

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 Political Action Committee

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 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) 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) General (12G) Runoff (12R)

Convention (12C) Special (12S)

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 / 2013 through 03 / 31 / 2013

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 M.D.

Signature of Treasurer Richard Taxin M.D. [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y

04 / 16 / 2013

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American College of Radiology Association Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		599906.55
(b) Cash on Hand at Beginning of Reporting Period.....	690268.18	
(c) Total Receipts (from Line 19)	102214.77	364675.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	792482.95	964581.87
7. Total Disbursements (from Line 31).....	111562.17	283661.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	680920.78	680920.78
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

Write or Type Committee Name

American College of Radiology Association Political Action Committee

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

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).....	81450.50	305042.16
(ii) Unitemized	20763.03	59629.49
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	102213.53	364671.65
(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)	102213.53	364671.65
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.).....	1.24	3.67
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))..... ▶	102214.77	364675.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	102214.77	364675.32

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	2062.17	4961.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2062.17	4961.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	109500.00	278500.00
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	200.00
(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	200.00
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)) ..	111562.17	283661.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	111562.17	283661.09

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)	102213.53	364671.65
34. Total Contribution Refunds (from Line 28(d))	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	102213.53	364471.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2062.17	4961.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2062.17	4961.09

**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)	PAGE 6 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Stephen I. Abedon
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Elmgrove Ave
 City Providence State RI Zip Code 02906-4135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 225.00

Date of Receipt 03 / 28 / 2013
Transaction ID : 8B750B1A4AB38A320FB
 Amount of Each Receipt this Period 225.00

B. Mark James Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Bordeaux Way
 City Fairport State NY Zip Code 14450-4614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Rochester Medical Facult Occupation Physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 14 / 2013
Transaction ID : 3E98DDB7-40D5-4D2C-
 Amount of Each Receipt this Period 1000.00

C. Bibb Allen Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3245 E Briarcliff Rd
 City Mountain Brk State AL Zip Code 35223-1304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Montclair Baptist Medical Center Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 625.00

Date of Receipt 03 / 10 / 2013
Transaction ID : 766B1195C4814A62B4D4
 Amount of Each Receipt this Period 625.00

SUBTOTAL of Receipts This Page (optional)..... **1850.00**
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 7 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Mark Alson
Full Name (Last, First, Middle Initial)

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:
 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 / 04 / 2013

Transaction ID : A67ED0332D904242BA3B

Amount of Each Receipt this Period
 50.00

B. Raymond A. Armstrong
Full Name (Last, First, Middle Initial)

Mailing Address 2006 Franklin St SE
Radiology of Huntsville, Ste 200

City Huntsville State AL Zip Code 35801-4537

FEC ID number of contributing federal political committee. **C**

Name of Employer Baptist Medical Ctr-Montclair 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 / 09 / 2013

Transaction ID : 4E66AFC765E4917360D6

Amount of Each Receipt this Period
 100.00

C. Todd Baird
Full Name (Last, First, Middle Initial)

Mailing Address 105 E Hillcrest Ave

City Richmond State VA Zip Code 23226-2236

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. 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 / 05 / 2013

Transaction ID : C5E40F5765914DEC7A4

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 8 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Diana Baker
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 Ambar Way
 City Menlo Park State CA Zip Code 94025-5801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist
 Receipt For: 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
 03 / 28 / 2013
Transaction ID : 7A80CEC17B2721E57A6
 Amount of Each Receipt this Period
225.00

B. Edward Baker
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7999
 City San Francisco State CA Zip Code 94120-7999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist
 Receipt For: 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
 03 / 28 / 2013
Transaction ID : 839FD419C942B7DBA9A
 Amount of Each Receipt this Period
225.00

C. Jacqueline Anne Bello
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 E 210th St
 Montefiore Medical Center
 City Bronx State NY Zip Code 10467-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Montefiore Medical Group Occupation Physician
 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 / 29 / 2013
Transaction ID : F13CB2B3952AC585D80
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	1450.00
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 9 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Stuart Bentley-Hibbert
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Chateau Ridge Rd
 City Greenwich State CT Zip Code 06831-2940
 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 **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2013
Transaction ID : 20B8C19A-6EC3-49E2-
 Amount of Each Receipt this Period
2500.00

B. Kenneth Berkenstock
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3555
 Lancaster Radiology Associates
 City Lancaster State PA Zip Code 17604-3555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lancaster Radiology Associates Occupation Radiation Oncologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2013
Transaction ID : 9E68889597A50B57A7C
 Amount of Each Receipt this Period
84.00

C. Leonard Berlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 518 Meadow Dr W
 City Wilmette State IL Zip Code 60091-2276
 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 **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2013
Transaction ID : 80FF4073A4B078E207C
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	3584.00
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 10 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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 Political Action Committee

A. Jessica Berliner
Full Name (Last, First, Middle Initial)

Mailing Address 3 Welwyn Pl

City Richmond State VA Zip Code 23229-8111

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology 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 / 05 / 2013
Transaction ID : 62E2A09DD8193339848

Amount of Each Receipt this Period
 250.00

B. Mark Bernardy
Full Name (Last, First, Middle Initial)

Mailing Address 131 Barrington Hall Dr

City Eatonton State GA Zip Code 31024-5459

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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2013
Transaction ID : 14665015BEB3829A135

Amount of Each Receipt this Period
 1000.00

C. Robert Beskin
Full Name (Last, First, Middle Initial)

Mailing Address 12218 Country Hills Ter

City Glen Allen State VA Zip Code 23059-5339

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology PC Occupation Neuroradiologist

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 / 05 / 2013
Transaction ID : 6E3B23523BD3B3C05AB

Amount of Each Receipt this Period
 250.00

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)	PAGE 11 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Charles Bowkley III
 Full Name (Last, First, Middle Initial)
 Mailing Address 419 S Washington St
 Casper Medical Imaging
 City Casper State WY Zip Code 82601-2951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Johns Hopkins University Occupation Radiology Resident
 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 / 12 / 2013
Transaction ID : A3C5D3B3A9927800335
 Amount of Each Receipt this Period
250.00

B. Kelly Broderick
 Full Name (Last, First, Middle Initial)
 Mailing Address 185 Crest Rd
 City Woodside State CA Zip Code 94062-2308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Advanced Imaging, M.A. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2013
Transaction ID : DEA65A9347FB5502A0B
 Amount of Each Receipt this Period
225.00

C. David Buck
 Full Name (Last, First, Middle Initial)
 Mailing Address 272 Harrison Rd
 City Turtle Creek State PA Zip Code 15145-1042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiologic Consultants, Ltd. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **448.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2013
Transaction ID : 4A809C194F3D1EE08E14
 Amount of Each Receipt this Period
365.00

SUBTOTAL of Receipts This Page (optional)..... **840.00**
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 12 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Joseph Burch
Full Name (Last, First, Middle Initial)

Mailing Address 38 Huntington Rd SW

City Rome State GA Zip Code 30165-8554

FEC ID number of contributing federal political committee. **C**

Name of Employer Rome Radiology Group, P.A. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2013
Transaction ID : 7EC92F0C-473B-4B34-

Amount of Each Receipt this Period 500.00

B. Derek Burdeny
Full Name (Last, First, Middle Initial)

Mailing Address 1509 S 182nd Cir

City Omaha State NE Zip Code 68130-2720

FEC ID number of contributing federal political committee. **C**

Name of Employer Midwest Medical Imaging Ctr Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 28 / 2013
Transaction ID : 02FC75922CE306959BD

Amount of Each Receipt this Period 225.00

C. Vincent Burke
Full Name (Last, First, Middle Initial)

Mailing Address 170 Alameda De Las Pulgas Sequoia Hospital

City Redwood City State CA Zip Code 94062-2751

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 28 / 2013
Transaction ID : C9EAF1CD39DC2A083B4

Amount of Each Receipt this Period 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

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 13 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Larry Burr
Full Name (Last, First, Middle Initial)

Mailing Address 1948 1st Ave NE
Radiology Consultants of Iowa

City Cedar Rapids State IA Zip Code 52402-5321

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Consultants of Iowa Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 26 / 2013
Transaction ID : 29B95AB903E3824F635

Amount of Each Receipt this Period
250.00

B. David Butler
Full Name (Last, First, Middle Initial)

Mailing Address 232 S Woods Mill Rd
St. Lukes Hospital, Ste 110

City Chesterfield State MO Zip Code 63017-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiation Oncology Consultants of W. C Occupation Radiation Oncologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 15 / 2013
Transaction ID : 0D2AF7D9-C699-456B-

