Image# 14952617694 PAGE 1 / 73

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	Tourist Than 7417	Authorized Com			Office Use Only
1. NAME OF TOOMMITTEE (in full)	YPE OR PRINT ▼	Example: I over the lir	f typing, type les.	12FE4M5	
Political Action Committee	ee of the America	an Association	of Orthopae	edic Surgeo	onsPAC of AAOS
ADDRESS (number and street)	317 Massachusetts Ave	e., N.E.			
Check if different	1st Floor				
than previously reported. (ACC)	Washington			DC	20002
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦		STATE A	ZIP CODE ▲
C C00343137	3	B. IS THIS REPORT X	NEW (N) OR	AM (A)	IENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	<u> </u>	Mar 20 (M3)	Jun 20 (M6)		20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the		ntion (12C)	General Special (
October 15 Quarterly Report (Q3)	•	o. Conver	111011 (120)	Οροσίαι (120)
January 31 Year-End Report (YE)	EI	ection on	M / D D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the		I (30G)	Runoff (3	Special (30S)
Termination Report (TER)	·	ection on 11	M / D D /	2014	in the State of
5. Covering Period 10	/ D D / Y Y Y 16 20	14 thro	ugh 11	/ D D /	2014
I certify that I have examined this		_	and belief it is to	rue, correct and	d complete.
Type or Print Name of Treasurer	William J. Robb III, MD				
Signature of Treasurer William	J. Robb III, MD	[Electro	nically Filed]	Date 11	/ D D / Y Y Y Y Y Y 25 2014
NOTE: Submission of false, erroneo	us, or incomplete inform	nation may subject th	e person signing	this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

10 16 2014 Report Covering the Period: 2014 24 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 977438.67 January 1, 2014 (b) Cash on Hand at 962945.55 Beginning of Reporting Period..... 1322666.05 78683.03 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1041628.58 2300104.72 6(a) and 6(c) for Column B)..... 430327.02 1688803.16 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 611301.56 611301.56 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

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

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

I. Receipts	COLUMN A	COLUMN B
i. neceipts	Total This Period	Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	65027.22	1142298.33
(i) Itemized (use Schedule A)	65927.33	1142290.33
(ii) Unitersined	8503.33	127893.66
(ii) Unitemized(iii) TOTAL (add	6303.33	12700.00
Lines 11(a)(i) and (ii)▶	74430.66	1270191.99
() ()		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	74430.66	1270191.99
Totals to Line 33, page 5) Transfers From Affiliated/Other	7 10000	
Party Committees	0.00	0.00
rany commission		
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	2745.49	18642.21
. Refunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	
to Federal Candidates and Other		
Political Committees	1500.00	33750.00
Other Federal Receipts		0,05
(Dividends, Interest, etc.)	6.88	81.85
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(Holli Golloddio 110)	0.00	0.00
(b) Lovin Funda (from Cabadula HE)	0.00	0.00
(b) Levin Funds (from Schedule H5)		0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(0) 101111 11111111111111111111111111111		7
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	78683.03	1322666.05
Total Federal Receipts		
(subtract Line 18(c) from Line 19) ▶	78683.03	1322666.05

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period				
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calendar Year-to-Date			
Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating Expenditures	1016.66	18547.98			
(c) Total Operating Expenditures	1010.00	10347.30			
(add 21(a)(i), (a)(ii), and (b))▶	1016.66	18547.98			
2. Transfers to Affiliated/Other Party					
Committees	0.00	0.00			
Contributions to Federal Candidates/Committees	17070.00				
and Other Political Committees	47650.00	1075900.00			
. Independent Expenditures	381660.36	589005.18			
(use Schedule E)	33.000.00	555555.15			
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00			
(222 25:0525 :)	7 7 7				
. Loan Repayments Made	0.00	0.00			
. Loans Made	0.00	0.00			
(a) Individuals/Persons Other	0.00	0.00			
Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	3.00				
(such as PACs)	0.00	0.00			
_					
(d) Total Contribution Refunds	0.00	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00			
Other Disbursements	0.00	5350.00			
Other Dispulsements	0.00	0000.00			
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity					
(from Schedule H6)					
(i) Federal Share	0.00	0.00			
(") III - : II Ol	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	7				
Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	430327.02	1688803.16			
T. 15 1 18:1					
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)	430327.02	1688803.16			
from Line 31)	100021.02	1000000.10			

