

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Radiology Association PAC

ADDRESS (number and street)

1891 Preston White Drive

☐ Check if different than previously reported. (ACC)

Reston

VA

20191

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00343459

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

03

01

2016

03

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Taxin MD

Signature of Treasurer

Richard Taxin MD

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

19

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		858900.63
(b) Cash on Hand at Beginning of Reporting Period.....	834210.88	
(c) Total Receipts (from Line 19)	127941.30	318632.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	962152.18	1177533.24
7. Total Disbursements (from Line 31)	124621.35	340002.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	837530.83	837530.83
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Radiology Association PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 03 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

107858.51

268181.53

(ii) Unitemized

20082.79

50451.08

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

127941.30

318632.61

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

127941.30

318632.61

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

127941.30

318632.61

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

127941.30

318632.61

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. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1638.49	3251.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1638.49	3251.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	106000.00	260500.00
24. Independent Expenditures (use Schedule E)	16982.86	76250.47
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	124621.35	340002.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	124621.35	340002.41

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	127941.30	318632.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	127941.30	318632.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1638.49	3251.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1638.49	3251.94

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David Abramowitz

Mailing Address 12 Stony Point Rd

City

Charleston

State

WV

Zip Code

25314-1670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kanawha Valley Radiology, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

272.73

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

Transaction ID : C3290846

Amount of Each Receipt this Period

272.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Saurabh Agarwal MD

Mailing Address 70 Westfield Dr

City

East Greenwich

State

RI

Zip Code

02818

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	6		

Transaction ID : C3291074

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark David Alson

Mailing Address 6641 N Forkner Ave

City

Fresno

State

CA

Zip Code

93711-1326

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sierra Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2014



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	1	6		

Transaction ID : C3284200

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

597.73

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

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

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

FOR LINE NUMBER: PAGE 7 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Douglas R Andrews

Mailing Address St Mary's Hospital
707 South Mills St

City Madison State WI Zip Code 53715-0450

FEC ID number of contributing
federal political committee.

C

Name of Employer
Madison Radiologists, SC

Occupation
Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 23 / 2016

Transaction ID : C3283203

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wesley A Angel MD

Mailing Address 8563 Kettering Dr

City Cordova State TN Zip Code 38016-4552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Memphis Radiological PC

Occupation
Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

03 / 05 / 2016

Transaction ID : C3270862

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wesley A Angel MD

Mailing Address 8563 Kettering Dr

City Cordova State TN Zip Code 38016-4552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Memphis Radiological PC

Occupation
Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

03 / 29 / 2016

Transaction ID : C3285308

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

460.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Howard J Ansel

Mailing Address 8310 Cedar Lake Rd S

City

Saint Louis Park

State

MN

Zip Code

55426-2418

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Minnesota

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : C3278631

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kyle Jacob Antes

Mailing Address 8200 Walnut Hill Ln

City

Dallas

State

TX

Zip Code

75231-4426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Texas Oncology Dallas

Occupation

Physicist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Transaction ID : C3276741

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Kemal Atalay

Mailing Address 70 Bailey Blvd

City

East Greenwich

State

RI

Zip Code

02818-1454

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2016

Transaction ID : C3282305

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. James J Baek

Mailing Address 1701 Stonehenge Rd

City

Charleston

State

WV

Zip Code

25314-1675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kanawha Valley Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

Transaction ID : C3290847

Amount of Each Receipt this Period

272.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mack K Bandler

Mailing Address 2656 Oak View Cir

City

Medford

State

OR

Zip Code

97504-6320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medford Radiology Group

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	6

Transaction ID : C3285435

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Stephen M Bejvan

Mailing Address N2302 Falling Wing Ln

City

Hortonville

State

WI

Zip Code

54944-9374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Monroe Clinic

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	6

Transaction ID : C3292151

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1572.73

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Michael David Beland MD

Mailing Address 10 Keyes Ct

City

East Greenwich

State

RI

Zip Code

02818-1450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2016

Transaction ID : C3282306

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jacqueline Anne Bello

Mailing Address 115 Central Park W 21D

City

NY

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montefiore

Occupation

Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2016

Transaction ID : C3285399

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. William R Benedetto JR

Mailing Address 390 Ponderosa Ln

City

Kalispell

State

MT

Zip Code

59901-6835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : C3276881

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1750.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Harold F Bennett

Mailing Address 928 University Bay Dr

City State Zip Code
 Madison WI 53705-2249

FEC ID number of contributing federal political committee.

C

Name of Employer
 Madison Radiologists, SC

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : C3283201

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stuart Bentley-Hibbert MD

Mailing Address 4 Chateau Ridge Dr

City State Zip Code
 Greenwich CT 06831-2940

FEC ID number of contributing federal political committee.

C

Name of Employer
 Columbia University Medical Center

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : C3295547

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kenneth G Berkenstock

Mailing Address Lancaster Radiology Associates
 PO Box 3555

City State Zip Code
 Lancaster PA 17604-3555

FEC ID number of contributing federal political committee.

C

Name of Employer
 Lancaster Radiology Associates

Occupation
 Radiation Oncologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016

Transaction ID : C3279772

Amount of Each Receipt this Period

84.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

5584.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Timothy Andrew Bernauer

Mailing Address 13 Pintail Pl

City

Appleton

State

WI

Zip Code

54913-8068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

03 / 18 / 2016

Transaction ID : C3278701

Amount of Each Receipt this Period

210.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Timothy Andrew Bernauer

Mailing Address 13 Pintail Pl

City

Appleton

State

WI

Zip Code

54913-8068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

03 / 28 / 2016

Transaction ID : C3292152

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Albert L Blumberg

Mailing Address 8 Jenny Lane

City

Baltimore

State

MD

Zip Code

21201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greater Baltimore Medical Center

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 22 / 2016

Transaction ID : C3282039

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1510.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Gregg A Bogost

Mailing Address 6203 S Highlands Ave

City

Madison

State

WI

Zip Code

53705-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3283205

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Christopher BoolsMailing Address Catawba Radiological Assoc
18 13th Ave NE

City

Hickory

State

NC

Zip Code

28601-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3295528

Amount of Each Receipt this Period

230.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Edward J Borman

Mailing Address 3736 Cardinal Point Trl

City

Verona

State

WI

Zip Code

53593-8150

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3278601

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

730.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert Bour MD

Mailing Address 2982 Waubesa Ave

City

Madison

State

WI

Zip Code

53711-5965

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2016

Transaction ID : C3274939

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Charles W Bowkley MDMailing Address Casper Medical Imaging
419 S Washington St

City

Casper

State

WY

Zip Code

82601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Casper Medical Imaging

Occupation

Interventional Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

Transaction ID : C3282293

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jerrold Lee Boxerman

Mailing Address 24 Eisenhower Dr

City

Sharon

State

MA

Zip Code

02067-3214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2016

Transaction ID : C3282307

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 103

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jan Hans Brekke

Mailing Address 4117 N Windover Ct

City

Appleton

State

WI

Zip Code

54913-6321

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Radiologists Ltd

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : C3292153

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lynn S Broderick

Mailing Address 7710 Welton Dr

City

Madison

State

WI

Zip Code

53719-3026

FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Madison

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2016

Transaction ID : C3274914

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jeffrey M Brody

Mailing Address 7 Ronald Road

City

Barrington

State

RI

Zip Code

02806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2016

Transaction ID : C3282308

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1550.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. DeNaye D Brown

Mailing Address 8315 Quarry Manor Terrace

City State Zip Code
 Bethesda MD 20817

FEC ID number of contributing federal political committee.

