	Full Name (Last, First, Middle Initial) ALFRED H. MOFFETT, JR.			Date of Receipt	
	Mailing Address 601 EAST DIXIE AVENU	02 01 2006			
	City	State Zip Code			
	LEESBURG	FL	34748	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	Name of Employer OB/GYN ASSOCIATES OF MID-	Occupation PHYSICI			
	FLORIDA Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
— Э.	Full Name (Last, First, Middle Initial) VIDYA S. MORISETTY			Date of Receipt	
	Mailing Address 2220 NORTH MONROE			01 30 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9371	
	DECATUR	IL	62526	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI	AN		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00		
SI	JBTOTAL of Receipts This Page (optional)			1250.00	
TO	OTAL This Period (last page this line number or	nly))		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 60	/ 95	
	ITEMIZED RECEIPTS		or each category of the	(check only one)		
••	LIVILLED TIEGETT TO		Detailed Summary Page		2 6	
Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any person	on for the purpose of soliciting contributi	ons	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee	ee.	
	NAME OF COMMITTEE (In Full)					
	OB-GYNS FOR WOMEN'S HEALTH PA	AC				
_	Full Name (Last, First, Middle Initial)			Date of Descript		
Α.	MARK E. MULHOLLAND Mailing Address 2857 KYLE ROAD			Date of Receipt	YY	
	Walling Address 2007 KTEL HOAD				0.6	
	City	State	Zip Code	Transaction ID: SA11A1.9410	1	
	KENNEWICK WA		99338	Amount of Each Receipt this Peri	od	
	FEC ID number of contributing federal political committee.			500	0.00	
	Name of Employer ASSOCIATED PHYSICIANS	Occupation PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General	' '	500.00	1		
	Other (specify)	0 0				
В.	Full Name (Last, First, Middle Initial) MICHAEL A. MURPHY			Date of Receipt		
	Mailing Address 4473 ORCHARD HEIGHTS ROAD, NW				0 6	
	City State		Zip Code	Transaction ID: SA11A1.9567	,	
	SALEM	OR	97304	Amount of Each Receipt this Peri	od	
	FEC ID number of contributing federal political committee.	С		500	0.00	
	Name of Employer SELF-EMPLOYED	Occupation				
	Receipt For:	PHYSICI	AIN e Year-to-Date ▼			
	Primary General	7 iggi ogaic		1		
	Other (specify) ▼	0 0	500.00			
_	Full Name (Last, First, Middle Initial) RICK D. MURRAY			Date of Receipt		
U.	Mailing Address 30682 COUNTRY ROA	D		M M / D D / Y Y	YY	
					0.6	
	City	State	Zip Code	Transaction ID: SA11A1.9420		
	REDLANDS	CA	92374	Amount of Each Receipt this Peri	od	
	FEC ID number of contributing federal political committee.	C		250	0.00	
KAISER DERMANENTE		Occupation PHYSICI				
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼			
			250.00			
	Cutor (specify)		0 0 0 0 0 0 0	1		
SUBTOTAL of Receipts This Page (optional)						
T	OTAL This Period (last page this line number o	nly))			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 61 / 95
TEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Any information copied from such Reports and St	atements ma	not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH P	AC		
Full Name (Last, First, Middle Initial) VINCENT M. NAPOLIELLO			Date of Receipt
Mailing Address 10 BROOKLAWN DRIN	/E		03 06 7 9 9 9
City	State	Zip Code	Transaction ID: SA11A1.9569
POMPTON PLAINS	NJ	07444	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer PHYSICIANS FOR WOMEN	Occupatio PHYSICI		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. HARRY C. NELSON			Date of Receipt
Mailing Address 1021 COOLIDGE STRI	02 01 2006		
City	State	Zip Code	Transaction ID: SA11A1.9437
GREENEVILLE	TN	37743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer WOMEN'S CENTER OF GREENVI- LLF	Occupatio PHYSICI		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) C. KATHLEEN G. NELSON			Date of Receipt
Mailing Address 210 SUNNYVIEW LAN	E		01 30 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.9373
KALISPELL	<u>MT</u>	59901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer KALISPELL OB/GYN	Occupatio PHYSICI		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			1000.00
TOTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 62/95
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PAC	;		
Α.	Full Name (Last, First, Middle Initial) PAMELA E. NETUSCHIL			Date of Receipt
	Mailing Address 343 ELM STREET			03 / 02 / 4 4 4 4 4
	City RENO	State NV	Zip Code 89503	Transaction ID: SA11A1.9555 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	SELE-EMDI.OAED	Occupation PHYSICI		
	-		Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) J. DOUGLAS NISBET Mailing Address 390 TOLL GATE ROAD			Date of Receipt
		03 15 2006		
	City WARWICK	State RI	Zip Code 02886	Transaction ID: SA11A1.9619
	FEC ID number of contributing federal political committee.	C	02000	Amount of Each Receipt this Period 500.00
	NICRET & COOTT	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) KENNETH L. NOLLER			Date of Receipt
	Mailing Address 750 WASHINGTON STRE	EET		03 08 2006
	City BOSTON	State MA	Zip Code 02111	Transaction ID: SA11A1.9582 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	THETC MEDICAL CENTED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
 -	OTAL This Period (last nage this line number only	·)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 63 / 95		
•		Use separate schedule(s)		(check only one)		
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12		
			Detailed Summary Page	13 14 15 16 17		
Δr	y information copied from such Reports and Sta	atomonte may	y not be sold or used by any perso			
or	for commercial purposes, other than using the r	solicit contributions from such committee.				