Amount of Each Receipt this Period
1000.00

c. Vida Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 2539 Vallejo St

City San Francisco State CA Zip Code 94123-4640

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : BB788B67DA7E5D6DA42

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1475.00

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 14 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Cheri Canon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1533 Woodridge Pl
 City Vestavia State AL Zip Code 35216-1657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U of Alabama School of Med Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
 03 / 27 / 2013
Transaction ID : CCB0D6C8-F313-4FE2-
 Amount of Each Receipt this Period
 500.00

B. James Carroll
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 Ridgewood Ave
 City North Haven State CT Zip Code 06473-4441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Midstate Radiology Associates Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
 03 / 27 / 2013
Transaction ID : C1C33AA9-AF6A-407B-
 Amount of Each Receipt this Period
 250.00

C. John Cassese
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Boulder Way
 City East Greenwich State RI Zip Code 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 275.00

Date of Receipt
 03 / 14 / 2013
Transaction ID : 7F8A36ECD37F49E5BEE0
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	775.00
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 15 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Chaliff

Mailing Address 195 Grogans Lake Pt

City Atlanta State GA Zip Code 30350-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer Diagnostic Imaging Specialists, P.A.. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 29 / 2013
Transaction ID : 485FABD2DAEAF2E0CCF

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Miles Chang

Mailing Address 25 Trinity

City Irvine State CA Zip Code 92612-3270

FEC ID number of contributing federal political committee. **C**

Name of Employer Newport Harbor Radiology Associates Me Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 19 / 2013
Transaction ID : 38417CDCDBFE20FCA25

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Jugesh Cheema

Mailing Address 2466 Oak Bend Pl

City Newburgh State IN Zip Code 47630-8053

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Center of Delaware Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 21 / 2013
Transaction ID : 1183810280044B9095C5

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

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 16 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Raja Sekhar Cheruvu
 Full Name (Last, First, Middle Initial)
 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 Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2013
Transaction ID : 41128B9F6E85EF95C41B
 Amount of Each Receipt this Period
 50.00

B. Luke Cheung
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 Plumeria
 City Irvine State CA Zip Code 92620-1999
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Newport Harbor Radiology Associates 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 / 08 / 2013
Transaction ID : F0A29411FD9B0B86245
 Amount of Each Receipt this Period
 250.00

C. Tilden Childs III
 Full Name (Last, First, Middle Initial)
 Mailing Address 2421 Colonial Pkwy
 City Fort Worth State TX Zip Code 76109-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Tarrant Co., P 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 / 27 / 2013
Transaction ID : BE819DF3-3A08-445A-
 Amount of Each Receipt this Period
 500.00

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	FOR LINE NUMBER: (check only one)	PAGE 17 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Daryl Chinn
Full Name (Last, First, Middle Initial)

Mailing Address 115 Kreuzer Ln

City Napa State CA Zip Code 94559-3605

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : 1069E4E6856064FD9A5

Amount of Each Receipt this Period
225.00

B. Elsie Cintron
Full Name (Last, First, Middle Initial)

Mailing Address 125 Calle Aleli

City San Juan State PR Zip Code 00927-6306

FEC ID number of contributing federal political committee. **C**

Name of Employer UAMC Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt
03 / 24 / 2013
Transaction ID : 4513BB551E9A3FA7FE6B

Amount of Each Receipt this Period
83.34

c. Jane Clayton
Full Name (Last, First, Middle Initial)

Mailing Address 1342 Ocean Dr

City Metairie State LA Zip Code 70005-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer LSU Medical Center Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
03 / 20 / 2013
Transaction ID : 22E59682-C195-44A2-

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 808.34

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 18 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 Political Action Committee

A. Kelli Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 8602 Stable Crest Blvd

City Houston State TX Zip Code 77024-7028

FEC ID number of contributing federal political committee. **C**

Name of Employer Baylor College of Medicine Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2013
Transaction ID : 91BCA4AE3005E43499A

Amount of Each Receipt this Period 500.00

B. Christopher Conlin
Full Name (Last, First, Middle Initial)

Mailing Address 6590 Andersonville Rd

City Clarkston State MI Zip Code 48346-2794

FEC ID number of contributing federal political committee. **C**

Name of Employer DRA of Flint, PC Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 04 / 2013
Transaction ID : CC9CDFABF8514CCC98C8

Amount of Each Receipt this Period 100.00

C. W. W Conwell
Full Name (Last, First, Middle Initial)

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 ▼ 1249.98

Date of Receipt 03 / 28 / 2013
Transaction ID : 4314AFC57F1B5C2B0C6B

Amount of Each Receipt this Period 416.66

SUBTOTAL of Receipts This Page (optional).....▶ 1016.66

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 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Douglas Cook
Full Name (Last, First, Middle Initial)

Mailing Address 217 Amphill Rd

City Richmond State VA Zip Code 23226-2234

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : **F5FE643397FAAF8D4DD**

Amount of Each Receipt this Period
250.00

B. Rebecca Cornelius
Full Name (Last, First, Middle Initial)

Mailing Address 2179 Raeburn Dr

City Cincinnati State OH Zip Code 45223-1267

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Cincinnati Med Center Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
03 / 14 / 2013
Transaction ID : **A393C09E-4465-4533-**

Amount of Each Receipt this Period
2500.00

C. Jana Crain
Full Name (Last, First, Middle Initial)

Mailing Address 863 Corriente Point Dr

City Redwood City State CA Zip Code 94065-1284

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of AR Medical Ctr Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : **497C9DBF7CD95B59E40**

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2975.00

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 20 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Frederick Cubin
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Elkhorn Valley Dr

City Casper State WY Zip Code 82609-4634

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 ▼ 600.00

Date of Receipt
03 / 12 / 2013
Transaction ID : 70F5B3736C16C27C98B

Amount of Each Receipt this Period
600.00

B. Cecil Cupp III
Full Name (Last, First, Middle Initial)

Mailing Address 3633 Central Ave
Hot Springs Radiology Services, St

City Hot Springs State AR Zip Code 71913-6475

FEC ID number of contributing federal political committee. **C**

Name of Employer Hot Springs Radiology Services, Ltd. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 14 / 2013
Transaction ID : 6D96F7CAF4BD4B34AE12

Amount of Each Receipt this Period
250.00

C. Bruce Curran
Full Name (Last, First, Middle Initial)

Mailing Address 593 Eddy St
Rhode Island Hospital

City Providence State RI Zip Code 02903-4923

FEC ID number of contributing federal political committee. **C**

Name of Employer NOMOS Corporation Occupation Physicist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
03 / 25 / 2013
Transaction ID : 14D4199B-8121-46E2-

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

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 21 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. George Cushing Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 330 Mount Auburn St
Mount Auburn Hospital

City Cambridge State MA Zip Code 02138-5502

FEC ID number of contributing federal political committee. **C**

Name of Employer Schatzki Associates, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2013
Transaction ID : BA535192F5CCCA760DC

Amount of Each Receipt this Period
500.00

B. Justine Dautenhahn
Full Name (Last, First, Middle Initial)

Mailing Address 149 Lake Aluma Dr

City Oklahoma City State OK Zip Code 73121-3401

FEC ID number of contributing federal political committee. **C**

Name of Employer Norman Radiology Services, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 14 / 2013
Transaction ID : 1A3B4A0D-EF27-41E6-

Amount of Each Receipt this Period
500.00

C. Darren M. Davenport
Full Name (Last, First, Middle Initial)

Mailing Address 1948 1st Ave NE

City Cedar Rapids State IA Zip Code 52402-5321

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Consultants of Iowa Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 26 / 2013
Transaction ID : 821334CA-761B-41A4-

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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 22 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. W. James Demartini
Full Name (Last, First, Middle Initial)

Mailing Address 126 Terrace Ave

City Kentfield State CA Zip Code 94904-1531

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : A695C77FCDC088F3CD4

Amount of Each Receipt this Period
225.00

B. Susan Denny
Full Name (Last, First, Middle Initial)

Mailing Address 402 Median Way

City Mill Valley State CA Zip Code 94941-3561

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : D6135F8FE75CDF5A4E7

Amount of Each Receipt this Period
225.00

C. Mark Dixon
Full Name (Last, First, Middle Initial)

Mailing Address 5004 Westcott Landing Cir

City Glen Allen State VA Zip Code 23059-7080

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : 529899BF6B3FDFD9912

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 23 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. William Donovan
Full Name (Last, First, Middle Initial)

Mailing Address 326 Washington St
Backus Hospital

City Norwich State CT Zip Code 06360-2740

FEC ID number of contributing federal political committee. **C**

Name of Employer Backus Hospital Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt
03 / 12 / 2013

Transaction ID : C596DE18-1D81-4CE7-

Amount of Each Receipt this Period
365.00

B. William Donovan
Full Name (Last, First, Middle Initial)

Mailing Address 326 Washington St
Backus Hospital

City Norwich State CT Zip Code 06360-2740

FEC ID number of contributing federal political committee. **C**

Name of Employer Backus Hospital Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt
03 / 20 / 2013