C

Name of Employer

Advanced Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 04 2016

Transaction ID : C3270149

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Matthew E Brown

Mailing Address 6941 Lehigh Ct

City State Zip Code
 Allentown PA 18106-9540

FEC ID number of contributing federal political committee.

C

Name of Employer

Medical Imaging of Lehigh Valley

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 19 2016

Transaction ID : C3280848

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Hunter Brown MD

Mailing Address 1524 Brookgreen Dr

City State Zip Code
 Myrtle Beach SC 29577-5870

FEC ID number of contributing federal political committee.

C

Name of Employer

Carolina Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 21 2016

Transaction ID : C3280889

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 103
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert G Brucker

Mailing Address 741 W. Front St

City	State	Zip Code
Appleton	WI	54914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Assoc of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	28	/	2016

Transaction ID : C3292154

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cenon Michael Buencamino MD

Mailing Address 2802 Colgate Rd

City	State	Zip Code
Madison	WI	53705-2237

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rochester General Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	23	/	2016

Transaction ID : C3283204

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Larry J Burr

Mailing Address 2601 Deer Lane Rd

City	State	Zip Code
Marion	IA	52302-9304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	03	/	2016

Transaction ID : C3282414

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

800.00

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

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

FOR LINE NUMBER: PAGE 18 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David F Butler

Mailing Address 19 Dartford Ave

City

Saint Louis

State

MO

Zip Code

63105-3046

FEC ID number of contributing
federal political committee.

C

Name of Employer

David Butler, MD LLC

Occupation

Radiation Oncologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2016

Transaction ID : C3286259

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kathy Byun MD

Mailing Address 5236 Rockport Lndg

City

Suffolk

State

VA

Zip Code

23435-3518

FEC ID number of contributing
federal political committee.

C

Name of Employer

New England Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3292434

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Nicholas Cade Cantrell MD

Mailing Address PO Box 9110

City

Kalispell

State

MT

Zip Code

59904-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : C3276887

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Timothy Joseph Carmody

Mailing Address Healthcare Solutions PLC
14162 Willow Dr

City State Zip Code
Clive IA 50325-8318

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Care Solutions

Occupation

Interventional Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : C3283131

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John A Cassese

Mailing Address 200 Boulder Way

City State Zip Code
East Greenwich RI 02818-5101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3282309

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Hugh B Cecil

Mailing Address Northwest Imaging
PO Box 9110

City State Zip Code
Kalispell MT 59904-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : C3276882

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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

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

FOR LINE NUMBER: PAGE 20 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Joseph George Cernigliaro

Mailing Address 8206 Ashworth Ct

City

Jacksonville

State

FL

Zip Code

32256-3637

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3287522

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kevin Jeffrey Chang MD

Mailing Address 73 Norwood St

City

Sharon

State

MA

Zip Code

02067-1262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3282310

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Samuel S Charles MD

Mailing Address 3480 John Muir Dr

City

Middleton

State

WI

Zip Code

53562-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : C3273075

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Peter Joseph Chase MD

Mailing Address 2846 Aleo Ct

City
FitchburgState
WIZip Code
53711-5008FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Health

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	6

Transaction ID : C3272973

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Timothy S Chen

Mailing Address 3211 E Northshore Blvd Apt 159

City

Appleton

State

WI

Zip Code

54915-5666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of CA, Davis, Medical Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3			2	8		2	0	1

Transaction ID : C3292155

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Raja Sekhar Cheruvu

Mailing Address 165 Via Foresta Ln

City

Williamsville

State

NY

Zip Code

14221-1984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Windsong Radiology Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	6

Transaction ID : C3267950

Amount of Each Receipt this Period

62.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

612.50

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jason Chon MD

Mailing Address 4916 N Turnberry Dr

City

Appleton

State

WI

Zip Code

54913-8680

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : C3292156

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pedro Collazo-Ornes

Mailing Address PO Box 9024255

City

San Juan

State

PR

Zip Code

00902-4255

FEC ID number of contributing
federal political committee.

C

Name of Employer

SP RADIOLOGY, PSC

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2016

Transaction ID : C3278702

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. W Shawn Conwell MD

Mailing Address 293 Piney Bluff Rd

City

Rembert

State

SC

Zip Code

29128-9630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pitts Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : C3273153

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

2900.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John Cronan

Mailing Address 6 Atlantic Crossing

City State Zip Code
 Barrington RI 02806

FEC ID number of contributing federal political committee.

C

Name of Employer

RIMI

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 22 / 2016

Transaction ID : C3282303

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Frederick W Cubin MD

Mailing Address 1800 Elkhorn Valley Dr

City State Zip Code
 Casper WY 82609-4634

FEC ID number of contributing federal political committee.

C

Name of Employer

Casper Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : C3282289

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. George Littleton Cushing JR

Mailing Address Mount Auburn Hospital
 330 Mt Auburn St

City State Zip Code
 Cambridge MA 02138

FEC ID number of contributing federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : C3290935

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1300.00

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Diego Davila

Mailing Address 330 Mount Auburn St

City State Zip Code
 Cambridge MA 02138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : C3290939

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Douglas Jackson Davis

Mailing Address 7313 Farmington Way

City State Zip Code
 Madison WI 53717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 23 / 2016

Transaction ID : C3283206

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lawrence M Davis

Mailing Address 5 Veritas Way

City State Zip Code
 Barrington RI 02806-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 22 / 2016

Transaction ID : C3282311

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

900.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Vincent A DeCesarisMailing Address Radiology Associates Inc
38 Hamlet Ave

City	State	Zip Code
Woonsocket	RI	02895-4495

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291075

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ronald Jay Dolin MD

Mailing Address 6732 Ramsey Rd

City	State	Zip Code
Middleton	WI	53562-5122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3283207

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Linda L Donegan

Mailing Address 125 Juniper Dr

City	State	Zip Code
East Greenwich	RI	02818-1371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2016

Transaction ID : C3282312

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

900.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John F Donnal

Mailing Address 305 brooke ave
#305

City State Zip Code
Norfolk VA 23510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3292429

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gregory Joseph Dubel

Mailing Address Brown Univ-Rhode Island Hosp
593 Eddy St

City State Zip Code
Providence RI 02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3282313

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Damian E Dupuy

Mailing Address Rhode Island Hospital
593 Eddy St

City State Zip Code
Providence RI 02903-4970

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3282314

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Audrey Duva-Frissora

Mailing Address PO Box 183

City

Hamilton

State

MA

Zip Code

01936-0183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Radiology

Occupation

Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

Transaction ID : C3290940

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Matthew D Dyson MD

Mailing Address 406 6th St NW

City

Hickory

State

NC

Zip Code

28601-3502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	17	/	2016

Transaction ID : C3295529

Amount of Each Receipt this Period

230.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anthony Eclavea

Mailing Address 1324 Fox River Dr

City

De Pere

State

WI

Zip Code

54115-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tripler Army Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	28	/	2016