abla	NAME OF COMMITTEE (In Full)					
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	AC				
Α.	Full Name (Last, First, Middle Initial) ROLAND NYEIN			Date of Receipt		
	Mailing Address 68 BAYARD STREET			03 06 2006		
	City	State	Zip Code	Transaction ID: SA11A1.9571		
	NEW YORK	NY	10013	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI.				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		500.00	1		
	Other (specify)		300.00			
— В.	Full Name (Last, First, Middle Initial) KATHLEEN D. O'CONNOR			Date of Receipt		
	Mailing Address 350 SOUTH BROADWA	M M / D D / Y Y Y Y				
		01 25 2006				
	City	State	Zip Code	Transaction ID: SA11A1.9333		
	HICKSVILLE	NY	11801	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
	Name of Employer QUEENS MEDICAL GROUP	Occupation PHYSICI.				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		1000.00	1		
	Other (specify) ▼		1000.00]		
	Full Name (Last, First, Middle Initial)					
C.	JERRY M. OBRITSCH			Date of Receipt		
	Mailing Address 401 NORTH 9TH STRE		03 16 2006			
	City	State	Zip Code	Transaction ID: SA11A1.9653		
	BISMARCK	ND	58501	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer MID DAKOTA CENTER FOR WOM- EN	Occupation PHYSICI.				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General	-	050.00	1		
	Other (specify) ▼		250.00	1		
Г						
•	UBTOTAL of Receipts This Page (optional)			1750.00		
\vdash	ODITION TO CEIPLE THIS LAYE (OPHOHAI)					

PAGE 64/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) HOLLY L. OLSON Date of Receipt Mailing Address 1067 ALAOKI STREET 30 2006 City State Zip Code Transaction ID: SA11A1.9374 **MILILANI** HI 96789 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer U.S. ARMY Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL L. PECH Date of Receipt Mailing Address 855 NORTH WESTHEAVEN 03 07 2006 City Zip Code Transaction ID: SA11A1.9575 State **OSHKOSH** WI 54904 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. ERIC M. PECK Date of Receipt Mailing Address 20375 WEST 151ST STREET 02 17 2006 Zip Code City State Transaction ID: SA11A1.9519 **OLATHE** KS 66061 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer OLATHE MEDICAL Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 95 (check only one)
Ar	ny information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may	not be sold or used by any pers	on for the purpose of soliciting contributions
Š	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PAC	o and add	according political committee to	COLOR SOLUTION OF HOLD COOK SOLUTION.
Α.	Mailing Address 925 HIGHLAND BOULEVARD			Date of Receipt 0 3 1 6 2 0 0 6
	City	State MT	Zip Code	Transaction ID: SA11A1.9654
	BOZEMAN FEC ID number of contributing federal political committee.	C	59715	Amount of Each Receipt this Period 250.00
		Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) SHARON T. PHELAN			Date of Receipt
	Mailing Address 13429 DESERT HILLS NE	02 22 2006		
	City ALBUQUERQUE	State NM	Zip Code 87111	Transaction ID: SA11A1.9506
	EEO ID accomb on of a carbollo stice.	C	0/111	Amount of Each Receipt this Period 500.00
	LINIVERSITY OF NEW MEXICO	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) TIMOTHY E. PHELAN			Date of Receipt
	Mailing Address 1621 CREEKSIDE DRIVE			02 14 2006
	City FOLSOM	State CA	Zip Code 95630	Transaction ID: SA11A1.9403
	EEO ID accomb on of a carbollo stice.	C	33030	Amount of Each Receipt this Period 1000.00
		Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)			1750.00
Т	OTAL This Period (last page this line number only)			

SCHEDIII E A (EEC Form 3Y)				FOR LINE NUMBER: PAGE 66 / 95
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δ,	ny information copied from such Reports and Sta	atomonto mo	y not be cold or used by any nore	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
$ \setminus $	• • • • • • • • • • • • • • • • • • • •	۸.		
