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 Society of Plastic Surgeons PLASTYPAC

ADDRESS (number and street) ▼

20 F Street NW

#310A

☐ Check if different than previously reported. (ACC)

Washington | DC | 20001 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00249342

3. IS THIS REPORT ☐ NEW (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)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2012 through 03 / 31 / 2012

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 Mr. William Seward

Signature of Treasurer *Mr. William Seward* ***[Electronically Filed]*** Date 07 / 19 / 2012

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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

American Society of Plastic Surgeons PLASTYPAC

Report Covering the Period: From: 01 / 01 / 2012 To: 03 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		82020.03
(b) Cash on Hand at Beginning of Reporting Period	82020.03	
(c) Total Receipts (from Line 19)	47042.83	47042.83
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	129062.86	129062.86
7. Total Disbursements (from Line 31)	28602.09	28602.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	100460.77	100460.77
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)

Write or Type Committee Name

American Society of Plastic Surgeons PLASTYPAC

Report Covering the Period: From: 01 / 01 / 2012 To: 03 / 31 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	37522.00	37522.00
(ii) Unitemized	9520.83	9520.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	47042.83	47042.83
(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) ▶	47042.83	47042.83
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)) ▶	47042.83	47042.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	47042.83	47042.83

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	602.09	602.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	602.09	602.09
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	28000.00	28000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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))	28602.09	28602.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	28602.09	28602.09

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	47042.83	47042.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47042.83	47042.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	602.09	602.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	602.09	602.09

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Arturo Aguillon-Bouche MD

Mailing Address 69 Hall Rd

City: Sturbridge
State: MA
Zip Code: 01566-1519

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : 8C4F533C60FAFCB7DFB

Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Gregg Anigian MD

Mailing Address Building 2, Suite 108

City: Dallas
State: TX
Zip Code: 75231-4406

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : 771807F64DE28F5CD21

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Amy Arnold MD

Mailing Address 5200 N Federal Hwy
Ste 7

City: Fort Lauderdale
State: FL
Zip Code: 33308-3253

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 65E5BE662B50702C0C8

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 900.00

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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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Edwin N. Austin MD

Mailing Address 875 Oak St SE
Ste 4060

City: Salem
State: OR
Zip Code: 97301-3990

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2012

Transaction ID : 2FCC1FE9C07311706EC

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Bruce B. Baker MD

Mailing Address PO Box 4044

City: Temple
State: TX
Zip Code: 76505-4044

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : 346AB6D3DE21456264F

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Joseph C. Banis MD

Mailing Address 901 Dupont Rd
Ste 202

City: Louisville
State: KY
Zip Code: 40207-4650

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : 95E32CE8250D200DDB4

Amount of Each Receipt this Period: 300.00

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
John W. Bass MD

Mailing Address 2398 E Camelback Rd
Ste 980

City: Phoenix
State: AZ
Zip Code: 85016-9019

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : B5B7ADED87F404DC2A5

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
C. Bob Basu MD

Mailing Address 6400 Fannin St
Ste 2100

City: Houston
State: TX
Zip Code: 77030-1542

FEC ID number of contributing federal political committee. C

Name of Employer: Basu Plastic Surgery
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2012.00

Date of Receipt: 03 / 19 / 2012

Transaction ID : E70B8671-29F5-48D9-

Amount of Each Receipt this Period: 2012.00

C. Full Name (Last, First, Middle Initial)
Glenn A. Becker MD

Mailing Address 121 E 60th St
Apt 2E

City: New York
State: NY
Zip Code: 10022-1164

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2012

Transaction ID : 72962727-FB02-46B8-

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 2762.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Alan M. Bienstock MD

Mailing Address 46 E 82nd St

City: New York
State: NY
Zip Code: 10028-0305

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 13 / 2012
Transaction ID : 01A9C09A-B380-4782-

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
James H. Blackburn MD

Mailing Address 3001 Squalicum Pkwy
Ste 5

City: Bellingham
State: WA
Zip Code: 98225-1950

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 06 / 2012
Transaction ID : 7CDBCE4067DDB02E5C3

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Matthew J. J. Bonanno MD, FACS

Mailing Address 215 E 77th St

City: New York
State: NY
Zip Code: 10075-2059

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 13 / 2012
Transaction ID : 938E2F4C-8130-4E93-