Transaction ID : C3292157

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

930.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Dina F Elgohary MD

Mailing Address 5109 Bayport Lndg

City
SuffolkState
VAZip Code
23435-1359FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Rad

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3292443

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paul H Ellenbogen

Mailing Address 4240 Prescott Ave Apt 7E

City
DallasState
TXZip Code
75219-2392FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwest Imaging & Interven specialis

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	16	/	2016

Transaction ID : C3276797

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nancy A EllerbroekMailing Address Valley Radiotherapy Assoc
1500 Rosecrans Ave Ste 400City
Manhattan BeachState
CAZip Code
90266-3754FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Radiology Associates

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3292289

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

883.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Anders G EngdahlMailing Address Northwest Imaging
PO Box 9110

City	State	Zip Code
Kalispell	MT	59904-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : C3276883

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Peter Thomas Evangelista

Mailing Address 24 Kayla Ricci Way

City	State	Zip Code
Saunderstown	RI	02874-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2016

Transaction ID : C3282315

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen L Farris MD

Mailing Address 3996 2nd Street Dr NW

City	State	Zip Code
Hickory	NC	28601-8092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3295530

Amount of Each Receipt this Period

230.75

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

980.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Michael John FlahertyMailing Address Casper Medical Imaging
419 S Washington St Ste 101

City	State	Zip Code
Casper	WY	82609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Camelot Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

Transaction ID : C3282291

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jonathan Flug MD, MBA

Mailing Address 1490 Delgany St Apt 1027

City	State	Zip Code
Denver	CO	80202-6616

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Colorado

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3282242

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jonathan Flug MD, MBA

Mailing Address 1490 Delgany St Apt 1027

City	State	Zip Code
Denver	CO	80202-6616

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Colorado

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3284174

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

595.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Cassandra Sue FoensMailing Address Covenant Cancer Treatment Ctr
200 E Ridgeway Ave

City	State	Zip Code
Waterloo	IA	50702-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clinical Radiologists PC

Occupation

Radiation Oncologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : C3284955

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Nicholas Frankel

Mailing Address PO Box 9470

City	State	Zip Code
Hickory	NC	28603-9470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3295531

Amount of Each Receipt this Period

230.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eric Brian Friedberg

Mailing Address 2000 Tavistock Ct

City	State	Zip Code
Johns Creek	GA	30022-8079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory University

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

Transaction ID : C3265644

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

2830.75

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Richard G Friedman

Mailing Address PO Box 9110

City

Kalispell

State

MT

Zip Code

59904-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 10 / 2016

Transaction ID : C3276884

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Keyvan Gharabeighlou

Mailing Address 224 E Wentworth Ln

City

Appleton

State

WI

Zip Code

54913-8685

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Cleveland Clinic Foundation

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 28 / 2016

Transaction ID : C3292159

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Robert Charles Gibbs

Mailing Address 611 Quail Creek Rd

City

Parsons

State

KS

Zip Code

67357-2257

FEC ID number of contributing
federal political committee.

C

Name of Employer

Precision Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 27 / 2016

Transaction ID : C3284206

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 103
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Holly Cresho Gil

Mailing Address 17 Adams Point Rd

City

Barrington

State

RI

Zip Code

02806-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2016

Transaction ID : C3282316

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Maryellyn Gilfeather

Mailing Address 54 E Churchill Dr

City

Salt Lake City

State

UT

Zip Code

84103-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer

Utah imaging associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2016

Transaction ID : C3276907

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Maryellyn Gilfeather

Mailing Address 54 E Churchill Dr

City

Salt Lake City

State

UT

Zip Code

84103-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer

Utah imaging associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3286278

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

550.00

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

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

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Richard Lawrence Gold

Mailing Address 200 Exchange St Unit 1216

City

Providence

State

RI

Zip Code

02903-2624

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 22 / 2016

Transaction ID : C3282317

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eric Todd Goodman

Mailing Address 8933 Activity Rd

City

San Diego

State

CA

Zip Code

92126-4427

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sharp Rees-Stealy Medical Group

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 21 / 2016

Transaction ID : C3280911

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jeffrey Carl Gore

Mailing Address 2320 Cromwell Cir

City

Davenport

State

IA

Zip Code

52807-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Group, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 03 / 2016

Transaction ID : C3282457

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David Justin Grand MD

Mailing Address 21 Westford Rd

City

Providence

State

RI

Zip Code

02906-4943

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	6

Transaction ID : C3291044

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. B Frank Gray III

Mailing Address 178 E Bowman Dr

City

Kalispell

State

MT

Zip Code

59901-6817

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	6

Transaction ID : C3276885

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Edward Douglas Green MD

Mailing Address 106 Windsong Cove

City

Ridgeland

State

MS

Zip Code

39157-8736

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Mississippi Medical Cent

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	6

Transaction ID : C3270887

Amount of Each Receipt this Period

85.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

835.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Christopher G Guglielmo MD

Mailing Address 1835 Winnebago St Unit 204

City

Madison

State

WI

Zip Code

53704-5565

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3277164

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David K Gunasti

Mailing Address 4 Paddock Dr

City

Lincoln

State

RI

Zip Code

02865-4942

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291076

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard A Haas

Mailing Address 405 Seaside Dr

City

Jamestown

State

RI

Zip Code

02835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291045

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 37 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Harry K Hajedemos

Mailing Address 3 Roberts St

City

West Haven

State

CT

Zip Code

06516-7239

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midstate Radiology Associates, LLC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2016

Transaction ID : C3273127

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Glenn M Hammer

Mailing Address 2916 Old Orchard Rd NE

City

Cedar Rapids

State

IA

Zip Code

52402-6802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa, PLC

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : C3282416

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Steven D Harlan

Mailing Address CRA

18 13th Ave NE, Box 308

City

Hickory

State

NC

Zip Code

28601-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : C3295532

Amount of Each Receipt this Period

230.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1480.75

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Keith William Harper

Mailing Address 602 46th Ave Dr NE

City

Hickory

State

NC

Zip Code

28601-7318

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

03 / 17 / 2016

Transaction ID : C3295533

Amount of Each Receipt this Period

230.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anton N Hasso

Mailing Address 15 Schubert Court

City

Irvine

State

CA

Zip Code

92617

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of California

Occupation

Medical Doctor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

03 / 24 / 2016

Transaction ID : C3283141

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. C Matthew Hawkins MD

Mailing Address 130 Woodlawn Ave

City

Decatur

State

GA

Zip Code

30030-2309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory University

Occupation

Pediatric Interventional Radiologist

Receipt For: 2014

☐ Primary

☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

03 / 25 / 2016

Transaction ID : C3283505

Amount of Each Receipt this Period

210.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

2940.75

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

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

FOR LINE NUMBER: PAGE 39 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Terrance T Healey MD