	OB-GYNS FOR WOMEN'S HEALTH P.	AC		
	Full Name (Last, First, Middle Initial)			
Α.	JOEL C. PITTARD			Date of Receipt
	Mailing Address 121 NORTH 20TH STREET			M M / D D / Y Y Y Y
				01 30 2006
	City	State Zip Code		Transaction ID: SA11A1.9375
	OPELIKA	AL	36801	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.	<u> </u>		300.00
	Name of Employer	Occupation	<u> </u>	\dashv
	Name of Employer LEE OB/GYN	PHYSICI		
	Receipt For:		Year-to-Date ▼	-
	Primary General	Aggregate	Teal to Bate V	1
	Other (specify)		500.00	
	canor (opeciny) •	1 1		1
_	Full Name (Last, First, Middle Initial)			
В.	TULASI P. POLAVARAPU	Date of Receipt		
	Mailing Address 1 HANSON PLACE			M M / D D / Y Y Y Y
				01 25 2006
	City	State	Zip Code	Transaction ID: SA11A1.9335
	BROOKLYN	NY	11243	Amount of Each Receipt this Period
	FEC ID number of contributing	С		500.00
	federal political committee.	9		
	Name of Employer	Occupation	า	\dashv
	Name of Employer SELF-EMPLOYED	PHYSICI		
	Receipt For:		Year-to-Date ▼	
	Primary General	33 -3		1
	Other (specify) ▼		500.00	
				1
_	Full Name (Last, First, Middle Initial)			But of Busin
Ċ.	TIMOTHY A. PRESNELL			Date of Receipt
	Mailing Address 171 SANDY LANE			02 01 2006
	City	State	Zip Code	Transaction ID: SA11A1.9438
	RICHLANDS	VA	24641	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.			500.00
	Name of Employer CLINCH VALLEY PHYSICIANS Occupation CLINCH VALLEY PHYSICIANS			
		PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, ,	500.00	11
	Other (specify)		300.00	
_				
				1500.00
SUBTOTAL of Receipts This Page (optional)				1300.00
				_

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 67/95
ITEMIZED RECEIPTS	or each category of the	(check only one) X 11a 11b 11c 12
	Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by any perso address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
OB-GYNS FOR WOMEN'S HEALTH PAC		
Full Name (Last, First, Middle Initial) JOANN A. PRICE	Date of Receipt	
Mailing Address 185 HAMILTON AVENUE	01 25 7 2006	
City State WATERTOWN CT	'	Transaction ID: SA11A1.9337
FEC ID number of contributing federal political committee.	06795	Amount of Each Receipt this Period 350.00
Name of Employer Occup SELF-EMPLOYED PHYS	ation IICIAN	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	gate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. WILLIAM F. PRICE	Date of Receipt	
Mailing Address 2700 EAST 29TH STREET	01 25 7 2006	
City State BRYAN TX	'	Transaction ID: SA11A1.9338
FFO ID asserbles of a solution time.	77802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Name of Employer Occup SELF-EMPLOYED PHYS	ation ICIAN	
	gate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. WILLIAM F. PRICE		Date of Receipt
Mailing Address 2700 EAST 29TH STREET		03 / 06 / 2006
City State		Transaction ID: SA11A1.9572
BRYAN TX	77802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Name of Employer SELF-EMPLOYED PHYS	ation ICIAN	
	gate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1350.00
TOTAL This Period (last page this line number only)	>	

PAGE 68 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) HEIDY PUIG Date of Receipt Mailing Address 1628 REGAL COVE COURT 30 2006 City Zip Code State Transaction ID: SA11A1.9376 **KISSIMMEE** 34744 FI Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer RETIRED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. THOMAS F. PURDON Date of Receipt Mailing Address 706 EAST BENT BRANCH PLACE 03 07 2006 City State Zip Code Transaction ID: SA11A1.9464 **GREEN VALLEY** ΑZ 85614 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ARIZONA HEALTH SCIENCE CE-Occupation **PHYSICIAN** <u>NTER</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. PATRICK S. RAMSEY Date of Receipt Mailing Address 400 VESCLUB LANE 03 16 2006 Citv State Zip Code Transaction ID: SA11A1.9655 VESTAVIA HILLS ΑL 35216 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIVERSITY OF ALABAMA Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 69/95		
ITEMIZED RECEIPTS			or each category of the	(check only one)	7	
II EMIZED RECEIP 13			Detailed Summary Page	X 11a 11b	11c 12 15 16 17	
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or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.	
	NAME OF COMMITTEE (In Full)					
\rangle	OB-GYNS FOR WOMEN'S HEALTH P	AC				
_	Full Name (Last, First, Middle Initial)					
A.	J. RANDALL RAUH			Date of Receipt		
	Mailing Address 219 NORTH MERRIAN	IAVENUE		03 16		
	City	State	Zip Code	Transaction ID: S		
	MILES CITY	MT	59301	Amount of Each Re		
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer DEACONESS BILLING CLINIC	Occupation				
	Receipt For:		e Year-to-Date ▼			
	Primary General			1		
	Other (specify)		500.00			
_						
В.	Full Name (Last, First, Middle Initial) JAANA REHNSTROM			Date of Receipt		
	Mailing Address 103 FIFTH AVENUE			M M / D D D D D D D D D D D D D D D D D		
	City	State	Zip Code	Transaction ID: S		
	NEW YORK	NY	10003	Amount of Each Re		
	FEC ID number of contributing		1 1 1 1 1		· · · · · · · ·	
	federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSIC				300.00	
			 n	\dashv		
			e Year-to-Date ▼			
Primary General			300.00	1		
	Other (specify) ▼	0 0	000.00			
C.	Full Name (Last, First, Middle Initial) DALE P. REISNER			Date of Receipt		
	Mailing Address 1229 MADISON STREI	ΞT		0 1 2 5		
	City SEATTLE		Zip Code	Transaction ID: S		
			98104	Amount of Each Re		
			00104	Amount of Each Te	· · · · · · · ·	
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer PEDIATRIX/OBSTETRIX	Occupation PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		500.00	1		
	Other (specify)	0 0	300.00			
					1000.00	
s	UBTOTAL of Receipts This Page (optional)		1300.00			
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1 [TOTAL This Period (last page this line number only)					

PAGE 70 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) SCOTT W. ROBERTS Date of Receipt Mailing Address 4509 BRIAR HOLLOW DRIVE 26 2006 City State Zip Code Transaction ID: SA11A1.9357 **PLANO** TX 75093 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIVERSITY OF TEXAS Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. SUZANNE B. ROTHCHILD Date of Receipt Mailing Address 400 WEST CUMMINGS PARK 02 14 2006 City State Zip Code Transaction ID: SA11A1.9404 **WOBURN** MA 01801 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. TOD J ROTHSCHILD Date of Receipt Mailing Address 420 GOLF DRIVE 0.1 25 2006 Zip Code City State Transaction ID: SA11A1.9340 **OCEANSIDE** NY Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MT. SINAI Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 95 (check only one) X 11a 11b 11c 12
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA		••	
Α.	Full Name (Last, First, Middle Initial) AMY H. RUGGERI Mailing Address 2722 NORTH GEYER ROAD City State ST. LOUIS MO FEC ID number of contributing federal political committee.		Zip Code 63131	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer MERCY MEDICAL GROUP Receipt For: Primary General Other (specify) ▼	Occupation PHYSICI Aggregate		
3.	Full Name (Last, First, Middle Initial) LYMAN A. RUST Mailing Address 20 CANDLEWYCK City HENDERSON	State NV	Zip Code 89052	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer RETIRED	C Occupation PHYSICI	1	Amount of Each Receipt this Period 500.00
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
C .	Full Name (Last, First, Middle Initial) FHOMAS F. RUZICS Mailing Address 22 LAKE FRONT DRIVE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City AKRON FEC ID number of contributing federal political committee.	State OH	Zip Code 44319	Transaction ID: SA11A1.9542 Amount of Each Receipt this Period 250.00
	Name of Employer SELF-EMPLOYED Receipt For: Primary General Other (specify) ▼	Occupation PHYSICI Aggregate		
SI	UBTOTAL of Receipts This Page (optional)			1250.00
T	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 95 (check only one) X	
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	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.	