Transaction ID : 72496913-DF09-43BD-

Amount of Each Receipt this Period
365.00

C. Thomas Dorantes
Full Name (Last, First, Middle Initial)

Mailing Address 720 N East St

City Indianapolis State IN Zip Code 46202-3423

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 ▼ **2500.00**

Date of Receipt
03 / 25 / 2013

Transaction ID : 7C0ADCAE-E090-4AD4-

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... **3230.00**

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 24 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Jean Dufour
 Full Name (Last, First, Middle Initial)
 Mailing Address 9517 Cragmont Dr
 City Richmond State VA Zip Code 23229-7612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Radiology, P.C. 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 / 05 / 2013
Transaction ID : 129A509BC8BE702A0B1
 Amount of Each Receipt this Period
250.00

B. David Ekey
 Full Name (Last, First, Middle Initial)
 Mailing Address 3810 Sulgrave Rd
 City Richmond State VA Zip Code 23221-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Radiology, P.C. 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 / 05 / 2013
Transaction ID : FA45803C0DF6C08F6AE
 Amount of Each Receipt this Period
250.00

C. Paul Ellenbogen
 Full Name (Last, First, Middle Initial)
 Mailing Address 6612 Cliffbrook Dr
 City Dallas State TX Zip Code 75254-8613
 FEC 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 **625.02**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2013
Transaction ID : 49B79A4BC5E4F0087E2D
 Amount of Each Receipt this Period
208.34

SUBTOTAL of Receipts This Page (optional).....	708.34
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 25 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Joel Elson
Full Name (Last, First, Middle Initial)

Mailing Address 13617 Seward St

City Omaha State NE Zip Code 68154-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer Grand Island Radiology Assoc 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 / 2013

Transaction ID : 526B483B-ECF7-4228-

Amount of Each Receipt this Period
 500.00

B. Roger Eng.
Full Name (Last, First, Middle Initial)

Mailing Address 7 Soule Rd

City Orinda State CA Zip Code 94563-1516

FEC ID number of contributing federal political committee. **C**

Name of Employer Golden Gate 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 / 26 / 2013

Transaction ID : 96C43818-D0D0-4193-

Amount of Each Receipt this Period
 500.00

C. William Enochs
Full Name (Last, First, Middle Initial)

Mailing Address 230 Poplar Ave

City Wayne State PA Zip Code 19087-3504

FEC ID number of contributing federal political committee. **C**

Name of Employer Thomas Jefferson University Ho 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 / 29 / 2013

Transaction ID : 55B05CC2E9B9AB7547C

Amount of Each Receipt this Period
 100.00

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)	PAGE 26 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Kate Feinstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 5841 S Maryland Ave
 University of Chicago Medical Cent
 City Chicago State IL Zip Code 60637-1447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Chicago Hospital 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 / 15 / 2013
Transaction ID : D4979B61-BE20-48E5-
 Amount of Each Receipt this Period
1000.00

B. Maurice Finnegan Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1510 Willow Lawn Dr
 Commonwealth Radiologypc, Ste 102
 City Richmond State VA Zip Code 23230-3429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Radiology, PC 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 / 05 / 2013
Transaction ID : 9C6D4139A4DF41BE125
 Amount of Each Receipt this Period
250.00

C. Michael Flaherty
 Full Name (Last, First, Middle Initial)
 Mailing Address 419 S Washington St
 Casper Medical Imaging, Ste 101
 City Casper State WY Zip Code 82601-2951
 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 / 12 / 2013
Transaction ID : 95FB17DFB041B12F27B
 Amount of Each Receipt this Period
500.00

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)	PAGE 27 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Cassandra Foens
Full Name (Last, First, Middle Initial)

Mailing Address 200 E Ridgeway Ave
Covenant Cancer Treatment Center

City Waterloo State IA Zip Code 50702-5060

FEC ID number of contributing federal political committee. **C**

Name of Employer: Clinical Radiologists PC
Occupation: Radiation Oncologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
03 / 17 / 2013
Transaction ID : 4EBD49CA-5AC8-412A-

Amount of Each Receipt this Period
2500.00

B. Russell Fritz
Full Name (Last, First, Middle Initial)

Mailing Address 487 Green Glen Way

City Mill Valley State CA Zip Code 94941-4018

FEC ID number of contributing federal political committee. **C**

Name of Employer: California Advanced Imaging Medical As
Occupation: Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : 3820201292EA133E51C

Amount of Each Receipt this Period
225.00

C. Gary Geil
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Tustin Ave
West Coast Radiology

City Santa Ana State CA Zip Code 92705-3595

FEC ID number of contributing federal political committee. **C**

Name of Employer: Santa Ana Tustin Radiology Group
Occupation: Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 22 / 2013
Transaction ID : 5E48A99F9C52D6D398F

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2875.00

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 28 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Gary Geil
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Tustin Ave
West Coast Radiology

City Santa Ana State CA Zip Code 92705-3595

FEC ID number of contributing federal political committee. **C**

Name of Employer Santa Ana Tustin Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 29 / 2013
Transaction ID : 44A4A8E812D6EBB31E3C

Amount of Each Receipt this Period
50.00

B. Richard Geise
Full Name (Last, First, Middle Initial)

Mailing Address 18430 5th Ave N

City Plymouth State MN Zip Code 55447-3312

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Minn Hosp & Clinic Occupation Physicist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 19 / 2013
Transaction ID : 8127AA17-9AD0-42AC-

Amount of Each Receipt this Period
1000.00

C. Dietrich Gerhardt
Full Name (Last, First, Middle Initial)

Mailing Address 6780 Still Creek Pass

City Bettendorf State IA Zip Code 52722-7521

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Group, P.C., S.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 13 / 2013
Transaction ID : 25108F4A-3465-4AA8-

Amount of Each Receipt this Period
250.00

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)	PAGE 29 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Robert 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 Robert Charles Gibbs, M.D., L.L.C.	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 / 2013
Transaction ID : D2DE48D2-5981-4ACF-

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Peter Giuliano

Mailing Address 27 Amargosa

City Irvine	State CA	Zip Code 92602-2455
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Newport Harbor Radiology Associates Me	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 / 08 / 2013
Transaction ID : A5F5AFC17BC43D63C12

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Robert Goldschmidt

Mailing Address 8947 Cherokee Rd

City Richmond	State VA	Zip Code 23235-1411
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology PC	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 / 05 / 2013
Transaction ID : CA68225F5FAF567DECE

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)	PAGE 30 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Amos Habib
Full Name (Last, First, Middle Initial)

Mailing Address 3816 Indigo Run Dr

City Richmond State VA Zip Code 23233-1128

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
03 / 05 / 2013
Transaction ID : **B1A91437DB7157A2CD3**

Amount of Each Receipt this Period
250.00

B. Glenn Hammer
Full Name (Last, First, Middle Initial)

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
03 / 26 / 2013
Transaction ID : **3877398BED4CEAB5094**

Amount of Each Receipt this Period
250.00

C. Christopher Hancock
Full Name (Last, First, Middle Initial)

Mailing Address 1133 N Palm Canyon Dr
Blue Sky Radiology, Ste B

City Palm Springs State CA Zip Code 92262-4431

FEC ID number of contributing federal political committee. **C**

Name of Employer Mount Sinai Medical Center
Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 27 / 2013
Transaction ID : **6FAD488D-2A36-4A82-**

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)	PAGE 31 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Hanigan

Mailing Address 7133 High Point Ln

City Cedar Rapids State IA Zip Code 52411-8165

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Consultants of Iowa, PLC Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2013
Transaction ID : 6804A08254614E7A94B

Amount of Each Receipt this Period 250.00

Full Name (Last, First, Middle Initial)
B. Jay Harolds

Mailing Address 335 Bridge St NW Apt 1201

City Grand Rapids State MI Zip Code 49504-5390

FEC ID number of contributing federal political committee. **C**

Name of Employer Advanced Radiology Services Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 22 / 2013
Transaction ID : 13FB18FE5B6DDFE7297

Amount of Each Receipt this Period 1000.00

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

Mailing Address 136 Highview Rd

City Stephenson State VA Zip Code 22656-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Winchester Medical Center Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 12 / 2013
Transaction ID : 4ECA9D0B6059DC1B71DB

Amount of Each Receipt this Period 1250.00

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 32 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Alejandro Heffess

Mailing Address 75 Centre St

City State Zip Code
Brookline MA 02446-2833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Schatzki Associates, Inc. Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2013
Transaction ID : 074BDAD1FB601BDBEFD

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Laura Hemann

Mailing Address 6815 Spring Grove Ct NE

City State Zip Code
Cedar Rapids IA 52411-7652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Radiology Consultants of Iowa Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 26 / 2013
Transaction ID : E2EA95DE7B3A7400A17