Mailing Address 88 Amy Dr

City

Cranston

State

RI

Zip Code

02921-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291046

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brian Alan Hebl

Mailing Address 59 Brentwood Ln

City

Appleton

State

WI

Zip Code

54915-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Elizabeth Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : C3292160

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Alejandro Marcelo Heffess

Mailing Address 75 Centre Street

City

Brookline

State

MA

Zip Code

02446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3290936

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

950.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Laura S Hemann

Mailing Address 6815 Spring Grove Ct NE

City

Cedar Rapids

State

IA

Zip Code

52411-7652

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	6

Transaction ID : C3282418

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

B. Robert D Heninger MD

Mailing Address 1211 47th Ave SW

City

Minot

State

ND

Zip Code

58701-8315

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Iowa

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	6

Transaction ID : C3283506

Amount of Each Receipt this Period

125.00



Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Troy Henson

Mailing Address PO Box 9110

City

Kalispell

State

MT

Zip Code

59904-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	6

Transaction ID : C3276888

Amount of Each Receipt this Period

500.00



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

875.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Thaddeus W Herliczek MD

Mailing Address 14 Winterberry Ln

City

Westport

State

MA

Zip Code

02790-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	6		

Transaction ID : C3291047

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Patrick E Hill

Mailing Address 423 Wynterhall Dr

City

Charleston

State

WV

Zip Code

25309-8425

FEC ID number of contributing
federal political committee.

C

Name of Employer

Loma Linda Univ Medical Center

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.73

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	1	6		

Transaction ID : C3290848

Amount of Each Receipt this Period

272.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Samuel Crawford Hill IV

Mailing Address 1860 Houndsfield Dr

City

Florence

State

SC

Zip Code

29506-8552

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRA

Occupation

Interventional Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	6		

Transaction ID : C3280849

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1022.73

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Mary M Hillstrom

Mailing Address 5 Whitney Dr

 City
 Lincoln

 State
 RI

 Zip Code
 02865-4639

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	6

Transaction ID : C3291048

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lee Eric Hoagland MD

Mailing Address 5922 Cypress Pointe Dr

 City
 Newburgh

 State
 IN

 Zip Code
 47630-9844

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Evansville Radiology, PC

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	6

Transaction ID : C3270888

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Daniel Joseph Hoefer

Mailing Address 5729 Vineyard Rd

 City
 Fitchburg

 State
 WI

 Zip Code
 53575-1939

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	6

Transaction ID : C3283202

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

585.00

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

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Adrian W Holtzman MD

Mailing Address 945 18th Avenue Ct NW

City State Zip Code
Hickory NC 28601-1268

FEC ID number of contributing
federal political committee.

C

Name of Employer
Catawba Radiological Associates

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : C3295534

Amount of Each Receipt this Period

230.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephanie P Holz MD

Mailing Address 12963 Blalock Dr

City State Zip Code
Fishers IN 46037-7701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Indiana University Health Physicians R

Occupation
Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3286419

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Peter E Humphrey MD

Mailing Address 249 White Pine Rd

City State Zip Code
Kalispell MT 59901-6829

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Imaging

Occupation
Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : C3276889

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1730.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jason D Iannuccilli MD

Mailing Address 5 Cole Cir

City

East Greenwich

State

RI

Zip Code

02818-2444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291049

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Geoffrey S Ibbott

Mailing Address MD Anderson Cancer Ctr

1515 Holcombe Blvd Unit 94

City

Houston

State

TX

Zip Code

77030-4000

FEC ID number of contributing
federal political committee.

C

Name of Employer

UT MD Anderson Cancer Center

Occupation

Physicist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : C3276718

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nafisa Ibrahim MD

Mailing Address 41 Mall Rd

City

Burlington

State

MA

Zip Code

01805-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291077

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Diane Marie Icenogle-Leuschen

Mailing Address 105 Palo Alto

City

Boerne

State

TX

Zip Code

78006-5999

FEC ID number of contributing
federal political committee.

C

Name of Employer

Veteran's Administration

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : C3268294

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Robert Iglar

Mailing Address 3119 Sun Valley Ct

City

Appleton

State

WI

Zip Code

54911-1159

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : C3292161

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Todd Jacobs

Mailing Address 3818 11th Street PI NE

City

Hickory

State

NC

Zip Code

28601-8420

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3295535

Amount of Each Receipt this Period

230.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

780.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Bryan S Jay MD

Mailing Address 9 Harbour Rd

City
BarringtonState
RIZip Code
02806-4410FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291050

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mahesh Vaidya Jayaraman MD

Mailing Address 4 Kingsbury Ln

City
FoxboroState
MAZip Code
02035-3206FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291051

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John A Jerisha

Mailing Address 5846 Marsh View Ct

City
FitchburgState
WIZip Code
53711-5845FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Radiology Madison Wi

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : C3273114

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Eric Von Johnson MD

Mailing Address 4451 3rd Street Ln NW

City State Zip Code
Hickory NC 28601-9022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : C3295536

Amount of Each Receipt this Period

230.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Peter Anthony S Johnstone

Mailing Address 810 Taray de Avila

City State Zip Code
Tampa FL 33613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Moffitt Cancer Center

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3281021

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Austin L Jones DO

Mailing Address 241 NW 66th Rd

City State Zip Code
Clinton MO 64735-8917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Golden Valley Memorial Healthcare

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : C3274378

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

580.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. May Kassem MD

Mailing Address 302 Pearl St Unit 202

City

Providence

State

RI

Zip Code

02907-2277

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291078

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Neil Kennedy MD

Mailing Address 3468 John Muir Dr

City

Middleton

State

WI

Zip Code

53562-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, S.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3283200

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hanan Ibrahim KhalilMailing Address Rhode Island Medical Imaging Inc
20 Catamore Blvd

City

East Providence

State

RI

Zip Code

02914-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291052

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Leila Khorashadi MD

Mailing Address 26 Oakley Rd

City

Watertown

State

MA

Zip Code

02472-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates Inc.

Occupation

Individual

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

03 / 31 / 2016

Transaction ID : C3290941

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Erik J Kilgore

Mailing Address 2204 NE 140th St

City

Vancouver

State

WA

Zip Code

98686

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vancouver Radiologists

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 10 / 2016

Transaction ID : C3295548

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Newrhee Kim MD

Mailing Address 3774 Swoboda Rd

City

Verona

State

WI

Zip Code

53593-9123

FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Health

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 09 / 2016

Transaction ID : C3273148

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1900.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Yoonah Kim

Mailing Address 3305 Kline Dr.