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	С			
۹.	Full Name (Last, First, Middle Initial) BENJAMIN P. SACHS Mailing Address 330 BROOKLINE AVENUE			Date of Receipt	
	City State Zip Code			0 2 2 4 2 0 0 6 Transaction ID: SA11A1.9490	
	BOSTON	MA 02215 Amount of Each Receipt th			
	FEC ID number of contributing federal political committee.	C		750.00	
	Name of Employer BETH ISRAEL MEDICAL CENTER	Occupation PHYSICIAN			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00		
3.	Full Name (Last, First, Middle Initial) NANETTE F. SANTORO			Date of Receipt	
	Mailing Address 214 BENNINGTON TER	RACE		01 25 2006	
	City	State	Zip Code	Transaction ID: SA11A1.9342	
	PARAMUS FEC ID number of contributing federal political committee.	C	07652	Amount of Each Receipt this Period 500.00	
	Name of Employer ALBERT EINSTEIN COLLEGE	Occupation PHYSICI			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
).	Full Name (Last, First, Middle Initial) LISA L. SAVAGE			Date of Receipt	
Mailing Address 900 EAST 30TH STREET				01 25 / Y Y Y Y Y	
	City AUSTIN	State TX	Zip Code	Transaction ID: SA11A1.9343	
	FEC ID number of contributing federal political committee.	C	78705	Amount of Each Receipt this Period 250.00	
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00		
s	UBTOTAL of Receipts This Page (optional)	1500.00			
T	OTAL This Period (last page this line number on	lv)			

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11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b	11c 12
				13 14	15 16 17
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_	NAME OF COMMITTEE (In Full)		7, 111111111111111111111111111111111111		
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	С			
۹.	Full Name (Last, First, Middle Initial) MICHAEL A. SBARRA			Date of Receipt	
	Mailing Address 20 PROSPECT AVENUE			03 / 01	2006
	City	State	Zip Code	Transaction ID: SA	11A1.9550
	HACKENSACK	NJ	07601	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify) ▼	0 0	300.00		
3.	Full Name (Last, First, Middle Initial) DAPHNE B. SCHALAU			Date of Receipt	
	Mailing Address 814 BLACK OAK DRIVE			03 / 09	2006
	City	State	Zip Code	Transaction ID: SA	11A1.9587
	ROSEBURG	OR	97470	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			1000.00
	Name of Employer HEALTHCARE FOR WOMEN	Occupation PHYSICI			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		1000.00]	
<u> </u>	Full Name (Last, First, Middle Initial) PETER A. SCHWARTZ			Date of Receipt	
٠.	Mailing Address P.O. BOX 16052			M M / D D	/ Y Y Y Y
				02 27	2006
	City WEST DEADING	State	Zip Code	Transaction ID: SA	
	WEST READING	PA	19612	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			1000.00
	Name of Employer READING HOSPITAL	Occupation PHYSICI			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		1000.00	1	
	Other (specify) ▼				
s	UBTOTAL of Receipts This Page (optional)				2500.00
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PAGE 74/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) LISA M. SHAKERIN Date of Receipt Mailing Address 3450 YATES AVENUE NORTH 17 2006 City Zip Code Transaction ID: SA11A1.9260 State **CRYSTAI** MN 55422 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. ALBERT C. SIMMONDS, IV Date of Receipt Mailing Address 14504 POPLAR HILL ROAD 0.1 30 2006 City Zip Code State Transaction ID: SA11A1.9379 **DARNESTOWN** MD 20874 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 C federal political committee. Name of Employer SIMMONDS & SIMMONDS Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) C. ELIZABETH A. SIMONEAU Date of Receipt Mailing Address 5289 NORTH SUNSET SHADOWS 02 10 2006 Citv State Zip Code Transaction ID: SA11A1.9413 TUCSON ΑZ 85750 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 75/95					
	EMIZED RECEIPTS		or each category of the	(check only one)					
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17					
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.					