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Rayda Hernandez-Guasch

Mailing Address 89 Ave De Diego
Pmb 525, Ste 105

City State Zip Code
San Juan PR 00927-6370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University of Puerto Rico Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 11 / 2013
Transaction ID : 47FFAB3CE956206121C8

Amount of Each Receipt this Period
100.00

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)	PAGE 33 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lee Hoagland

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, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 20 / 2013
Transaction ID : 1EC2F5F3-1D94-4B24-

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Betsy A. Holland

Mailing Address 84 Platt Ave

City Sausalito State CA Zip Code 94965-1896

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : 72F8005ABC6D599E1B9

Amount of Each Receipt this Period
225.00

Full Name (Last, First, Middle Initial)
C. Michael Hollett

Mailing Address 817 Lathrop Dr

City Stanford State CA Zip Code 94305-1054

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : BA8E8E48D4FB8500DEF

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1450.00

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 34 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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 Political Action Committee

A. Hyewon Hyun
Full Name (Last, First, Middle Initial)

Mailing Address 330 Mount Auburn St
Mount Auburn Hospital

City Cambridge State MA Zip Code 02138-5502

FEC ID number of contributing federal political committee. **C**

Name of Employer Schatzki Associates, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2013
Transaction ID : **BB4C4D4E0F96399A7B9**

Amount of Each Receipt this Period
500.00

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

Mailing Address 850 Chiltern Rd

City Hillsborough State CA Zip Code 94010-7028

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : **EEDC0D829274F2BF0E0**

Amount of Each Receipt this Period
225.00

C. Peter Johnstone
Full Name (Last, First, Middle Initial)

Mailing Address 8926 Waterside Cir

City Indianapolis State IN Zip Code 46278-1158

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiation Oncology Division Occupation Radiation Oncologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 22 / 2013
Transaction ID : **4B97B656520DAEF19E31**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 825.00

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 35 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Jeffrey Judd
Full Name (Last, First, Middle Initial)

Mailing Address 12701 Post Oak Rd

City Saint Louis State MO Zip Code 63131-1445

FEC ID number of contributing federal political committee. **C**

Name of Employer South County Radiologists, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 25 / 2013
Transaction ID : 1001541C-D24E-4FE8-

Amount of Each Receipt this Period
250.00

B. James Junker
Full Name (Last, First, Middle Initial)

Mailing Address 16 Fox Mdws

City Saint Louis State MO Zip Code 63127-1401

FEC ID number of contributing federal political committee. **C**

Name of Employer Scott Radiological Group, Inc. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 24 / 2013
Transaction ID : 783C2CC7-4059-4C05-

Amount of Each Receipt this Period
250.00

C. Michael Jurgens
Full Name (Last, First, Middle Initial)

Mailing Address 6955 Cordery Rd

City Cumming State GA Zip Code 30040-8829

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Florida-Shands Hospital Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : F9958FC5FF650D292EC

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)	PAGE 36 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Jay Kaiser
Full Name (Last, First, Middle Initial)

Mailing Address 1260 S Eliseo Dr
Ca Advanced Imaging Med Assoc Inc

City Greenbrae State CA Zip Code 94904-2009

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : 028F2A630E10F302893

Amount of Each Receipt this Period
225.00

B. Taj Kattapuram
Full Name (Last, First, Middle Initial)

Mailing Address 57 W Cedar St
Apt 3

City Boston State MA Zip Code 02114-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer Massachusetts General Hospital Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 18 / 2013
Transaction ID : 459D98C1F951A693BAA2

Amount of Each Receipt this Period
1000.00

C. Leila Khorashadi
Full Name (Last, First, Middle Initial)

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 Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2013
Transaction ID : DF082BA41822E0F2FD9

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1725.00

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 37 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Karen Killeen
Full Name (Last, First, Middle Initial)

Mailing Address 3808 Dover Rd

City Richmond State VA Zip Code 23221-3337

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2013
Transaction ID : 01E2D36B80E495699E7

Amount of Each Receipt this Period 250.00

B. Amy Kirby
Full Name (Last, First, Middle Initial)

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 Radiology Resident

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt 03 / 02 / 2013
Transaction ID : 452CBDC3C1C1A24D5916

Amount of Each Receipt this Period 210.00

C. Pamela Kiser
Full Name (Last, First, Middle Initial)

Mailing Address 12509 Cottage Cove Ct

City Richmond State VA Zip Code 23233-3386

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2013
Transaction ID : DF319787986D3B2F243

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 710.00

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 38 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Ralph Koenker
Full Name (Last, First, Middle Initial)

Mailing Address 14 Meadow Ridge Dr

City Corte Madera State CA Zip Code 94925-2074

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **765.00**

Date of Receipt **03 / 28 / 2013**

Transaction ID : F44CFE3521F95A9FD96

Amount of Each Receipt this Period **765.00**

B. Karsten Konerding
Full Name (Last, First, Middle Initial)

Mailing Address 205 Cyril Ln

City Richmond State VA Zip Code 23229-7740

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 05 / 2013**

Transaction ID : 8E96ADA4FA053A51D9A

Amount of Each Receipt this Period **250.00**

C. Jeffrey Kramer
Full Name (Last, First, Middle Initial)

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 08 / 2013**

Transaction ID : 2F21572CDD50288E702

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **1115.00**

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 39 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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 Political Action Committee

A. Richard Kundel
Full Name (Last, First, Middle Initial)

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2013
Transaction ID : A7F1D78E3E12DF8B7E4

Amount of Each Receipt this Period 250.00

B. Paul Lampert
Full Name (Last, First, Middle Initial)

Mailing Address 11595 E 26th St

City Yuma State AZ Zip Code 85367-2203

FEC ID number of contributing federal political committee. **C**

Name of Employer MDIG Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2013
Transaction ID : 49C48F1D77B6E6C50910

Amount of Each Receipt this Period 100.00

C. Mark Lequire
Full Name (Last, First, Middle Initial)

Mailing Address 2055 Myrtlewood Dr

City Montgomery State AL Zip Code 36111-1003

FEC ID number of contributing federal political committee. **C**

Name of Employer Montgomery Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 21 / 2013
Transaction ID : D81CD6338EF7469F8165

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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 40 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Paul Leslie
Full Name (Last, First, Middle Initial)

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2013
Transaction ID : AE75C993F62095183FB

Amount of Each Receipt this Period 100.00

B. Deborah Levine
Full Name (Last, First, Middle Initial)

Mailing Address 330 Brookline Ave
Beth Israel-Deaconess Med Center

City Boston State MA Zip Code 02215-5400

FEC ID number of contributing federal political committee. **C**

Name of Employer Beth Israel-Deaconess Med Ctr Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 01 / 2013
Transaction ID : E909CA63A9BC18C5A07

Amount of Each Receipt this Period 1000.00

C. Arthur Li
Full Name (Last, First, Middle Initial)

Mailing Address 4152 Willmar Dr

City Palo Alto State CA Zip Code 94306-3835

FEC ID number of contributing federal political committee. **C**

Name of Employer Johns Hopkins Hosp-Johns Hopkins Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 28 / 2013
Transaction ID : B7D03000AEC66F9FBB8

Amount of Each Receipt this Period 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1325.00

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 41 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Gregory Lim

Mailing Address 1552 Los Montes Dr

City State Zip Code
Burlingame CA 94010-5964

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
California Advanced Imaging Diagnostic Radiologist

Receipt For:
 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
 03 / 28 / 2013
Transaction ID : D52341295101AC67041

Amount of Each Receipt this Period
225.00

Full Name (Last, First, Middle Initial)
B. John Lohnes Jr.