City

Virginia Beach

State

VA

Zip Code

23452-6230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3292438

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amy Briana Kirby MD

Mailing Address 14708 Hollyhock Dr

City

Oklahoma City

State

OK

Zip Code

73142-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eagle Eye Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2016

Transaction ID : C3266483

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Douglas R Kitchin MD

Mailing Address 2550 University Ave Apt 301

City

Madison

State

WI

Zip Code

53705-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : C3283208

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1335.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Gregory Joseph Knudson

Mailing Address 18 Brentwood Ln

City

Appleton

State

WI

Zip Code

54915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : C3292162

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Susan Lyn Koelliker

Mailing Address 5 Lighthouse Ln

City

Barrington

State

RI

Zip Code

02806-2829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291053

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Laura Kohl MD

Mailing Address 2900 W Oklahoma Ave

City

Milwaukee

State

WI

Zip Code

53215-4330

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : C3283209

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

800.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Paul Kramer

Mailing Address 2147 Meadow Ridge Dr

City

Lancaster

State

PA

Zip Code

17601-5762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : C3279779

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Adam Thomas Krompecher MD

Mailing Address 313 Mount View Dr

City

Charleston

State

WV

Zip Code

25314-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kanawha Valley Radiology

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3290849

Amount of Each Receipt this Period

272.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard L Kundel

Mailing Address PO Box 10112

City

Cedar Rapids

State

IA

Zip Code

52410-0112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : C3282420

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

622.73

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David P Lawrence

Mailing Address 925 Grandview Blvd

City

Lancaster

State

PA

Zip Code

17601-5105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : C3278626

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Elizabeth Lazarus

Mailing Address 9 Half Mile Rd

City

Barrington

State

RI

Zip Code

02806-4113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291055

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Paul Albert Leslie

Mailing Address 260 Eshelman Rd

City

Lancaster

State

PA

Zip Code

17601-5645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : C3279780

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Scott M Levine

Mailing Address Rhode Island Hospital
593 Eddy St

City State Zip Code
Providence RI 02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291056

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Elaine Renee Lewis

Mailing Address Reading Hospital & Medical Ctr
PO Box 16052

City State Zip Code
Reading PA 19612-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : C3276802

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Madelene C Lewis MD

Mailing Address 105 N Shelmore Blvd

City State Zip Code
Mount Pleasant SC 29464-2698

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical University of South Carolina

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3282087

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

2250.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Lawrence A Liebscher

Mailing Address 2615 W. 4th St.

City

Waterloo

State

IA

Zip Code

50701-4050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedar Valley Medical Specialists, PC

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2016

Transaction ID : C3282002

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ana P Lourenco MD

Mailing Address 7 Weston Ave

City

Foxboro

State

MA

Zip Code

02035-1863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291057

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dallas W Lovelace III

Mailing Address 2019 BENJAMIN Blvd

City

Orangeburg

State

SC

Zip Code

29118-1442

FEC ID number of contributing
federal political committee.

C

Name of Employer

RMC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : C3282471

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

2250.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Stephanus Macrander

Mailing Address W 5517 Firelane 12

City

Menasha

State

WI

Zip Code

54952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : C3292163

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Martha B Mainiero

Mailing Address Rhode Island Hospital
593 Eddy St

City

Providence

State

RI

Zip Code

02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291058

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. A Jane Maloof

Mailing Address 1810 loudon heights rd

City

Charleston

State

WV

Zip Code

25314

FEC ID number of contributing
federal political committee.

C

Name of Employer

KVR, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3290850

Amount of Each Receipt this Period

272.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

822.73

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 103

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Edward Bernard Marianacci

Mailing Address 177 Walnut St

City

Newton

State

MA

Zip Code

02460-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

Transaction ID : C3290942

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Patricia Martin

Mailing Address 1759 Creek View Dr

City

Fogelsville

State

PA

Zip Code

18051-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Imaging of :high Valley, PC

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	6

Transaction ID : C3284954

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Alan D MassengillMailing Address Catawba Radiological Assoc
PO Box 308

City

Hickory

State

NC

Zip Code

28603-0308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	1	6

Transaction ID : C3295537

Amount of Each Receipt this Period

230.75

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

880.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Joshua M McDonald

Mailing Address 2448 Dempster Dr

City	State	Zip Code
Coralville	IA	52241-9715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Consultants of Iowa

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	22	/	2016

Transaction ID : C3282012

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Patrick John McDonnell

Mailing Address 379 Sheepherder Hill Rd

City	State	Zip Code
Kalispell	MT	59901-7160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2016

Transaction ID : C3276886

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Joseph C McGinley MD

Mailing Address 5910 S Cedar St

City	State	Zip Code
Casper	WY	82601-6244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Casper Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	01	/	2016

Transaction ID : C3282294

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Geraldine B McGinty

Mailing Address 131 Avenue B Apt 3C

City
New York

State
NY

Zip Code
10009-5029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montefiore Imaging Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : C3270865

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Charles W McGuire

Mailing Address 1937 Saddle Creek Court

City
Wichita

State
KS

Zip Code
67206-4401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wichita Radiological Group

Occupation

Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : C3274380

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Charles W McGuire

Mailing Address 1937 Saddle Creek Court

City
Wichita

State
KS

Zip Code
67206-4401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wichita Radiological Group

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : C3283188

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Ryan A McTaggart

Mailing Address 21 Meadowbrook Dr

City

Barrington

State

RI

Zip Code

02806

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Radiology

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2016

Transaction ID : C3291079

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Venkata N Meduri

Mailing Address 311 N Hancock Unit 335

City

Madison

State

WI

Zip Code

53703-4281

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Transaction ID : C3276580

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ryan J Meiners MD

Mailing Address 661 Fairway Lane

City

Frankfort

State

IL

Zip Code

60423-9516

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIRA

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2016

Transaction ID : C3280877

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Olga Mengin MD

Mailing Address 150 Albert Ave

City

Cranston

State

RI

Zip Code

02905

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2016

Transaction ID : C3291080

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eric M Meredith MD

Mailing Address 3636 8th Street PI NW

City

Hickory

State

NC

Zip Code

28601-8086

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : C3295538

Amount of Each Receipt this Period

230.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patricia J Mergo

Mailing Address 400 N Harbor Lights Dr

City

Ponte Vedra Beach

State

FL

Zip Code

32081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2016

Transaction ID : C3295546

Amount of Each Receipt this Period

85.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

565.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Steven L Miller

Mailing Address 23 Moffat Rd

City

Waban

State

MA

Zip Code

02468-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Newton Wellesley Hosp

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2016

Transaction ID : C3270895

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Louise Dennis Milner MD

Mailing Address 50 Lake Edge Dr

City

Euclid

State

OH

Zip Code

44123-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists, SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : C3283211

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Renee M Moadel

Mailing Address 17 Ridge Drive East

City

Great Neck

State

NY

Zip Code

11021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montefiore

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2016

Transaction ID : C3285404

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Brian J Moffit

Mailing Address PO Box 2022

City State Zip Code
Rancho Santa Fe CA 92067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Medical Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2016

Transaction ID : C3292287

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Demetrius Konstantine Morros

Mailing Address 7418 Ridgcrest Court Road

City State Zip Code
Birmingham AL 35242-0525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Birmingham Radiological Group P.C.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 23 / 2016

Transaction ID : C3282243

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jonathan S Movson

Mailing Address 381 Wayland Ave

City State Zip Code
Providence RI 02906-4667

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rhode Island Medical Imaging

Occupation
Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291059

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

583.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Brian L Murphy

Mailing Address 81 Mathewson Rd

City
BarringtonState
RIZip Code
02806-4429FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291060