\setminus	NAME OF COMMITTEE (In Full)								
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH P.	AC							
	Full Name (Last, First, Middle Initial)								
A.	FRANCINE E. SINOFSKY			Date of Receipt					
	Mailing Address 64 CEDAR AVENUE			M M / D D / Y Y Y					
	0::	0	7' 0 1	03 07 2006					
	City	State NJ	Zip Code	Transaction ID: SA11A1.9576					
	HIGHLAND PARK	INJ	08904	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	Name of Employer SELF-EMPLOYED	Occupation							
	Receipt For:	PHYSICI	AIN e Year-to-Date ▼	_					
	Primary General	Aggrogate	Teal to Bate V	1					
	Other (specify) ▼	1	250.00						
_									
D	Full Name (Last, First, Middle Initial) SUSAN L.D. SIPES			Date of Receipt					
Ь.	Mailing Address 2540 PARKWOOD DRI	VE		M M / D D / Y Y Y Y					
	Walling Address 2540 FARRWOOD DRI	V L		01 17 2006					
	City	Transaction ID: SA11A1.9262							
	GREEN BAY	WI	54304	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		500.00					
	federal political committee.								
	Name of Employer MATERNAL FETAL CONSULTANTS	Occupation							
		PHYSICI							
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼						
	Other (specify)	' '	500.00						
	and (epoint) V	1 1	0 0 0 0 0 0 0	-					
_	Full Name (Last, First, Middle Initial)			5. 75. 11					
C.	SIDNEY T. SMITH	NDIVE		Date of Receipt					
	Mailing Address 1000 COLD BRANCH [DRIVE		01 25 2006					
	City	State	Zip Code	Transaction ID: SA11A1.9344					
	COLUMBIA	SC	29723	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		1000.00					
	federal political committee.			100000					
	Name of Employer SOUTH CAROLINA ONCOLOGY	Occupation	n						
		PHYSICI							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General Other (specify) ▼	' '	1000.00						
	Other (Specify) ♥		0 0 0 0 0 0 0	4					
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s	UBTOTAL of Receipts This Page (optional)			1750.00					
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 76/95
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Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PAC	;		
Full Name (Last, First, Middle Initial) SIDNEY T. SMITH Mailing Address 1000 COLD BRANCH DRIVE				Date of Receipt
	City	State	Zip Code	02 27 2006 Transaction ID: SA11A1.9482
	COLUMBIA FEC ID number of contributing federal political committee.	SC C	29723	Amount of Each Receipt this Period 500.00
Name of Employer SOUTH CAROLINA ONCOLOGY PHYSIC			AN	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1500.00	
3.	Full Name (Last, First, Middle Initial) DOUGLAS M. SODERBERG Mailing Address 6424 TIMBER RIDGE			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City EDINA	State MN	Zip Code 55439	Transaction ID: SA11A1.9346
	FEC ID number of contributing federal political committee.	C	55439	Amount of Each Receipt this Period 500.00
	MINNESOTA GYNECOLOGY & SU- RGERY	Occupation PHYSICI Aggregate		
Э.	Full Name (Last, First, Middle Initial) PAMELA A. ST. AMAND Mailing Address 2965 HARRISON STREET	т		Date of Receipt
	Mailing Address 2965 HARRISON STREET	State	Zip Code	M M O O O O O O O O O O O O O O O O O O
	BEAUMONT	TX	77702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	SELF-EMPL'OYED	Occupation PHYSICIA	AN	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
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PAGE 77 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) RICK D. ST. ONGE Date of Receipt Mailing Address 554 JUNIPER LANE 03 2006 16 City State Zip Code Transaction ID: SA11A1.9659 **GALLIPOLIS** OH 45631 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer HOLZER CLINIC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. RALPH M. STEIGER Date of Receipt Mailing Address 1150 NORTH INDIAN CANYON DRIVE 0.1 25 2006 City State Zip Code Transaction ID: SA11A1.9347 **PALM SPRINGS** CA 92262 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. J. CRAIG STRAFFORD Date of Receipt Mailing Address 494 BUHL MORTON ROAD 0.1 25 2006 Citv State Zip Code Transaction ID: SA11A1.9348 **GALLIPOLIS** OH 45631 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer HOLZER CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

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IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Anna and a sec	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 95 (check only one) X 11a
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PA	AC		
Α.	Full Name (Last, First, Middle Initial) J. CRAIG STRAFFORD			Date of Receipt
	Mailing Address 494 BUHL MORTON RO	DAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	0 3 0 1 2 0 0 6 Transaction ID: SA11A1.9551
	GALLIPOLIS	OH	45631	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer HOLZER CLINIC	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	
<u> </u>	Full Name (Last, First, Middle Initial)			Data of Daggint
Ь.	HOWARD T. STRASSNER, JR. Mailing Address 2432 NEWPORT ROAD	Date of Receipt M M		
	City	State	Zip Code	Transaction ID: SA11A1.9660
	NORTHBROOK	<u>IL</u>	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer RUSH UNIVERSITY MEDICAL CENTER	Occupation PHYSICI	AN	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) JANETTE H. STRATHY			Date of Receipt
	Mailing Address 5428 WEST HIGHWOC	D DRIVE		03 / 13 / 7 7 7 7
	City	State	Zip Code	Transaction ID: SA11A1.9545
	EDINA	MN	55436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer PARK NICOLET CLINIC	Occupation PHYSICI		
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼		1000.00	