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Joel E. Borkow MD

Mailing Address 315 Locust St
Ste 2

City: Johnstown
State: PA
Zip Code: 15901-1651

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 258580D702340F4DB08

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Jennifer B. Buck MD

Mailing Address 35080 US Highway 19 N

City: Palm Harbor
State: FL
Zip Code: 34684-1925

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 07 / 2012

Transaction ID : 889BED99CFC2CDF7408

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Donald J. Campbell MD

Mailing Address 1296 Sims St
Nepsa Suite B

City: Gainesville
State: GA
Zip Code: 30501-3873

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 05 / 2012

Transaction ID : C7A68599-07FB-4D56-

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Guy Cappuccino MD

Mailing Address 1001 Twin Arch Rd
Ste 3A

City: Mount Airy
State: MD
Zip Code: 21771-4130

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 29 / 2012

Transaction ID : F0ADCDC4-3FA7-40BB-

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Holly Casey Wall MD

Mailing Address 8600 Fern Ave

City: Shreveport
State: LA
Zip Code: 71105-5639

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 05 / 2012

Transaction ID : A7D31694-C570-42B9-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Michael G. Cedars MD

Mailing Address 3300 Webster St
Ste 1106

City: Oakland
State: CA
Zip Code: 94609-3125

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2012

Transaction ID : EF1EB72AF22B5A398B6

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
June S. Chen MD

Mailing Address 7240 Highland Dr
Ste 175

City: Salt Lake City
State: UT
Zip Code: 84121-6523

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 28 / 2012

Transaction ID : C55E3F71-A5B1-40A5-

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Johnny S. Chung MD

Mailing Address 250 Cetronia Rd
Ste 301

City: Allentown
State: PA
Zip Code: 18104-9168

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 05 / 2012

Transaction ID : 1A5F4E83-A602-4791-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Dana M. Coberly MD

Mailing Address 2111 W Swann Ave
Ste 101

City: Tampa
State: FL
Zip Code: 33606-2478

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : FF373ED1F26C1A8AA1C

Amount of Each Receipt this Period: 300.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Stephen H. Colbert MD

Mailing Address M349 Division of Plastic Surgery

City: Columbia
State: MO
Zip Code: 65212-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2012

Transaction ID : DDA70A65-A23E-44BE-

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Jeffrey G. Copeland MD

Mailing Address 2 Richmond Center Ct

City: Saint Peters
State: MO
Zip Code: 63376-5973

FEC ID number of contributing federal political committee.: C

Name of Employer: Copeland Cosmetic Surgery
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 06 / 2012

Transaction ID : 3302D2D5B0AD9B208E5

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
George A. Csank MD

Mailing Address 426 South St

City: Pittsfield
State: MA
Zip Code: 01201-8228

FEC ID number of contributing federal political committee.: C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 28 / 2012

Transaction ID : 42689C14-5856-4E7D-

Amount of Each Receipt this Period: 300.00

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Lynn D. Derby MD

Mailing Address 235 E Rowan Ave
Ste 206

City: Spokane
State: WA
Zip Code: 99207-1240

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : 5C9F2E1B753922D4916

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
John Wm. Derr MD

Mailing Address 4001 Kresge Way
Ste 320

City: Louisville
State: KY
Zip Code: 40207-4640

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : 9C54CABAF27296F44FF

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Andrew Dodd MD

Mailing Address 36500 Aurora Dr
Amc-Summit

City: Summit
State: WI
Zip Code: 53066-4899

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 06 / 2012

Transaction ID : E38C950F-5BAA-452B-

Amount of Each Receipt this Period: 250.00

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

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Charles L. Dyas MD

Mailing Address 2860 Dauphin St
Ste A

City: Mobile
State: AL
Zip Code: 36606-2415

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 3E9A0DCA69C6D8E8338

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Sepehr Egrari MD

Mailing Address 2950 Northup Way
Ste 100

City: Bellevue
State: WA
Zip Code: 98004-1406

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : 848A87F4-BD5D-4136-

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Harold I. Friedman MD

Mailing Address 2 Medical Park Rd
Ste 302

City: Columbia
State: SC
Zip Code: 29203-6839

FEC ID number of contributing federal political committee. C

Name of Employer: University of South Carolina
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : EB93A13A84A648D95A6