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William A Murphy JRMailing Address UT MD Anderson Cancer Ctr
1515 Holcombe Blvd Unit 1475City
HoustonState
TXZip Code
77030-4009FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Texas

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3292288

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David Paul Neumann

Mailing Address 20 Pardons Wood Ln

City
East GreenwichState
RIZip Code
02818-1446FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291061

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Arthur W NoelMailing Address Rhode Island Medical Imaging Inc
20 Catamore Blvd

City	State	Zip Code
East Providence	RI	02914-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291062

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard B Noto

Mailing Address 1 Ferncliffe Rd

City	State	Zip Code
Barrington	RI	02806-4017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291063

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Daniel J O'SheaMailing Address W Reading Radiology Assoc
301 S 7th Ave Ste 135

City	State	Zip Code
Reading	PA	19612-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

Transaction ID : C3280915

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Olufolajimi O Obembe MD

Mailing Address 5209 Fox Chase Dr

City

Lawrence

State

KS

Zip Code

66049-4730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Nuclear Medicine

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : C3284212

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John O Olsen

Mailing Address 4645 Stonehaven Dr

City

Columbus

State

OH

Zip Code

43220-2855

FEC ID number of contributing
federal political committee.

C

Name of Employer

retired

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2016

Transaction ID : C3266769

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kimberlee Horton Overdeck

Mailing Address 7013 Benjamin St

City

McLean

State

VA

Zip Code

22101-1550

FEC ID number of contributing
federal political committee.

C

Name of Employer

GWU Medical Faculty Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2016

Transaction ID : C3276819

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. James W Owen III

Mailing Address 5300 SW Mission Ave

City

Topeka

State

KS

Zip Code

66610-9405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Nuclear Medicine, LLC

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3287524

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bora Ozel

Mailing Address 1909 Adams St

City

Madison

State

WI

Zip Code

53711-2145

FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Radiology Madison WI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2016

Transaction ID : C3272968

Amount of Each Receipt this Period

365.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Fred David Panzer

Mailing Address W6375 Firelane 8

City

Menasha

State

WI

Zip Code

54952-9746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : C3292164

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1165.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John K Park

Mailing Address 360 W Washington Ave Unit P102

City State Zip Code
 Madison WI 53703-2770

FEC ID number of contributing federal political committee.

C

Name of Employer

Univ of Connecticut Health Ctr

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 18 2016

Transaction ID : C3280796

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Neetin C Patel

Mailing Address 4221 Maryhill Dr

City State Zip Code
 Cedar City IA 50613-5786

FEC ID number of contributing federal political committee.

C

Name of Employer

Self Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 24 2016

Transaction ID : C3283136

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sean David Paulsen MD

Mailing Address 548 Areva Rd Apt 68-8

City State Zip Code
 Roosevelt UT 84066-2221

FEC ID number of contributing federal political committee.

C

Name of Employer

Uintah Basin Medical Center

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 04 2016

Transaction ID : C3269394

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. James Alfred Pellegrini MD

Mailing Address 527 E Wisconsin Ave

City

Neenah

State

WI

Zip Code

54956-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	6

Transaction ID : C3292165

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Albert Pezzullo

Mailing Address 175 Downing Dr

City

Johnston

State

RI

Zip Code

02919-6441

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	6

Transaction ID : C3291064

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marcelle L PiccoelloMailing Address Rhode Island Medical Imaging
PO Box 14717

City

East Providence

State

RI

Zip Code

02914-0717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	6

Transaction ID : C3291065

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Benjamin J Pomerantz MD

Mailing Address 342 Plantation Dr

City

Kalispell

State

MT

Zip Code

59901-6781

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : C3276890

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Curtis T Poor

Mailing Address 2415 Eagle Cir

City

Bettendorf

State

IA

Zip Code

52722-6202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Group PC SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : C3282462

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kent W Powley

Mailing Address 1431 Seymour Ct

City

Neenah

State

WI

Zip Code

54956-4975

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

Transaction ID : C3292166

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

900.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 71 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Ethan A Prince MD

Mailing Address 172 Wheeler Ave

City

Cranston

State

RI

Zip Code

02905-2710

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Interventional Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291066

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tyler Marshall Prout

Mailing Address 5853 Persimmon Dr

City

Fitchburg

State

WI

Zip Code

53711-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Health

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2016

Transaction ID : C3270928

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Robert S Pyatt JR

Mailing Address 1391 Hearthside Dr

City

Chambersburg

State

PA

Zip Code

17202-3389

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chambersburg Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : C3283645

Amount of Each Receipt this Period

365.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

865.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Kent S Quinn

Mailing Address 1713 NW 102nd St

City State Zip Code
Clive IA 50325-6725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self Employed

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : C3283135

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Robert J Rapoport

Mailing Address 17 Wedgewood Dr

City State Zip Code
Delmar NY 12054-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Albany Advanced Imaging

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : C3270866

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James Vincent Rawson

Mailing Address 718 Marsh Point Rd

City State Zip Code
Evans GA 30809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Medical College of Georgia

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2016

Transaction ID : C3270896

Amount of Each Receipt this Period

83.34

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1583.34

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

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

FOR LINE NUMBER: PAGE 73 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Susan L Rebsamen

Mailing Address Univ of Wisconsin Radiology
 600 Highland Ave E1/315

City State Zip Code
 Madison WI 53792-3252

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 UW Medical School, Madison, WI

Occupation
 Diagnostic Radiologist

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : C3286254

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ralph Lee Reichle

Mailing Address 259 Independence Rd

City State Zip Code
 Concord MA 01742-2655

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Schatzki Associates, Inc.

Occupation
 Diagnostic Radiologist

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : C3290937

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Mark S Ridlen

Mailing Address 50 Park Row W Apt 818

City State Zip Code
 Providence RI 02903-1151

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Rhode Island Medical Imaging

Occupation
 Diagnostic Radiologist

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 26 / 2016

Transaction ID : C3291067

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

900.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 103

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Robert J RienzoMailing Address Medical Imaging at Lehigh Valley
1200 S Cedar Crest Blvd

City	State	Zip Code
Allentown	PA	18103-6248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Imaging of Lehigh Valley

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3278442

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeffrey M Rogg

Mailing Address 60 Pheasant Dr

City	State	Zip Code
East Greenwich	RI	02818-1348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291068

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Philip Arthur Rogoff

Mailing Address 58 Rogers Rd

City	State	Zip Code
Carlisle	MA	01741-1865

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates

Occupation

Interventional Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3290934

Amount of Each Receipt this Period

400.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 75 OF 103
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Donald F Romanelli

Mailing Address 31 Smith Pl

City	State	Zip Code
Cambridge	MA	02138-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3290943

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ronald Ruff

Mailing Address 3198 Chula Vista Cir

City	State	Zip Code
Salt Lake City	UT	84121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mountain Medical

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3282276

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jennifer Lee Rush

Mailing Address 9573 25th Bay St

City	State	Zip Code
Norfolk	VA	23518-1801

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3292431

Amount of Each Receipt this Period

1150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1800.00

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

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

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

FOR LINE NUMBER: PAGE 76 OF 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Michael L Sachenik