s	UBTOTAL of Receipts This Page (optional)			1750.00

TOTAL This Period (last page this line number only)

PAGE 79 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) ALBERT L. STRUNK Date of Receipt Mailing Address 698 CONSTELLATION COURT 03 2006 07 City Zip Code State Transaction ID: SA11A1.9468 DAVIDSONVILLE MD 21035 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer ACOG Occupation VICE PRESIDENT Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. KAREN G. SWENSON Date of Receipt Mailing Address 1305 WEST 34TH STREET 26 2006 City Zip Code State Transaction ID: SA11A1.9358 **AUSTIN** TX 78705 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer WOMEN PARTNERS IN HEALTH Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. DIANE E. TARR Date of Receipt Mailing Address 83 HERRICK STREET 03 09 2006 Citv State Zip Code Transaction ID: SA11A1.9589 **BEVERLY** MA 01915 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer ABOUT WOMEN BY WOMEN Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 80 / 95
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or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	OB-GYNS FOR WOMEN'S HEALTH P	PAC			
<u>/</u>	Full Name (Last, First, Middle Initial)				
A.	BRUCE E. TAYLOR			Date of Receipt	
	Mailing Address 1101 SOUTH 70TH ST	REET		0 3 0 7	
	City	State	Zip Code	Transaction ID: SA	
	LINCOLN	NE	68510	Amount of Each Re	
	FEC ID number of contributing			7 Amount of Edon He	· · · · · ·
	federal political committee.	C			1000.00
	Name of Employer CONTEMPORARY HEALTH CARE	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		1000.00		
	Other (specify)	0 0	1000.00		
_	Full Name (Last, First, Middle Initial)			B . (B	
В.	EDWARD H. TEMPLE			Date of Receipt	
	Mailing Address 471 WILLIAMS BOULE	EVARD		01 25	
	City	State	Zip Code	Transaction ID: SA	A11A1.9351
	RICHLAND	WA	99354	Amount of Each Re	
	FEC ID number of contributing	C			250.00
	federal political committee.				230.00
	Name of Employer SELF-EMPLOYED	Occupation	 n	\dashv	
	SELF-EMPLOYED	PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		250.00		
	Other (specify)	0 0	230.00		
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL R. TESORO			Date of Receipt	
	Mailing Address 152 EAST STREET			M M / D D	/ Y Y Y Y
				03 01	2006
	City	State	Zip Code	Transaction ID: SA	
	SHARON	СТ	06069	Amount of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.	C			250.00
	Name of Employer SELF-EMPLOYED	Occupation			
	Receipt For:		e Year-to-Date ▼	1	
	Primary General		050.00	1	
	Other (specify)	0 0	250.00		
			1500.00		
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or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
\rangle	OB-GYNS FOR WOMEN'S HEALTH P	AC							
A.	Full Name (Last, First, Middle Initial) YVONNE S. THORNTON			Date of Receipt					
	Mailing Address 8900 VAN WYCK EXP	RESSWAY		03 / 09 / 4 9 9					
	City	State	Zip Code	Transaction ID: SA11A1.9590					
	NEW YORK	NY	11418	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.				300.00					
	Name of Employer NOT EMPLOYED	Occupation PHYSICI							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		300.00						
	Other (specify)	0 0	300.00						
— В.	Full Name (Last, First, Middle Initial) PAUL G. TOMICH			Date of Receipt					
	Mailing Address 3637 QUINCE COURT			03 22 7 2006					
	City	State	Zip Code	Transaction ID: SA11A1.9602					
	DOWNERS GROVE	IL	60515	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.00					
	Name of Employer UNIVERSITY OF NEBRASKA	Occupation PHYSICI							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		250.00						
	Other (specify) ▼	0 0	250.00						
C.	Full Name (Last, First, Middle Initial) BETTY K. TU			Date of Receipt					
	Mailing Address 5191 EAST CRESCEN	T DRIVE		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: SA11A1.9583					
	ANAHEIM	CA	92807	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		1000.00					
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General		1000.00						
	Other (specify) ▼		1000.00						
s	UBTOTAL of Receipts This Page (optional)			1550.00					
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only)

PAGE 82/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) KEVIN C. TURNER Date of Receipt Mailing Address 945 GOETHALS 02 2006 10 City State Zip Code Transaction ID: SA11A1.9414 **RICHLAND** WA 99352 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer ASSOCIATED PHYSICIANS Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAUL D. UMES Date of Receipt Mailing Address 880 NORTH LAKE SHORE DRIVE 0.1 30 2006 City State Zip Code Transaction ID: SA11A1.9380 **CHICAGO** IL 60611 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer RETIRED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. WILLIAM C. VOGELPOHL Date of Receipt Mailing Address 337 EL DORADO STREET 0.1 25 2006 Citv State Zip Code Transaction ID: SA11A1.9352 **MONTEREY** CA 93940 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 83 / 95					
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II LIMIZED RECEIP 13			Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
abla	NAME OF COMMITTEE (In Full)								
\rangle	OB-GYNS FOR WOMEN'S HEALTH PA	AC							
Α.	Full Name (Last, First, Middle Initial) K. WARREN VOLKER			Date of Receipt					
	Mailing Address 653 NORTH TOWN CE	NTER		01 25 7 9 9 9					
	City	State	Zip Code	Transaction ID: SA11A1.9353					
	LAS VEGAS	NV	89144	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		1000.00					
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI.							