Amount of Each Receipt this Period: 250.00

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

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Daniel Garritano MD

Mailing Address 4139 Boardman Canfield Rd
Ste 2

City: Canfield
State: OH
Zip Code: 44406-9034

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 07 / 2012

Transaction ID : 4BD4B6686785BF6086F

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Richard C. Garvey MD

Mailing Address 500 Mamaroneck Ave
Ste 211

City: Harrison
State: NY
Zip Code: 10528-1600

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 6FFF52628B0E5CBB4F0

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Antonio J. Gayoso MD

Mailing Address 1515 22nd Ave N

City: Saint Petersburg
State: FL
Zip Code: 33704-3113

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 13 / 2012

Transaction ID : D9F0402E-21F5-4DBF-

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Sutton L. Graham II, MD

Mailing Address 615 Halton Rd
Ste 100

City: Greenville
State: SC
Zip Code: 29607-3403

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 5AC713C79511D335334

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Robert G. Graper MD

Mailing Address 2915 Coltsgate Rd
Ste 103

City: Charlotte
State: NC
Zip Code: 28211-3883

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : 451A28A7-C574-472C-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Michelle Y. Hardaway MD

Mailing Address 27920 Orchard Lake Rd

City: Farmington Hills
State: MI
Zip Code: 48334-3733

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 14 / 2012

Transaction ID : EC1AD5054B245ACF475

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Thomas J. Hubbard MD

Mailing Address 329 Phillip Ave

City: Virginia Beach
State: VA
Zip Code: 23454-4461

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: M M 03 / D D 06 / Y Y Y Y 2012

Transaction ID : 20C7782B-6AA4-4247-

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Ron Israeli MD

Mailing Address 833 Northern Blvd
Ste 160

City: Great Neck
State: NY
Zip Code: 11021-5322

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: M M 02 / D D 06 / Y Y Y Y 2012

Transaction ID : 035EE374-E56E-48C5-

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Jeffrey E. Janis MD

Mailing Address 1801 Inwood Rd
Wa4.250

City: Dallas
State: TX
Zip Code: 75235-7202

FEC ID number of contributing federal political committee. C

Name of Employer: UTSW Medical Center
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: M M 03 / D D 06 / Y Y Y Y 2012

Transaction ID : 8C99FDDD17BFC34A7C9

Amount of Each Receipt this Period: 250.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Denise M. Kenna MD

Mailing Address 1936 Powder Mill Rd

City: York
State: PA
Zip Code: 17402-4744

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 28 / 2012

Transaction ID : BA7EE09B-C380-492F-

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Philip C. Kierney MD

Mailing Address 105 27th Ave SE

City: Puyallup
State: WA
Zip Code: 98374-1150

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 07 / 2012

Transaction ID : E1D0421648E9A0EEA70

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Brian M. Kinney MD, FACS

Mailing Address 120 S Spalding Dr
Ste 330

City: Beverly Hills
State: CA
Zip Code: 90212-1841

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 19 / 2012

Transaction ID : 6F0152DA-872D-4A1B-

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
David S. Kirn MD

Mailing Address 2376 Alexandria Dr

City: Lexington
State: KY
Zip Code: 40504-3229

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : 1CC785F28569A5D62FC

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Brian Kobienia MD

Mailing Address 7450 France Ave S
Ste 220

City: Edina
State: MN
Zip Code: 55435-4792

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 03 / 07 / 2012

Transaction ID : 8E58ECB01D9476CD60E

Amount of Each Receipt this Period: 450.00

C. Full Name (Last, First, Middle Initial)
David C. Leber MD

Mailing Address 2807 N Front St

City: Harrisburg
State: PA
Zip Code: 17110-1222

FEC ID number of contributing federal political committee. C

Name of Employer: Leber & Banducci Plastic Surgery, LTD
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : 2C6585D5AE15AFCECBF

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial): Brian J. Lee MD
Mailing Address: 11141 Parkview Plaza Dr, Ste 300
City: Fort Wayne State: IN Zip Code: 46845-1715
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 02/28/2012
Transaction ID : 788C14A9-AB73-46B7-
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): John Logiudice MD
Mailing Address: 8700 W Watertown Plank Rd, Department of Plastic Surgery
City: Milwaukee State: WI Zip Code: 53226-3595
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 03/07/2012
Transaction ID : 71C6C7DAC5D97506360
Amount of Each Receipt this Period: 600.00

C. Full Name (Last, First, Middle Initial): Ronald A. Lohner MD
Mailing Address: Building I Suite 200
City: Rosemont State: PA Zip Code: 19010
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 02/29/2012
Transaction ID : 0C371CFC826E89DAAB9
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
John J. Lomonaco MD