Mailing Address PO Box 8903
Wichita Radiological Group Pa

City State Zip Code
Wichita KS 67208-0903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wichita Radiological Group PA 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 / 02 / 2013
Transaction ID : 4058B384B7FC91035BFA

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Thomas Lombardi

Mailing Address 6889 Chiswick Ct

City State Zip Code
New Albany OH 43054-7604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Riverside Radiology Associates Inc 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 / 01 / 2013
Transaction ID : 7035E6718E02F972B11

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	725.00
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 42 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. William Lowry

Mailing Address 1208 Mistletoe Dr

City Fort Worth State TX Zip Code 76110-1017

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Associates of North Texas Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 09 / 2013

Transaction ID : **4EA8AC66-3A06-456D-**

Amount of Each Receipt this Period 2500.00

Full Name (Last, First, Middle Initial)
B. Kay Lozano

Mailing Address 8100 E Union Ave Unit 2104

City Denver State CO Zip Code 80237-2979

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Imaging Association Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 627.00

Date of Receipt 03 / 14 / 2013

Transaction ID : **64C2166D13AD54D529E**

Amount of Each Receipt this Period 209.00

Full Name (Last, First, Middle Initial)
C. Kay Lozano

Mailing Address 8100 E Union Ave Unit 2104

City Denver State CO Zip Code 80237-2979

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Imaging Association Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 627.00

Date of Receipt 03 / 20 / 2013

Transaction ID : **4AA093ACC85712AE6E49**

Amount of Each Receipt this Period 209.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2918.00

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 43 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. David Marcus
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 Georgetown Ave
 City San Mateo State CA Zip Code 94402-2253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist
 Receipt For: 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
 03 / 28 / 2013
Transaction ID : 957B7A5E7809C296C4F
 Amount of Each Receipt this Period
 225.00

B. Edward B. Marianacci
 Full Name (Last, First, Middle Initial)
 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: 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 / 29 / 2013
Transaction ID : 6A28DA6848259EF0D54
 Amount of Each Receipt this Period
 500.00

C. Vickie Massey
 Full Name (Last, First, Middle Initial)
 Mailing Address 805 W 51st St
 City Kansas City State MO Zip Code 64112-2372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kansas City Cancer Centers Occupation Radiation Oncologist
 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 / 22 / 2013
Transaction ID : 0866EC70AC8F8F521F1
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1225.00
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 44 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael McCarthy

Mailing Address 1615 Eagle Pt

City San Antonio State TX Zip Code 78248-1337

FEC ID number of contributing federal political committee. **C**

Name of Employer University of TX Health Science Ctr Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
03 / 01 / 2013
Transaction ID : A42AE41A-E592-4C51-

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Joseph McGinley

Mailing Address 5910 S Cedar St

City Casper State WY Zip Code 82601-6244

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 ▼ 500.00

Date of Receipt
03 / 12 / 2013
Transaction ID : 0D1A969A4ED5D7175BD

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Geraldine 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
03 / 20 / 2013
Transaction ID : 47C58479607BFD4D8812

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶ 1600.00

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 45 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Charles McGuire
Full Name (Last, First, Middle Initial)

Mailing Address 1937 N Saddle Creek Ct

City State Zip Code
Wichita KS 67206-4401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wichita Radiological Group Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 08 / 2013
Transaction ID : **CD8BFA45-EC94-4FCE-**

Amount of Each Receipt this Period
1000.00

B. Kathleen McKenna
Full Name (Last, First, Middle Initial)

Mailing Address 154 Gramercy Dr

City State Zip Code
San Mateo CA 94402-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
California Advanced Imaging Medical As Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : **1E0ED7FC51AC2598DA2**

Amount of Each Receipt this Period
225.00

C. J. Mark McKinney
Full Name (Last, First, Middle Initial)

Mailing Address 4500 San Pablo Rd S
Mayo Clinic

City State Zip Code
Jacksonville FL 32224-1865

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mayo Clinic Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 27 / 2013
Transaction ID : **40DFA9DDA8022505BE05**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1325.00

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 46 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Steven 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 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 / 2013

Transaction ID : 49A592A02FB1C33F1A91

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Debra Monticciolo

Mailing Address 2401 S 31st St
Scott and White Clinic

City Temple State TX Zip Code 76508-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Scott and White Clinic 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 / 20 / 2013

Transaction ID : 3C28370B-BB12-4592-

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Kirk Moon Jr.

Mailing Address 1642 16th Ave

City San Francisco State CA Zip Code 94122-3527

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As Occupation Diagnostic Radiologist

Receipt For:
 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
03 / 28 / 2013

Transaction ID : 0255A0088E2FAE5595E

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **975.00**

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 47 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Timothy E. Moore

Mailing Address 981045 Nebraska Medical Ctr
Univ of Nebraska Medical Center

City Omaha State NE Zip Code 68198-1045

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Nebraska Medical Ctr Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **03 / 26 / 2013**

Transaction ID : C2605F7C0325887BD44

Amount of Each Receipt this Period **30.00**

Full Name (Last, First, Middle Initial)
B. Gail N Morgan

Mailing Address 5253 S Graham St

City Seattle State WA Zip Code 98118-2918

FEC ID number of contributing federal political committee. **C**

Name of Employer Virginia Mason Medical Center Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **03 / 26 / 2013**

Transaction ID : 2E53DB98-8066-46EA-

Amount of Each Receipt this Period **1000.00**

Full Name (Last, First, Middle Initial)
C. Demetrius Morros

Mailing Address 7418 Ridgcrest Court Rd

City Vestavia State AL Zip Code 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 **03 / 12 / 2013**

Transaction ID : 40DB94FEE9C46D3D60E4

Amount of Each Receipt this Period **83.34**

SUBTOTAL of Receipts This Page (optional)..... **1113.34**

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 48 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Bara Mouradi

Mailing Address 34 River Run

City East Greenwich State RI Zip Code 02818-1570

FEC ID number of contributing federal political committee. **C**

Name of Employer The Imaging Institute 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 / 2013

Transaction ID : 77A1501C-B168-4FF3-

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Mohit Naik

Mailing Address 424 W End Ave Apt 18C

City New York State NY Zip Code 10024-5785

FEC ID number of contributing federal political committee. **C**

Name of Employer Hackensack Radiology Group Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2013

Transaction ID : 010A2A841C57632D5D0

Amount of Each Receipt this Period
 38.46

Full Name (Last, First, Middle Initial)
C. Adam Nevitt

Mailing Address 248 Granada Dr

City Corte Madera State CA Zip Code 94925-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist

Receipt For:
 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
 03 / 28 / 2013

Transaction ID : F3A5D12F3FF50A29C4D

Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 513.46

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 49 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Bobbette Newsome
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 Adingham Ct
 City Richmond State VA Zip Code 23229-7761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Radiology, P.C. 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 / 05 / 2013
Transaction ID : 7513498D9402DE40826
 Amount of Each Receipt this Period
 250.00

B. Steven Oglevie
 Full Name (Last, First, Middle Initial)
 Mailing Address 2515 Vista Dr
 City Newport Beach State CA Zip Code 92663-5631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Newport Radiology Associates 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 / 08 / 2013
Transaction ID : 7E24A5B997387039E81
 Amount of Each Receipt this Period
 250.00

C. John Olsen
 Full Name (Last, First, Middle Initial)
 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 Ohio State University Hospital 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 / 19 / 2013
Transaction ID : A82BCDF695391E0BC1C
 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)	PAGE 50 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Dennis Orwig

Mailing Address 25 Wolfe Glen Way

City State Zip Code
Kentfield CA 94904-1004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
California Advanced Imaging Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : 217FC2DC568FB6C9007

Amount of Each Receipt this Period
225.00

Full Name (Last, First, Middle Initial)
B. Allen Oshita

Mailing Address PO Box 7999

City State Zip Code
San Francisco CA 94120-7999

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
California Advanced Imaging Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : BA793863266524DF1B5

Amount of Each Receipt this Period
225.00

Full Name (Last, First, Middle Initial)
C. Pamela Otto

Mailing Address 7703 Floyd Curl Dr
Uthscsa MS 7800

City State Zip Code
San Antonio TX 78229-3901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Univ of TX Hlth Sci Ctr Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 22 / 2013
Transaction ID : DCE18363EDE5EABFF54

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 51 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Brian Pacious
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 Sumac Ln
 City Richmond State VA Zip Code 23229-7924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Radiology, P.C. 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 / 05 / 2013
Transaction ID : F7E18CB853DFDA7446C
 Amount of Each Receipt this Period
250.00

B. Alan Padgett
 Full Name (Last, First, Middle Initial)
 Mailing Address 318 Wickham Glen Dr
 City Richmond State VA Zip Code 23238-6160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Radiology, P.C. 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 / 05 / 2013
Transaction ID : 5F6326AEDBCFA625D51
 Amount of Each Receipt this Period
250.00

C. Salil Parikh
 Full Name (Last, First, Middle Initial)
 Mailing Address 9477 Johnson Road Ext
 City Germantown State TN Zip Code 38139-3603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Assoc of Ocala 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 / 20 / 2013
Transaction ID : 405C902A79FAA3CE3FD1
 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:	PAGE 52 OF 84
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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 Political Action Committee

A. Divyesh Patel
Full Name (Last, First, Middle Initial)

Mailing Address 1143 Treadway Rd

City Munster	State IN	Zip Code 46321-2856
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiologic Associates of Northwest Ind	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	/	20	/	2013

Transaction ID : 44FD881D088FAD234C24

Amount of Each Receipt this Period

100.00

B. Jean-Pierre Phancao
Full Name (Last, First, Middle Initial)

Mailing Address 3700 California St
Cpmc

City San Francisco	State CA	Zip Code 94118-1618
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Medical As	Occupation Diagnostic Radiologist
--	--------------------------------------

Receipt For:
 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
03	/	28	/	2013

Transaction ID : 2510459161FD2844F69

Amount of Each Receipt this Period

225.00

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

Mailing Address 10243 N 99th St

City Scottsdale	State AZ	Zip Code 85258-4713
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical Diagnostic Imaging Group	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	/	26	/	2013