	Receipt For:	Aggregate	Year-to-Date ▼	7					
	Primary General	1 1	1000.00						
	Other (specify) 🔻	0 0	1000.00						
В.	Full Name (Last, First, Middle Initial) KUAN-I WANG			Date of Receipt					
	Mailing Address 2156 EL MOLINO PLAC	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	City	State	Zip Code	Transaction ID: SA11A1.9405					
	SAN MARINO	CA	91108	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.00					
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI.							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		500.00						
_	Full Name (Last, First, Middle Initial)								
C.	JAMES E. WATSON			Date of Receipt					
	Mailing Address 22 PINE RIDGE LANE			02 03 7 2006					
	City	State	Zip Code	Transaction ID: SA11A1.9428					
	MANSFIELD CENTER	CT	06250	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	500.00							
	Name of Employer MANSFIELD OB/GYN ASSOCIAT- ES	Occupation PHYSICI.							
	Receipt For:	Aggregate	e Year-to-Date ▼						
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	Other (specify) ▼		500.00						
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S	UBTOTAL of Receipts This Page (optional)		>	2000.00					

PAGE 84 / 95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 17 13 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) BARBARA WEBSTER Date of Receipt Mailing Address 7400 JONES DRIVE 02 2006 07 City State Zip Code Transaction ID: SA11A1.9423 **GALVESTON** TX 77551 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer THE WOMEN'S GROUP Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GERSON WEISS Date of Receipt Mailing Address 185 WEST END AVENUE 0.1 25 2006 City Zip Code State Transaction ID: SA11A1.9354 **NEW YORK** NY 10023 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer NEW JERSEY MEDICAL SCHOOL Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. HUGH D. WOLCOTT Date of Receipt Mailing Address 400 GRESHAM DRIVE 02 24 2006 Citv State Zip Code Transaction ID: SA11A1.9491 **NORFOLK** VA 23507 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MID-ATLANTIC WOMEN'S CARE Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 85/95 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 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) **OB-GYNS FOR WOMEN'S HEALTH PAC** Full Name (Last, First, Middle Initial) GAIL B. WOMACK Date of Receipt Mailing Address 26290 CLEAR VIEW DRIVE 02 17 2006 City State Zip Code Transaction ID: SA11A1.9399 **GOLDEN** CO 80401 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer COHEN & WOMACK Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. STEPHEN J. WOODRUFF Date of Receipt Mailing Address 89 JALBERT ROAD 03 09 2006 City State Zip Code Transaction ID: SA11A1.9591 **BARRE** VT 05641 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. MICHAEL P WOODS Date of Receipt Mailing Address 2206 LONGO DRIVE 03 22 2006 Zip Code Citv State Transaction ID: SA11A1.9603 **BELLEVUE** NE 68005 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 C federal political committee. Name of Employer BELLEVUE OB/GYN Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)

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	y Information copied from such Reports and State for commercial purposes, other than using the nar									
\rangle	NAME OF COMMITTEE (In Full) OB-GYNS FOR WOMEN'S HEALTH PAGE	,,								
۹.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS				Transaction Date of Disbu	rsement		V		
	Mailing Address P.O. BOX 53852				02 4	0 6 / Y	žoŏ	6		
	City PHOENIX	State Zip Code AZ 85072			Amount of Ea	ch Disburse				
	Purpose of Disbursement CREDIT CARD TRANSACTION FEES						311	.97		
	Candidate Name			ategory/ Type						
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3.	AMERICAN EXPRESS				Transaction Date of Disbu	rsement		V		
	Mailing Address P.O. BOX 53852				0 3	06	žoŏ	6		
	City PHOENIX	State Zip Code AZ 85072			Amount of Ea	ch Disburse	ment this	Period		
	Purpose of Disbursement CREDIT CARD TRANSACTION FEES		Г				430	.71		
	Candidate Name		7	ategory/ Type						
	Senate President	ement For: Primary General Other (specify)								
Э.	State: District: Full Name (Last, First, Middle Initial) CORPORATE COLOR, INC.				Transaction Date of Disbu	rsement	9525			
	Mailing Address 500 MONOCACY BOUL	LEVARD			03 /	0 7 / Y	ž 0 ŏ	6 ^Y		
	City FREDERICK	State Zip Code MD 21701			Amount of Ea	ch Disburse	ment this	Period		
	Purpose of Disbursement GENERIC MAIL SOLICITATIONS	Тг	0 0			4355	.40			
	Candidate Name			ategory/ Type						
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)								
s	UBTOTAL of Disbursements This Page (optional)			▶			5098	.08		
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										ıs
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\rangle	OB-GYNS FOR WOMEN'S HEALTH PAC										
Α.	Full Name (Last, First, Middle Initial) FIRST NATIONAL MERCHANT SOLUTION		Transaction ID: SB21B.9386 Date of Disbursement					V			
	Mailing Address 1620 DODGE STREET					0 ^M 2	M /	0 2	/ Y	ž 0 ŏ 6	6
	City State Zip Code OMAHA NE 68197						nt of Ea	ch Di	sburseme		
	Purpose of Disbursement CREDIT CARD TRANSACTION FEES				·	L.				571.	03
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	State: District:										
C.	Full Name (Last, First, Middle Initial) SUSANNE HAESSLER					Date o	of Disbu	ırseme			_
	Mailing Address 4101 ALBEMARLE STRE	ET, NW				0 ^M 1	M /	^D 1 7	/ Y	ž 0 ŏ 6	3 ^Y
			Zip Code 20016			Amou	nt of Ea	ch Di	sburseme		
	Purpose of Disbursement ACCOUNTING				·	L.	• •			1051.	25