Mailing Address 1009 Missouri St

City: Houston
State: TX
Zip Code: 77006-2839

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2012
Transaction ID : CC58231A-9303-4DD0-

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Herluf G. Lund MD

Mailing Address 17300 N Outer 40 Rd
Ste 300

City: Wildwood
State: MO
Zip Code: 63005-1364

FEC ID number of contributing federal political committee. C

Name of Employer: St. Louis Cosmetic Surgery
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2012
Transaction ID : B001E31A-4C0C-4EAF-

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Eric R. Mariotti MD

Mailing Address 2222 East St
Ste 310

City: Concord
State: CA
Zip Code: 94520-2055

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 07 / 2012
Transaction ID : 00F0A4B05F4625B809C

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Paul B. Mills MD

Mailing Address 145 Saint Peters Centre Blvd
145 St. Peters Centre Boulevard

City: Saint Peters
State: MO
Zip Code: 63376-5103

FEC ID number of contributing federal political committee.: C

Name of Employer: Renaissance Plastic Surgery
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 28 / 2012

Transaction ID : BD461C59-3773-4AEE-

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Jeffrey D. Morehouse MD

Mailing Address 5400 Gibson Blvd SE

City: Albuquerque
State: NM
Zip Code: 87108-4729

FEC ID number of contributing federal political committee.: C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 28 / 2012

Transaction ID : 130EFD6F-CBC4-4706-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Michael W. Neumeister MD, Frcsc,

Mailing Address PO Box 19653
Siu - Plastic Surgery;

City: Springfield
State: IL
Zip Code: 62794-9653

FEC ID number of contributing federal political committee.: C

Name of Employer: SIU School of Medicine - Division of P
Occupation: Professor & Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 27 / 2012

Transaction ID : C437000E-C59D-4623-

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Kenneth L. Odinet MD

Mailing Address 200 Beaullieu Dr
Ste 6

City: Lafayette
State: LA
Zip Code: 70508-7230

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : 68A3DA55-5831-495C-

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Roger J. Oldham MD

Mailing Address 10215 Fernwood Rd
Ste 412

City: Bethesda
State: MD
Zip Code: 20817-1191

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : 61CD3B52-E33A-44A8-

Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
John M. Osborn MD

Mailing Address 95 Scripps Dr
Downstairs

City: Sacramento
State: CA
Zip Code: 95825-6320

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : 5C064934CC55C4C3792

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 1165.00

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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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Michael J. Pecoraro MD

Mailing Address 450 Jack Martin Blvd
Ste A

City: Brick
State: NJ
Zip Code: 08724-7779

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : F2FA3373E185A3AF2B3

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Stacy L. Peterson MD

Mailing Address 818 N Emporia St
Ste 305

City: Wichita
State: KS
Zip Code: 67214-3727

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 23A3FE0A4C5A6F84097

Amount of Each Receipt this Period: 365.00

C. Full Name (Last, First, Middle Initial)
Gregory E. Rauscher MD

Mailing Address 20 Prospect Ave
Ste 600

City: Hackensack
State: NJ
Zip Code: 07601-1962

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 19 / 2012

Transaction ID : D7F23D71-98DF-48B4-

Amount of Each Receipt this Period: 600.00

SUBTOTAL of Receipts This Page (optional) ▶ 1465.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Robert D. Rehnke MD

Mailing Address 6606 10th Ave N

City: Saint Petersburg
State: FL
Zip Code: 33710-6104

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 07 / 2012
Transaction ID : 66B17D345F3EA551320

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Robert S. Reiffel MD

Mailing Address 12 Greenridge Ave
Ste 203

City: White Plains
State: NY
Zip Code: 10605-1238

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2012
Transaction ID : A268B678-FFAB-4DF4-

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
James N. Romanelli MD

Mailing Address 110 E Main St
Ste 6

City: Huntington
State: NY
Zip Code: 11743-2845

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 23 / 2012
Transaction ID : 106E5ED2-0E07-4A83-

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Leonard A. Roudner MD

Mailing Address 550 Biltmore Way
Ste 890

City: Coral Gables
State: FL
Zip Code: 33134-5779

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 14 / 2012

Transaction ID : A856EF5C564EC2BDB20

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Justin M. Sacks MD

Mailing Address 601 N Caroline St
Ste 8140D

City: Baltimore
State: MD
Zip Code: 21287-0006

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 01 / 11 / 2012

Transaction ID : 17F387B5-EC49-4BB9-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Gordon H. Sasaki MD