Transaction ID : 6CB5BC70093E9DA4D81

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1325.00
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 53 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Thomas Poulton
Full Name (Last, First, Middle Initial)

Mailing Address 2600 6th St SW
Aultman Hospital

City Canton State OH Zip Code 44710-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer Aultman Hospital Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2013
Transaction ID : 4BB2AAC6F229EC3659CD

Amount of Each Receipt this Period 250.00

B. Susan Prizzia
Full Name (Last, First, Middle Initial)

Mailing Address 4721 Trail Wynd Ct

City Glen Allen State VA Zip Code 23059-2532

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2013
Transaction ID : DC0E12D5F049D477FB0

Amount of Each Receipt this Period 250.00

C. Mohammed Fareed Quraishi
Full Name (Last, First, Middle Initial)

Mailing Address 534 13th Ave W

City Kirkland State WA Zip Code 98033-4831

FEC ID number of contributing federal political committee. **C**

Name of Employer Radia, Inc. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2013
Transaction ID : 4F4BA11D8417CFBF68A6

Amount of Each Receipt this Period 50.00

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: (check only one)	PAGE 54 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. James Rawson
Full Name (Last, First, Middle Initial)

Mailing Address 1120 15th St
Medical College of Georgia, # BA14

City Augusta State GA Zip Code 30912-0004

FEC ID number of contributing federal political committee. **C**

Name of Employer Medical College of Georgia Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 22 / 2013
Transaction ID : EF023E602D444F1EA1C2

Amount of Each Receipt this Period 83.34

B. William Ray
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Fort Jesse Rd
Bloomington Radiology Sc, Ste 280

City Normal State IL Zip Code 61761-6289

FEC ID number of contributing federal political committee. **C**

Name of Employer Bloomington Radiology SC Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2013
Transaction ID : 82144BD492164FDAAE26

Amount of Each Receipt this Period 100.00

C. Ralph Reichle
Full Name (Last, First, Middle Initial)

Mailing Address 259 Independence Rd

City Concord State MA Zip Code 01742-2655

FEC ID number of contributing federal political committee. **C**

Name of Employer Schatzki Associates, Inc. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2013
Transaction ID : 5F2C3A9C8A328ADA5D7

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 683.34

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 55 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lawrence Reif

Mailing Address 4250 Wilderness Dr

City Mount Pleasant State WI Zip Code 53403-4416

FEC ID number of contributing federal political committee. **C**

Name of Employer Infinity Healthcare 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 / 12 / 2013
Transaction ID : F819AAA9C6E6CCABE34

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Richard Rhee

Mailing Address 7 Agostino

City Newport Coast State CA Zip Code 92657-1220

FEC ID number of contributing federal political committee. **C**

Name of Employer Newport Radiology Associates 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 / 08 / 2013
Transaction ID : B99FB45ACB5BB931ED8

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
c. Philip Rogoff

Mailing Address 58 Rodgers Rd

City Carlisle State MA Zip Code 01741-1865

FEC ID number of contributing federal political committee. **C**

Name of Employer Schatzki Associates, Inc. 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 / 29 / 2013
Transaction ID : B3B95EA1FD8BDEA3DED

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 56 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Donald Romanelli

Mailing Address 31 Smith Pl

City Cambridge State MA Zip Code 02138-1007

FEC ID number of contributing federal political committee. **C**

Name of Employer Schatzki Associates, Inc. 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 / 29 / 2013

Transaction ID : A494FE61D2179790B02

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Michael Roossin

Mailing Address 9 Sea Shell

City Newport Coast State CA Zip Code 92657-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer Newport Harbor Radiology Assoc. 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 / 08 / 2013

Transaction ID : A1E881CCBB5F866C798

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Damon Sacco

Mailing Address PO Box 895

City Sausalito State CA Zip Code 94966-0895

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist

Receipt For:
 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
03 / 28 / 2013

Transaction ID : 8BD2EB3DFC0719BDFAO

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional).....▶	975.00
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 57 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Arthur Sandy

Mailing Address 2821 Argyle Rd

City Birmingham State AL Zip Code 35213-3403

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 **03 / 25 / 2013**

Transaction ID : CADCF76D6444962A23E

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)
B. 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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 29 / 2013**

Transaction ID : 5E7B9A470DAF57BA6CC

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial)
c. Jeremy 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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 29 / 2013**

Transaction ID : C891CB32D17D67D067E

Amount of Each Receipt this Period **500.00**

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)	PAGE 58 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. John Schrupf
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Chanticleer St
 City Larkspur State CA Zip Code 94939-1515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **03 / 28 / 2013**
Transaction ID : A4BF5A868BDE52240CF
 Amount of Each Receipt this Period **225.00**

B. Christopher Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address 8701 W Watertown Plank Rd Medical College of Wisconsin
 City Milwaukee State WI Zip Code 53226-3548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Medical College of Wisconsin Occupation Radiation Oncologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 12 / 2013**
Transaction ID : FDB4DF8B0F195BA3157
 Amount of Each Receipt this Period **500.00**

C. Martin Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2090 Columbiana Rd Radiology Associates of Birmingham
 City Vestavia State AL Zip Code 35216-2152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiology Associates of Birmingham, PC Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 30 / 2013**
Transaction ID : 9874CCF9CACC4A048423
 Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **825.00**
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 59 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Ali Sepahdari
Full Name (Last, First, Middle Initial)

Mailing Address 11826 Dorothy St
Apt 301

City Los Angeles State CA Zip Code 90049-5384

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Illinois Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 11 / 2013
Transaction ID : 45D7BDCA30E4A513971E

Amount of Each Receipt this Period
100.00

B. Cynthia Sherry
Full Name (Last, First, Middle Initial)

Mailing Address 6615 Glendora Ave

City Dallas State TX Zip Code 75230-5219

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Associates of North Texas Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt
03 / 20 / 2013
Transaction ID : 61E5E59E-AE6C-4126-

Amount of Each Receipt this Period
365.00

C. Christian Shield
Full Name (Last, First, Middle Initial)

Mailing Address 613 Saint Christophers Rd

City Richmond State VA Zip Code 23226-2727

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : C65B3409A2B8D47FFC4

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 715.00

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 60 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Shortsleeve

Mailing Address 4 Granville Rd

City Lincoln State MA Zip Code 01773-3106

FEC ID number of contributing federal political committee. **C**

Name of Employer Schatzki Associates, Inc. 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 / 29 / 2013

Transaction ID : 633084F1B6288883F7

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ezequiel Silva III

Mailing Address 3 Sheffield Park Dr

City San Antonio State TX Zip Code 78209-8307

FEC ID number of contributing federal political committee. **C**

Name of Employer South Texas Radiology Group, P.A. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 14 / 2013

Transaction ID : 0A3336E9-8C72-4277-

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Lonnie Simmons

Mailing Address 1900 South Ave
Gundersen/Lutheran Med Center, # C

City La Crosse State WI Zip Code 54601-5467

FEC ID number of contributing federal political committee. **C**

Name of Employer Gundersen Lutheran Clinic Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2013

Transaction ID : ED7BF0B63B834ABEA864

Amount of Each Receipt this Period
83.34

SUBTOTAL of Receipts This Page (optional)..... **683.34**

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 61 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial) A. Alex Sleeker		Date of Receipt
Mailing Address 1905 Grove Ave		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Richmond	VA	23220-4507
FEC ID number of contributing federal political committee.		Transaction ID : 5E3143B071F872BDE16
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Commonwealth Radiology, P.C.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael Sloan		Date of Receipt
Mailing Address PO Box 1646		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cheyenne	WY	82003-1646
FEC ID number of contributing federal political committee.		Transaction ID : EB00DCDFA899D6A5BF7
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Casper Medical Imaging, P.C.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Eric Smith		Date of Receipt
Mailing Address 678 6th Ave		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Francisco	CA	94118-3805
FEC ID number of contributing federal political committee.		Transaction ID : B1432EE251CE3AC1FDF
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="225.00"/>
Name of Employer	Occupation	
California Advanced Imaging Medical As	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="975.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 62 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 Political Action Committee

Full Name (Last, First, Middle Initial) A. Geoffrey Smith		Date of Receipt
Mailing Address 419 S Washington St Casper Medical Imaging, Ste 101		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City Casper	State WY	Zip Code 82601-2951
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 7EAE7A12DA09E36422A
Name of Employer Casper Medical Imaging		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		<input type="text" value="1500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. Kevin L Smith		Date of Receipt
Mailing Address 1990 Connecticut Ave S Regional Diagnostic Radiology, Ste		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City Sartell	State MN	Zip Code 56377-2554
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 438783E43EC4E94824D5
Name of Employer Regional Diagnostic Radiology		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		<input type="text" value="208.34"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="625.02"/>	