Mailing Address 1 Vireo Dr

City

Wyomissing

State

PA

Zip Code

19610-2829

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2016

Transaction ID : C3284988

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Arthur D Sandy

Mailing Address 2136 Peacock Lane

City

Birmingham

State

AL

Zip Code

35223-1708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Imaging Assoc of AL

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2016

Transaction ID : C3284204

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jacques Pierre Sasson

Mailing Address 228 Wolcott Rd

City

Chestnut Hill

State

MA

Zip Code

02467-3170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3290938

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Nicholas John Satovick

Mailing Address 320 Sunnyview Lane

City

Kalispell

State

MT

Zip Code

59901

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Imaging

Occupation

Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : C3276891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. mary H scanlon

Mailing Address 532 college ave

City

haverford

State

PA

Zip Code

19041-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer

PENN

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : C3283160

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Albert A Scappaticci MD

Mailing Address 30 Berkshire Ave

City

Sharon

State

MA

Zip Code

02067-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer

RIMI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291081

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Charles D Scheil

Mailing Address 281 44th Avenue Cir NW

City

Hickory

State

NC

Zip Code

28601-9016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

230.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : C3295539

Amount of Each Receipt this Period

230.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeremy D Schiller

Mailing Address 14 Broad St

City

Salem

State

MA

Zip Code

01970-3144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3290944

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Kurt A Schoppe

Mailing Address 3212 Heritage Cv

City

Grapevine

State

TX

Zip Code

76051-1104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of North Texas

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2016

Transaction ID : C3280916

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1630.74

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 103
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Donald James Schumacher

Mailing Address 347 Rice Ln

City

Whitefish

State

MT

Zip Code

59937-8558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : C3276892

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shawyon Shadman MD

Mailing Address 1816 Adams St

City

Madison

State

WI

Zip Code

53711-2144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Diagnostic Radiologist

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3283212

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sean Kevin Shannahan

Mailing Address 4018 Manitou Way

City

Madison

State

WI

Zip Code

53711-3012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Wisconsin Hosp & Clinic

Occupation

Diagnostic Radiologist

Receipt For: 2016



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : C3283213

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 103

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Michael J Shortsleeve

Mailing Address 4 Granville Rd

City
LincolnState
MAZip Code
01773-3106FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : C3290933

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Rebecca Tauber Sivarajah MD

Mailing Address 2 Burgundy Dr

City
MohntonState
PAZip Code
19540-8904FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2016

Transaction ID : C3286257

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael L Sloan

Mailing Address PO Box 1646

City
CheyenneState
WYZip Code
82003-1646FEC ID number of contributing
federal political committee.

C

Name of Employer

Casper Medical Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

Transaction ID : C3295549

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Geoffrey Giles Smith

Mailing Address Casper Medical Imaging

419 S Washington St Ste 101

City

Casper

State

WY

Zip Code

82601-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer

Casper Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2016

Transaction ID : C3282292

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gregory Michael Soares

Mailing Address Rhode Island Hospital

593 Eddy St

City

Providence

State

RI

Zip Code

02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

RI Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291069

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Julie H Song

Mailing Address 9 Lu Stubbs Ln

City

Sharon

State

MA

Zip Code

02067-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291070

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. John Edward Sowin

Mailing Address 66 Brentwood Ln

City

Appleton

State

WI

Zip Code

54915-7217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Applet

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	1	6

Transaction ID : C3292167

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Benjamin Zion Stallings II

Mailing Address 2100 Sahalea Ter

City

Silver Spring

State

MD

Zip Code

20905-3900

FEC ID number of contributing
federal political committee.

C

Name of Employer

DIA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	1	6

Transaction ID : C3270897

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Charles Stepherson

Mailing Address 832 Graffin Lane

City

Deerfield

State

WI

Zip Code

53531

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin

Occupation

Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	1	6

Transaction ID : C3286195

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

800.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Alan Howard Stolpen

Mailing Address Univ of Iowa Hosp and Clinics
200 Hawkins Dr

City State Zip Code
Iowa City IA 52242-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Iowa Hosp and Clinics

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2016

Transaction ID : C3284205

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Daniel F Sulser

Mailing Address 5280 Squaw Creek Rd

City State Zip Code
Casper WY 82604-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer

Casper Medical Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2016

Transaction ID : C3282296

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Susan Sung MD

Mailing Address 527 E Wisconsin Ave

City State Zip Code
Neenah WI 54956-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Appleton

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2016

Transaction ID : C3292168

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. David W Swenson MD

Mailing Address 66 Fairway Dr

City

Brooklyn

State

CT

Zip Code

06234-3315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	6

Transaction ID : C3291082

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Margaret M Szabunio

Mailing Address 317 Golf Club Dr

City

Nicholasville

State

KY

Zip Code

40356-6016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ. of KY

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	6

Transaction ID : C3267952

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Knox Randolph Tate

Mailing Address 809 8th Ave NW

City

Hickory

State

NC

Zip Code

28601-3548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catawba Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	1	6

Transaction ID : C3295540

Amount of Each Receipt this Period

231.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

731.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 85 OF 103

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Richard N Taxin

Mailing Address 5 Hilltop Rd

City

Rose Valley

State

PA

Zip Code

19086-6216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeast Radiology

Occupation

Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2016

Transaction ID : C3282271

Amount of Each Receipt this Period

520.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shawn DeWayne Teague

Mailing Address 11844 Tarver Ct

City

Fishers

State

IN

Zip Code

46037-8277

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Univ School of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2016

Transaction ID : C3295545

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Siew Koon Teoh

Mailing Address 196 E Emerson Rd

City

Lexington

State

MA

Zip Code

02420-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Schatzki Associates, Inc.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : C3290945

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1020.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 86 OF 103
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Francis Joseph Thornton

Mailing Address 3871 Caribou Rd

City

Verona

State

WI

Zip Code

53593-8664

FEC ID number of contributing
federal political committee.

C

Name of Employer

UW Radiology, Madison, WI

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2016

Transaction ID : C3270906

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Joshua G Tice MD

Mailing Address 118 Logan Ave

City

Wyomissing

State

PA

Zip Code

19610-2618

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2016

Transaction ID : C3274965

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Glenn A Tung

Mailing Address 12 Knife Shop Ln

City

Sharon

State

MA

Zip Code

02067-2274

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brown Univ Sch of Medicine

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291071

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 103

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Clement R VaughanMailing Address Northwest Imaging
PO Box 9110

City	State	Zip Code
Kalispell	MT	59904-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Imaging, P.C.

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : C3276893

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brent Joseph WagnerMailing Address Reading Hospital
6th Ave and Spruce St

City	State	Zip Code
Reading	PA	19612-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2016

Transaction ID : C3274414

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Tide WallachMailing Address Rhode Island Hospital
593 Eddy St

City	State	Zip Code
Providence	RI	02903-4970

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2016

Transaction ID : C3291072

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Simon Westacott

Mailing Address 1965 Glendower Dr

City

Lancaster

State

PA

Zip Code

17601-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : C3279785

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark D Wittry

Mailing Address 10525 Concord School Rd

City

Saint Louis

State

MO

Zip Code

63128-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer

West County Radiological Group, Inc.