Mailing Address 800 Fairmount Ave
Ste 319

City: Pasadena
State: CA
Zip Code: 91105-3153

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : 54E2797B-0CEB-42C2-

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Brian H. Slywka MD

Mailing Address 351 Rolling Oaks Dr
Ste 101

City: Thousand Oaks
State: CA
Zip Code: 91361-1278

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 23 / 2012

Transaction ID : E791949ABCF6EB894CE

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Lisa Lynn Sowder MD

Mailing Address 901 Boren Ave
Ste 1650

City: Seattle
State: WA
Zip Code: 98104-3508

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 13 / 2012

Transaction ID : 30D7EF60-1D39-4058-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Thomas P. Sterry MD

Mailing Address 895 Park Ave
Ste 1B

City: New York
State: NY
Zip Code: 10075-0327

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 29 / 2012

Transaction ID : 52668E5C51898224C64

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial): Steven K. Struck MD
Mailing Address: 3301 El Camino Real, Ste 200
City: Atherton State: CA Zip Code: 94027-3803
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 03 / 07 / 2012
Transaction ID : 29B7D4F9801E23E059E
Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial): Mark R. Sultan MD
Mailing Address: 1100 Park Ave
City: New York State: NY Zip Code: 10128-1202
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 / 30 / 2012
Transaction ID : D0BCF9B82A55598194D
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Kevin Tehrani MD
Mailing Address: 560 Northern Blvd, Ste 109
City: Great Neck State: NY Zip Code: 11021-5100
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 03 / 06 / 2012
Transaction ID : 27E9D041-D06B-4633-
Amount of Each Receipt this Period: 380.00

SUBTOTAL of Receipts This Page (optional) ▶ 1780.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Bhupesh Vasisht MD

Mailing Address 1307 White Horse Rd
E-501

City: Voorhees
State: NJ
Zip Code: 08043-2176

FEC ID number of contributing federal political committee. C

Name of Employer: South Shore Plastic Surgery
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 19 / 2012

Transaction ID : 7AE8B5D3-1BF2-45BD-

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Kathleen A. Waldorf MD, FACS

Mailing Address 9775 SW Wilshire St
Ste 200

City: Portland
State: OR
Zip Code: 97225-5067

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : 31D78FA0D5306000898

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Paul R. Weiss MD

Mailing Address 1049 5th Ave
Ste 2D

City: New York
State: NY
Zip Code: 10028-0115

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2012

Transaction ID : 5435B8802F8B57D87AD

Amount of Each Receipt this Period: 250.00

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial)
Frederick G. Weniger MD

Mailing Address 25 Clark Summit Dr
Ste F104

City: Bluffton
State: SC
Zip Code: 29910-4205

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 28 / 2012

Transaction ID : 1CD90075-C487-4FCF-

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Joel A. Williams MD

Mailing Address 1506 Professional Ct
Williams Plastic Surgery

City: Dalton
State: GA
Zip Code: 30720-2500

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2012

Transaction ID : 1C209F4A-3596-450F-

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Todd E. Williams MD

Mailing Address 2300 E 30th St
Suite 103, Building B

City: Farmington
State: NM
Zip Code: 87401-8990

FEC ID number of contributing federal political committee. C

Name of Employer: Self
Occupation: Physician

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 01 / 03 / 2012

Transaction ID : 50124BB9-63E0-4126-

Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial): Bennett Yang MD
Mailing Address: 3203 Tower Oaks Blvd, Ste 200
City: Rockville State: MD Zip Code: 20852-4260
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01/20/2012
Transaction ID : 51160EC0-3AE3-4C0A-
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Michael D. Yates MD
Mailing Address: 303 Williams Ave SW, Ste 1421
City: Huntsville State: AL Zip Code: 35801-6008
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03/07/2012
Transaction ID : 6C5782395D5B30FD3E4
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): John F. Zavell MD
Mailing Address: 2865 N Reynolds Rd, Ste 250
City: Toledo State: OH Zip Code: 43615-2070
FEC ID number of contributing federal political committee: C
Name of Employer: Reconstructive&Aesthetic Surgeons
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 01/13/2012
Transaction ID : C81C4156-BA80-409A-
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A.
Full Name (Last, First, Middle Initial): George P. Zavitsanos MD
Mailing Address: 467 Pennsylvania Ave, Ste 203
City: Fort Washington State: PA Zip Code: 19034-3420
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 02 / 29 / 2012
Transaction ID : BE5A4E559CF158A3591
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial):
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
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
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
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶ 37522.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A.
Full Name (Last, First, Middle Initial): JP Morgan Chase
Mailing Address: 1201 South Milwaukee Ave
City: Libertyville State: IL Zip Code: 60048
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 02/02/2012
Transaction ID : 4D336592AD1817EB8C7
Amount of Each Disbursement this Period: 90.33