Full Name (Last, First, Middle Initial) C. Lori Smithson		Date of Receipt
Mailing Address 3331 Lady Marian Ct		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City Midlothian	State VA	Zip Code 23113-1180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 9D279F3DEBCDFD4D1EF
Name of Employer Commonwealth Radiology		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1958.34"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 63 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Brian Stanken
Full Name (Last, First, Middle Initial)

Mailing Address 825 Chalkstone Ave
Roger Williams Medical Center

City Providence State RI Zip Code 02908-4728

FEC ID number of contributing federal political committee. **C**

Name of Employer Univ of Maryland Center Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
03 / 12 / 2013
Transaction ID : C6A89D9F-39EA-4423-

Amount of Each Receipt this Period
500.00

B. Eric Stein
Full Name (Last, First, Middle Initial)

Mailing Address 130 S Bryn Mawr Ave
Bryn Mawr Hospital

City Bryn Mawr State PA Zip Code 19010-3121

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Associates of the Main Line Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 433.36

Date of Receipt
03 / 29 / 2013
Transaction ID : 4550D778980E6EF0E6C

Amount of Each Receipt this Period
108.34

C. William Stephenson
Full Name (Last, First, Middle Initial)

Mailing Address 815 Vista Rd

City Hillsborough State CA Zip Code 94010-6965

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : E8EA0C90ED0F199A7DC

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 833.34

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 64 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Susan Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address 1040 Bridle Way
 City Hillsborough State CA Zip Code 94010-7406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cal Advanced Imaging Med. Assoc. Occupation Diagnostic Radiologist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **03 / 28 / 2013**
Transaction ID : 9A4B50E19A63DC2F7EE
 Amount of Each Receipt this Period **225.00**

B. Alan Stolpen
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Hawkins Dr Univ of Iowa Hosp and Clinics
 City Iowa City State IA Zip Code 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 **03 / 27 / 2013**
Transaction ID : 49718CCF8435B713DF15
 Amount of Each Receipt this Period **500.00**

C. Daniel Sulser
 Full Name (Last, First, Middle Initial)
 Mailing Address 5280 Squaw Creek Rd
 City Casper State WY Zip Code 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 **03 / 12 / 2013**
Transaction ID : DE9D81CF5311386C040
 Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional).....	1225.00
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 65 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 Political Action Committee

A. Arpita Swami
Full Name (Last, First, Middle Initial)

Mailing Address 120 Pleasant St
Unit 105

City Watertown State MA Zip Code 02472-2392

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
03 / 29 / 2013
Transaction ID : **CCB9FEC52985C2E5F87**

Amount of Each Receipt this Period
500.00

B. Richard Szucs
Full Name (Last, First, Middle Initial)

Mailing Address 3526 Crossings Way

City Midlothian State VA Zip Code 23113-6348

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C.
Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : **EB018C1930D12386ACE**

Amount of Each Receipt this Period
250.00

C. Richard Taxin
Full Name (Last, First, Middle Initial)

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, Ltd.
Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
03 / 14 / 2013
Transaction ID : **E98C7E4AF14A23AF926**

Amount of Each Receipt this Period
520.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1270.00

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 66 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Siew Teoh
Full Name (Last, First, Middle Initial)
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: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 29 / 2013**
Transaction ID : E2F0A50560514515092
Amount of Each Receipt this Period **500.00**

B. Sean Theisen
Full Name (Last, First, Middle Initial)
Mailing Address 1346 Whispering Maples Ct
City Ann Arbor State MI Zip Code 48108-2492
FEC ID number of contributing federal political committee. **C**
Name of Employer Huron Valley Radiology Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 23 / 2013**
Transaction ID : D79C06C1F0E343D9ACA5
Amount of Each Receipt this Period **500.00**

C. Scott Truhlar
Full Name (Last, First, Middle Initial)
Mailing Address 221 E College St Apt 1208
City Iowa City State IA Zip Code 52240-1757
FEC ID number of contributing federal political committee. **C**
Name of Employer Radiologic Medical Services, P.C. Occupation Diagnostic Radiologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 22 / 2013**
Transaction ID : 7B3FF10AE4E2869E3DF
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**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. William Van Dalsem
 Full Name (Last, First, Middle Initial)
 Mailing Address 471 Old Newport Blvd, Ste 302
 Newport Harbor Radiology Associate
 City State Zip Code
 Newport Beach CA 92663-4244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Newport Harbor Rad Assoc 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 / 08 / 2013
Transaction ID : 57169FA80133734576B
 Amount of Each Receipt this Period
 250.00

B. Mark Vaughn
 Full Name (Last, First, Middle Initial)
 Mailing Address 328 Wickham Glen Dr
 City State Zip Code
 Richmond VA 23238-6160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Commonwealth Radiology, P.C. 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 / 05 / 2013
Transaction ID : FC9EC0205FFF78B00A7
 Amount of Each Receipt this Period
 250.00

C. James Webb
 Full Name (Last, First, Middle Initial)
 Mailing Address 9132 E 101st PI
 City State Zip Code
 Tulsa OK 74133-6912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Univ of Oklahoma Health Sci Ctr Diagnostic Radiologist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2013
Transaction ID : BA9A48DC2E534E85B7CF
 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)	PAGE 68 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

A. Gregg Weinberg
Full Name (Last, First, Middle Initial)

Mailing Address 3600 Salles Ridge Ct

City Midlothian State VA Zip Code 23113-2037

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : **BF1506C161E62DB2CAF**

Amount of Each Receipt this Period
250.00

B. Simon Westacott
Full Name (Last, First, Middle Initial)

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 08 / 2013
Transaction ID : **4D3243E4F6F50E00324**

Amount of Each Receipt this Period
100.00

C. Patrick Weybright
Full Name (Last, First, Middle Initial)

Mailing Address 1234 Mastersonville Rd

City Manheim State PA Zip Code 17545-9461

FEC ID number of contributing federal political committee. **C**

Name of Employer Lancaster Radiology Associates Occupation Diagnostic Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
03 / 08 / 2013
Transaction ID : **9EDC96F44C302278A79**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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 69 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
American College of Radiology Association Political Action Committee

A. Richard Wheat
Full Name (Last, First, Middle Initial)

Mailing Address 170 Alameda De Las Pulgas
Sequoia Hospital

City Redwood City State CA Zip Code 94062-2751

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : 969F56819C8BC9F5021

Amount of Each Receipt this Period
225.00

B. John Wilson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 15 Arcadia Pl

City Hillsborough State CA Zip Code 94010-7010

FEC ID number of contributing federal political committee. **C**

Name of Employer California Advanced Imaging Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
03 / 28 / 2013
Transaction ID : DD50B8255F8F7E3A834

Amount of Each Receipt this Period
225.00

C. Janette Worthington
Full Name (Last, First, Middle Initial)

Mailing Address 1510 Willow Lawn Dr
Commonwealth Radiology Pc, Ste 117

City Richmond State VA Zip Code 23230-3429

FEC ID number of contributing federal political committee. **C**

Name of Employer Commonwealth Radiology, P.C. Occupation Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
03 / 05 / 2013
Transaction ID : 209784945EC1D9ACD34

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 70 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Political Action Committee

Full Name (Last, First, Middle Initial) A. Paula Yeghiayan		Date of Receipt
Mailing Address 101 W 90th St Apt 19B		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City New York	State NY	Zip Code 10024-1273
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A1F4D9B7-C14D-47EB-
Name of Employer Wyckoff Heights Medical Center		Amount of Each Receipt this Period
Occupation Physician		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Christopher Yoo		Date of Receipt
Mailing Address 180 Manchester St		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City San Francisco	State CA	Zip Code 94110-5217
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 53897081D926256DB8C
Name of Employer California Advanced Imaging		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		<input type="text" value="225.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) C. Melissa Yu		Date of Receipt
Mailing Address 6 Ventana Ridge Dr		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City Aliso Viejo	State CA	Zip Code 92656-1849
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 54347D573FDA626DEEB
Name of Employer Newport Harbor Radiology Associates Me		Amount of Each Receipt this Period
Occupation Diagnostic Radiologist		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1475.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 71 OF 84
(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 Political Action Committee

A. Full Name (Last, First, Middle Initial)
H. Jay Zeskind

Mailing Address 3835 Pine Harbor Dr

City State Zip Code
West Bloomfield MI 48323-1650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Diagnostic Radiology Consultants, PC Diagnostic Radiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 22 / 2013
Transaction ID : 124B35009E191411837

Amount of Each Receipt this Period
1000.00

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	81450.50

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of America - Hard

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 28261-7025

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 162B7D92DEBB1BABF2B

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alaskans for Begich 2014

Mailing Address 1231 W Northern Lts #605

City Anchorage State AK Zip Code 99503

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Mark Peter Begich

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2013

Transaction ID : 0B3CF19D03BBEFBF697

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Benishek for Congress, Inc.