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OB-GYNS FOR WOMEN'S HEALTH PAC											
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SUSANNE HAESSLER						sburse		ΥΥ	Y	Y	
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	tate Zip Code DC 20016			Amou	unt of	Each	Disburs	emen	t this P	eriod	_
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	Other (specify)										
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,	tata Zin Cada		A	f Faab Diab		u ale: e De	
,	State Zip Code DC 20002		Amount	f Each Disk	oursemen	t this Pe	erioa
Purpose of Disbursement GENERIC TELEPHONE SOLICITATIONS					5	388.78	3
Candidate Name		Category/ Type					
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Candidate Name		Category/ Type					
Office Sought: House Senate President State: District:	nent For: Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)		•			19	700.69	9
TOTAL This Period (last page this line number only)							

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S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 90 / 95
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Ar or	y Information copied from such Reports and Statem for commercial purposes, other than using the name	ents may not be sold or used and address of any political	d by any person f committee to so	or the purpose of solicating contributions licit contributions from such committee
\setminus	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	OB-GYNS FOR WOMEN'S HEALTH PAC			
A.	Full Name (Last, First, Middle Initial) NATIONAL CAPITAL TELESERVICES			Transaction ID: SB21B.9593 Date of Disbursement
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	•	State Zip Code DC 20002		Amount of Each Disbursement this Period
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	Candidate Name		Category/ Type	
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
_	State: District:			
В.	Full Name (Last, First, Middle Initial) NATIONAL CAPITAL TELESERVICES			Transaction ID: SB21B.9685 Date of Disbursement
	Mailing Address 300 FIFTH STREET, NE	$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ Y & 2 & O & O & O \end{bmatrix}$		
		State Zip Code DC 20002		Amount of Each Disbursement this Period
	Purpose of Disbursement GENERIC TELEPHONE SOLICITATIONS			7214.39
	Candidate Name		Category/ Type	
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	13323.77
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SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER:		PAG	E 91/9	5
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NAME OF COMMITTEE (In Full)	and address of any political co	THINKING TO SU	non continu	iona mon	1 30011 001		
OB-GYNS FOR WOMEN'S HEALTH PAC							
Full Name (Last, First, Middle Initial) A. BATTLE BORN POLITICAL ACTION COM	MITTEE		Transact Date of D			56	
Mailing Address 1155 21ST STREET, NW			02	17) / Y	ž 0 ŏ 6	Y
,	State Zip Code DC 20036		Amount o	f Each D	isburseme	ent this P	eriod
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3. CHARLES BOUSTANY, JR. FOR CONGR	ESS		Transact Date of D		nent		Υ
Mailing Address P.O. BOX 80126			0.3	3 0	l'L.	ž 0 0 6	
,	State Zip Code _A 70598		Amount o	f Each D	isburseme		-
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Candidate Name CHARLES W. BOUSTANY, JR.		Category/ Type					
President	ment For: 2006 Primary General Other (specify) ▼						
State: LA District: 07 Full Name (Last, First, Middle Initial)				0	D00.050		
GINGREY FOR CONGRESS			Date of D	isbursem	nent		V
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,	State Zip Code GA 30060		Amount o	f Each D	isburseme		-
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Candidate Name J. PHILLIP GINGREY		Category/ Type					
Office Sought: X House Senate President State: GA District: 11	ment For: 2006 Primary General Other (specify)						
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OB-GYNS FOR WOMEN'S HEALTH PAC											
Full Name (Last, First, Middle Initial)							SB23.9	9690			
KAY GRANGER CAMPAIGN FUND						isburse		ΥΥ	Y	Υ	
Mailing Address 715 JONES STREET				O ^M :	3	3	0 /	. 2	0 Ď 6		
	State Zip Code TX 76102			Amo	ount c	of Each	Disburs	-		-	7
Purpose of Disbursement CONTRIBUTION								. 1	0.000	0	_
Candidate Name N. KAY GRANGER			egory/ ype								
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	Primary X General Other (specify) ▼										
State: TX District: 12	· · · · · · · · · · · · · · · · · · ·										
Full Name (Last, First, Middle Initial) NATHAN DEAL FOR CONGRESS							SB23.9	9688			
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Mailing Address P.O. BOX 902				0 :	3	2	3 /	2	0 Ď 6		
,	State Zip Code GA 30503			Amo	ount c	of Each	Disburs	emen	t this P	eriod	
Purpose of Disbursement CONTRIBUTION				ŢĹ				2	2500.0	0	
Candidate Name NATHAN DEAL			egory/ ype								
Office Sought: X House Disburser Senate	ment For: 2006 Primary X General										
President State: GA District: 10	Other (specify)										
Full Name (Last, First, Middle Initial)	IAL COMMITTEE						SB23.9	9531			
NATIONAL REPUBLICAN CONGRESSION	IAL COMMITTEE			M	М	isburse		ΥΥ	Y	Υ	
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ITEMIZED	DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28	a X	23 28b	24 28c	H	25 29	26	6 0b	
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	itate Zip Code DE 19803			Aı	mount o	of Each	Disburs	emen	t this P	eriod			
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Full Name (Last, First, Middle Initial) RICHARD M. KISHIUE				1		i on ID: Disburse	SB28A ement	A.968	6				
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