Occupation

Cardiac Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	14	/	2016

Transaction ID : C3275023

Amount of Each Receipt this Period

83.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cathleen Ann Woomert

Mailing Address 81 Maple Ridge Rd

City

Millville

State

PA

Zip Code

17846-8933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Geisinger Clinic

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	30	/	2016

Transaction ID : C3286255

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5183.34

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Don Chan Yoo

Mailing Address 10 Wood Duck Ct

City

East Greenwich

State

RI

Zip Code

02818-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2016

Transaction ID : C3291073

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Beth Zigmund MD

Mailing Address 412 Spruce St

City

Haddonfield

State

NJ

Zip Code

08033-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Pennsylvania

Occupation

Diagnostic Radiologist

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2016

Transaction ID : C3280876

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

650.00

107858.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Bank of America - Hard

Mailing Address PO Box 27025

City
RichmondState
VAZip Code
23261-7025Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 31 2016
Transaction ID : D172399

Amount of Each Disbursement this Period

1638.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1638.49

1638.49

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. BLUE DOG POLITICAL ACTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address 6849 OLD DOMINION DRIVE
SUITE 222

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Category/
Type

Transaction ID : D172217

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Justin Grabelle for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address PO Box 187

City Brooksville State FL Zip Code 34605

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Category/
Type

Transaction ID : D172393

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. LEGPAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address 38 IVY ST., SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Category/
Type

Transaction ID : D172220

Amount of Each Disbursement this Period

5000.00

☐ Memo ItemOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

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

15000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. MAKING A RESPONSIBLE STAND FOR HOUSEHOLDS IN AMERICA (MARSHA PAC)

Mailing Address PO BOX 680063

City
FRANKLINState
TNZip Code
37068Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

Transaction ID : D172016

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NEW PAC

Mailing Address P.O. BOX 7480

City
VISALIAState
CAZip Code
93290Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

Transaction ID : D172018

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Prescription for a Stronger America

Mailing Address PO Box 341016

City
AustinState
TXZip Code
78734Purpose of Disbursement
Contribution to an Independent Expenditure Only PAC

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		03		2016

Transaction ID : D172394

Amount of Each Disbursement this Period

15000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

22500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. Friends of Raja for Congress

Mailing Address PO Box 681202

City
SchaumburgState
ILZip Code
60168Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172392

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR BEN

Mailing Address PO BOX 31129

City
SANTA FEState
NMZip Code
87594Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Ben Ray Lujan

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : D172222

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City
BOWLING GREENState
KYZip Code
42102Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Brett Guthrie

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172007

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

5500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. MATSUI FOR CONGRESS

Mailing Address PO BOX 1738

City	State	Zip Code
SACRAMENTO	CA	95812

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Doris MatsuiOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : D172221

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BUDDY CARTER FOR CONGRESS

Mailing Address 200 E ST JULIAN ST SUITE 603

City	State	Zip Code
SAVANNAH	GA	31401

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Earl L. CarterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172011

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JENKINS FOR CONGRESS

Mailing Address PO BOX 727

City	State	Zip Code
HUNTINGTON	WV	25711

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Evan JenkinsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172014

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City
LONG BRANCHState
NJZip Code
07740Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Frank Pallone Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : D172013

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UPTON FOR ALL OF US

Mailing Address P.O. BOX 490

City
ST. JOSEPHState
MIZip Code
49085Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Fred UptonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : D172017

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GENE GREEN CONGRESSIONAL CAMPAIGN

Mailing Address PO BOX 16128

City
HOUSTONState
TXZip Code
77222Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Gene GreenOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2016

Transaction ID : D172002

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. JACKIE SPEIER FOR CONGRESS

Mailing Address PO BOX 112

City	State	Zip Code
BURLINGAME	CA	94011

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Jackie Speier

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172012

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VOLUNTEERS FOR SHIMKUS

Mailing Address PO BOX 661

City	State	Zip Code
COLLINSVILLE	IL	62234

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. John Shimkus

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172020

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KAY GRANGER CAMPAIGN FUND

Mailing Address 715 JONES STREET, SUITE 101

City	State	Zip Code
FORT WORTH	TX	76102

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Kay Granger

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172003

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

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

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

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. BRADY FOR CONGRESS

Mailing Address PO BOX 8277

City	State	Zip Code
THE WOODLANDS	TX	77387

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Kevin BradyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172008

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO BOX 12667

City	State	Zip Code
BAKERSFIELD	CA	93389

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Kevin McCarthyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172010

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZELDIN FOR CONGRESS

Mailing Address 47 FLINTLOCK DRIVE

City	State	Zip Code
SHIRLEY	NY	11967

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Lee ZeldinOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : D172225

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. MARTHA ROBY FOR CONGRESS

Mailing Address PO BOX 195

City	State	Zip Code
MONTGOMERY	AL	36101

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Martha RobyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: AL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D171996

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SIMPSON FOR CONGRESS

Mailing Address 1487 PARKWAY DRIVE

City	State	Zip Code
BLACKFOOT	ID	83221

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Mike SimpsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: ID District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : D172004

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALTERS FOR CONGRESS

Mailing Address C/O 8001 IRVINE CENTER DRIVE, #400

City	State	Zip Code
IRVINE	CA	92618

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Rep. Mimi WaltersOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 45

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : D172224

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 103

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN MCCAIN INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address 228 S WASHINGTON STREET SUITE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Sen. John McCainOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 00

Category/
Type**Transaction ID : D172219**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BENNET FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address PO BOX 3078

City	State	Zip Code
DENVER	CO	80201

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Sen. Michael BennetOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: CO District: 00

Category/
Type**Transaction ID : D172216**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ROY BLUNT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Mailing Address PO BOX 10178

City	State	Zip Code
COLUMBIA	MO	65205

Purpose of Disbursement
Contribution to a Federal Campaign

Candidate Name

Sen. Roy BluntOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: MO District: 00

Category/
Type**Transaction ID : D172218**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association PAC

Full Name (Last, First, Middle Initial)

A. SHORE PAC

Mailing Address P.O. BOX 3157

City	State	Zip Code
LONG BRANCH	NJ	07740

Purpose of Disbursement
Contribution to a Leadership PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : D172223

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item

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

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

3500.00

106000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 103 OF 103
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) American College of Radiology Association PAC			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00343459 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee <input type="checkbox"/> Memo Item Prevail Strategies			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 03 / 01 / 2016 </div>	
Mailing Address 7309A Colina Vista Loop			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 16982.86 </div>	
City State Zip Code Austin TX 78750		Transaction ID : D171440 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 03 / 01 / 2016 </div>		
Purpose of Expenditure Printed Advertising for Mailing		Category/Type 		
Name of Federal Candidate Rep. John Shimkus			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>15</u> State: <u>IL</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 41220.24 </div>				

Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>	
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
City State Zip Code		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>		
Purpose of Expenditure		Category/Type 		
Name of Federal Candidate <input type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: <u> </u> State: <u> </u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>				

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 16982.86 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 16982.86 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Richard Taxin MD
 Signature

[Electronically Filed]

Date
MM / DD / YYYY
04 / 19 / 2016