B.
Full Name (Last, First, Middle Initial): JP Morgan Chase
Mailing Address: 1201 South Milwaukee Ave
City: Libertyville State: IL Zip Code: 60048
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03/02/2012
Transaction ID : 4C6B5EC4055BB677F59
Amount of Each Disbursement this Period: 137.76

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: MM / DD / YYYY
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 228.09

TOTAL This Period (last page this line number only) ▶ 228.09

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial): Cantor for Congress
Mailing Address: PO Box 17813
City: Richmond State: VA Zip Code: 23226
Purpose of Disbursement: Org Contr 10/26/2011 - Void
Category/Type: 011
Candidate Name: Eric Ivan Cantor
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 07
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 23 / 2012
Transaction ID : 8D37AA3CA79BBAF0848
Amount of Each Disbursement this Period: -5000.00

B. Full Name (Last, First, Middle Initial): Cantor for Congress
Mailing Address: PO Box 17813
City: Richmond State: VA Zip Code: 23226
Purpose of Disbursement: 2012 General
Category/Type: 011
Candidate Name: Eric Ivan Cantor
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 07
Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 02 / 29 / 2012
Transaction ID : 14D4117627039985177
Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Friends of John Boehner
Mailing Address: 7908 Cincinnati Dayton Road Suite I
City: West Chester State: OH Zip Code: 45069
Purpose of Disbursement: Org Contr 10/26/2011 - Void
Category/Type: 011
Candidate Name: John A. Boehner
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 08
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 23 / 2012
Transaction ID : 2795056BDDD5E58D3AE
Amount of Each Disbursement this Period: -5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ -5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial): Friends of John Boehner
Mailing Address: 7908 Cincinnati Dayton Road, Suite I
City: West Chester State: OH Zip Code: 45069
Purpose of Disbursement: 2012 General
Category/Type: 011
Candidate Name: John A. Boehner
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 08
Disbursement For: 2012 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 02/29/2012
Transaction ID : E8081921CDF1A4C4911
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Michael Burgess for Congress
Mailing Address: PO Box 2334
City: Denton State: TX Zip Code: 76202
Purpose of Disbursement: 2012 General
Category/Type: 011
Candidate Name: Michael Clifton Burgess
Office Sought: [X] House [ ] Senate [ ] President
State: TX District: 26
Disbursement For: 2012 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01/26/2012
Transaction ID : A1B1BD7F5FA9B1CBDDA
Amount of Each Disbursement this Period: 3000.00

C. Full Name (Last, First, Middle Initial): National Republican Congressional Committee
Mailing Address: 320 First Street SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: 2012 Contribution
Category/Type: 011
Candidate Name: National Republican Congressional Committee
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2012 [ ] Primary [ ] General [X] Other (specify) Contribution
Date of Disbursement: 02/29/2012
Transaction ID : A387F1871C1EB94B4D5
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 13000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Society of Plastic Surgeons PLASTYPAC

A. Full Name (Last, First, Middle Initial): National Republican Senatorial Committee
Mailing Address: 425 Second Street NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: 2012 Contribution
Candidate Name: National Republican Senatorial Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2012 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 01 / 26 / 2012
Transaction ID : 1F28648783D8FBC6771
Amount of Each Disbursement this Period: 15000.00

B. Full Name (Last, First, Middle Initial): Pioneer Political Action Committee
Mailing Address: 701 8th Street, NW Suite 500
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: 2012 Contribution
Candidate Name: Pioneer Political Action Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2012 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 01 / 26 / 2012
Transaction ID : DC618046FD5A41BFFA7
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Tiberi for Congress
Mailing Address: 2931 E Dublin Granville Road Suite 190
City: Columbus State: OH Zip Code: 43231
Purpose of Disbursement: 2012 General
Candidate Name: Patrick J. Tiberi
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 12
Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify) ▼
Date of Disbursement: 01 / 26 / 2012
Transaction ID : 6FDB8F28903B0ABF1C9
Amount of Each Disbursement this Period: 4000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 20000.00

TOTAL This Period (last page this line number only) ▶ 28000.00