Mailing Address PO Box 108

City Gladstone State MI Zip Code 49837-0108

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Daniel J. Benishek

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : 99FF2327C8BBC6D4AE1

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Bilirakis for Congress

Mailing Address PO Box 606

City Tarpon Springs State FL Zip Code 34688-0606

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Gus Michael Bilirakis

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2013

Transaction ID : 932FB3C42A2BE7A6582

Amount of Each Disbursement this Period

2000.00

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

7500.00

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)

<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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bill Cassidy for Congress

Mailing Address PO Box 80505

City State Zip Code
Baton Rouge LA 70898-0505

Purpose of Disbursement
2014 Primary

Candidate Name

William Cassidy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District: 06

Date of Disbursement

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

Transaction ID : D2D40B384C4FBAFB7D0

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Boehner for Speaker

Mailing Address 320 First St., SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
2013 Contribution

Candidate Name

Boehner for Speaker

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

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

Transaction ID : A08B47D39CBF92FCF09

Amount of Each Disbursement this Period

2	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Linda Sanchez

Mailing Address 50 E St, SE
Suite 1

City State Zip Code
Washington DC 20003

Purpose of Disbursement
2014 Primary

Candidate Name

Linda T. Sanchez

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 38

Date of Disbursement

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

Transaction ID : 49827DB6BF17BB14E21

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

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

5	5	0	0	0	0
---	---	---	---	---	---

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

5	5	0	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Common Sense Colorado

Mailing Address PO Box 1978

City State Zip Code
Denver CO 80201

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Common Sense Colorado

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2013

Transaction ID : 2169D24CAF1C5DF1729

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Conservatives Organized To Advance Tomorrow's Solutions (COATS PAC)

Mailing Address PO Box 34303

City State Zip Code
Indianapolis IN 46234

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Conservatives Organized To Advance Tomorrow's Solutions (COATS PAC)

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2013

Transaction ID : F75BDF786ECA2105AC8

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Ave NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Democratic Senatorial Campaign Committee

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 01 / 2013

Transaction ID : DC7A453DCC8D84DBCAF

Amount of Each Disbursement this Period

7500.00

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

12000.00

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)

<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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democratic Senatorial Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2013

Mailing Address 120 Maryland Ave NE

Transaction ID : 68461D6476E5E4949EA

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

7500.00

Purpose of Disbursement
2013 Contribution

011
Category/ Type

Candidate Name

Democratic Senatorial Campaign Committee

Office Sought: House Senate President

Disbursement For: 2013
 Primary General
 Other (specify) Contribution

State: District:

Full Name (Last, First, Middle Initial)

B. Fleming for Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2013

Mailing Address PO Box 1236

Transaction ID : A29297BE34ADEFB7FF3

City Minden State LA Zip Code 71058-1236

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2014 Primary

011
Category/ Type

Candidate Name

John Calvin Fleming Jr.

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: LA District: 04

Full Name (Last, First, Middle Initial)

C. Friends of Dave Reichert

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2013

Mailing Address PO Box 2032

Transaction ID : 4654569D4CB9AA4FCB9

City Issaquah State WA Zip Code 98027

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
2014 Primary

011
Category/ Type

Candidate Name

David G. Reichert

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: WA District: 08

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Joe Pitts

Mailing Address PO Box 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Joseph R. Pitts

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 16

Date of Disbursement

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

Transaction ID : F9273FF3AC86ED73219

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Lois Capps

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

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

Transaction ID : D711C3D17D056C27D2B

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Friends of Michelle

Mailing Address PO Box 25422

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Michelle Lujan Grisham

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

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

Transaction ID : 9E53159B7BD851C7123

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gingrey for Senate Inc

Mailing Address PO Box U

City: Marietta State: GA Zip Code: 30060

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name
Phil Gingrey

Office Sought: House
 Senate
 President
State: GA District: 11

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : **A9650E3DBB10136C5D8**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Gop Generation Y Fund

Mailing Address PO Box 9055

City: Peoria State: IL Zip Code: 61612

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name
Gop Generation Y Fund

Office Sought: House
 Senate
 President
State: District: Contribution

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2013

Transaction ID : **770968652E1D7F22146**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Great Land PAC

Mailing Address 700 13th Street, NW
Suite 600

City: Washington State: DC Zip Code: 20005

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name
Great Land PAC

Office Sought: House
 Senate
 President
State: District: Contribution

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : **C3CFA3CC2C775045BE0**

Amount of Each Disbursement this Period

1500.00

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

6000.00

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)

<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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kinzinger for Congress

Mailing Address PO Box 2365

City Ottawa State IL Zip Code 61350-6965

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Adam Kinzinger

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 11

Date of Disbursement

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

Transaction ID : 57E9BE0F71583BA0525

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Lance for Congress

Mailing Address PO Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Leonard Lance

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

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

Transaction ID : EE665BD4EC60484F0F2

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Lead Your Nation Now PAC (LYNN PAC)

Mailing Address PO Box 1872

City Topeka State KS Zip Code 66601

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Lead Your Nation Now PAC (LYNN PAC)

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

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

Transaction ID : CE7C5A0FA9E9A32ABDA

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

1	1	5	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

1	1	5	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lynn Jenkins for Congress

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601-1441

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Lynn Jenkins

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District: 02

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2013

Transaction ID : E51AED10AD04DC3C066

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Marsha Blackburn for Congress, Inc.

Mailing Address PO Box 3750

City Brentwood State TN Zip Code 37024-3750

Purpose of Disbursement
2014 Primary

011
Category/
Type

Candidate Name

Marsha Blackburn

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2013

Transaction ID : E2ABB3F71744B461F15

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. New PAC

Mailing Address PO Box 7480

City Visalia State CA Zip Code 93290

Purpose of Disbursement
2013 Contribution

011
Category/
Type

Candidate Name

New PAC

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : 7F784CE47ABAF61162D

Amount of Each Disbursement this Period

2500.00

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

12500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Palazzo for Congress

Mailing Address 13155 Highway 67 Suite B

City Biloxi State MS Zip Code 39532

Purpose of Disbursement
2014 Primary

011

Candidate Name

Steven M. Palazzo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MS District: 04

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2013

Transaction ID : 7FD682A6797E2CA98F1

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Poe for Congress

Mailing Address PO Box 14222

City Humble State TX Zip Code 77347

Purpose of Disbursement
2014 Primary

011

Candidate Name

Lloyd Poe

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 02

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : A53380271001D03A356

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Renee Ellmers for Congress Committee

Mailing Address PO Box 99567

City Raleigh State NC Zip Code 27624

Purpose of Disbursement
2014 Primary

011

Candidate Name

Renee Jacisin Ellmers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 02

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2013

Transaction ID : E0231FBE4549A976FF6

Amount of Each Disbursement this Period

5000.00

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

8500.00

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)

<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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard E Neal for Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
2014 Primary

011

Candidate Name

Richard Edmund Neal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2013

Transaction ID : 9EB9D5E0037190B968A

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Schakowsky for Congress

Mailing Address PO Box 5130

City Evanston State IL Zip Code 60204

Purpose of Disbursement
2014 Primary

011

Candidate Name

Janice D. Schakowsky

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 09

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2013

Transaction ID : 36DDCF49AE9AFA88864

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Schock for Congress

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement
2014 Primary

011

Candidate Name

Aaron Schock

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2013

Transaction ID : 20E20722B88E96A30F2

Amount of Each Disbursement this Period

5000.00

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

8500.00

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)

<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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Skipac

Mailing Address PO Box 83142

City Gaithersburg State MD Zip Code 20883-3142

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Skipac

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2013

Transaction ID : 42C7BA5D093865FE668

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Steve Israel for Congress Committee

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Steve J. Israel

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: NY District: 03

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2013

Transaction ID : 7A03BC58457D2CFA312

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Tim Scott for Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Timothy Eugene Scott

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) Contribution

State: SC District:

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2013

Transaction ID : F58904ED41DCE602DDC

Amount of Each Disbursement this Period

5000.00

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

9500.00

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)

<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 Political Action Committee

Full Name (Last, First, Middle Initial)

A. Victory Now PAC

Mailing Address 10537 St. Paul St.

City Kensington State MD Zip Code 20895

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Victory Now PAC

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

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

Transaction ID : AD070624E41D86ED864

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. Walden for Congress

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031-0037

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Gregory P. Walden

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: OR District: 02

Date of Disbursement

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

Transaction ID : D223A678448448980DB

Amount of Each Disbursement this Period

3	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Yg Action Fund

Mailing Address 211 North Union Street Suite 100

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2013 Contribution

011

Category/
Type

Candidate Name

Yg Action Fund

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

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

Transaction ID : EC0AA957533B1208E0B

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

1	0	5	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

1	0	9	5	0	0
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