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	74430.66	1270191.99
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	74430.66	1270191.99
3. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1016.66	18547.98
7. Offsets to Operating Expenditures (from Line 15, page 3)	2745.49	18642.21
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-1728.83	-94.23

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

					PAGE		6	OF		73
(check only one)										
X	11a		11b		11c		12	2		
	13		14		15		16	6		17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) Jeffery P Beckenbaugh DO		Date of Receipt
	Mailing Address 1302 Lecy Lane NE		10 18 2014
	City	State Zip Code	Transaction ID: 6521547
	Stewartville	MN 55976-2500	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer	Occupation	
	Olmsted Medical Center	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	
— В.	Full Name (Last, First, Middle Initial) David Gay MD		Date of Receipt
	Mailing Address 433 Ocean Grove Circle		M = M / D = D / Y = Y = Y
	City	State Zip Code	10 18 2014
	Saint Augustine	FL 32080	Transaction ID : 6521549 Amount of Each Receipt this Period
			Amount of Each freedipt this Feriou
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	Self Employed	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	1000.00	
 с.	Full Name (Last, First, Middle Initial) James S Gardiner MD		Date of Receipt
	Mailing Address 10015 Kendale Rd		10 16 _ 2014 _
	City	State Zip Code	Transaction ID: 6526200
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	
	Self Employed	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	55 0	
	Other (specify) ▼	500.00	
s	UBTOTAL of Receipts This Page (optional)		1600.00
Т	OTAL This Period (last page this line number of	only)	

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

FOR LINE NUMBER:					PAGE		7	OF		73
(ch	(check only one)									
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	13		14		15		16	6		17

or for commercial purposes, other than usin	ng the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	of the American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Christopher S Proctor MD		Date of Receipt
Mailing Address 465 Las Palmas Dr		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : 6526207
Santa Barbara	CA 93110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
Alta Orthopaedics	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	700.00	
Full Name (Last, First, Middle Initial) 3. Raymond A Koch MD	<u> </u>	Date of Receipt
Mailing Address 227 Boyle Dr		M M / D D / Y Y Y Y Y
		10 16 2014
City	State Zip Code	Transaction ID: 6526208
Eureka	CA 95503-4809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Humboldt Medical Specialists	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Charles N Versteeg Jr, MD		Date of Receipt
Mailing Address 255 Yale Dr		10 16 2014
City	State Zip Code	Transaction ID: 6526209
Medford	OR 97504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Southern Oregon Orthopaedics	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	al)	950.00
TOTAL TILL DO NOT TO S		
TOTAL This Period (last page this line nu	mber only)	

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

					PAGE		8	OF		73
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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) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) David M Kieras MD Mailing Address 23417 Marine View Dr S	Date of Receipt	
	City Des Moines	State Zip Code WA 98198-7349	10 16 2014 Transaction ID : 6526210
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer Virginia Mason Med Ctr	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Basil R Besh MD Mailing Address 6135 Clubhouse Dr		Date of Receipt
	City Pleasanton	State Zip Code CA 94566-9864	Transaction ID : 6527123 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	85.00
	Name of Employer Self Employed Receipt For:	Occupation Orthopaedic Surgeon	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
С.	Full Name (Last, First, Middle Initial) Anthony L Brown MD		Date of Receipt
	Mailing Address 2428 Brookwood Dr City	State Zip Code	10 16 2014
	Flossmoor	IL 60422	Transaction ID : 6529214 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	225.00
	Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
s	SUBTOTAL of Receipts This Page (optional)		810.00
Т	OTAL This Period (last page this line number of	only)	

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

FOR LINE NUMBER:				PAGE		9	OF	73		
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OI	tor commercial purposes, other than using the	name and address of any political committee to	Solicit contributions from Such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS
A.	Full Name (Last, First, Middle Initial) Thomas Lisle Whitman MD Mailing Address 912 Holston Avenue		Date of Receipt
	City Bristol	State Zip Code TN 37620-3515	10 16 2014 Transaction ID : 6529215
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Appalachian Orthopaedic Associates Receipt For:	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
В.	Full Name (Last, First, Middle Initial) Charles A Hope II, MD		Date of Receipt
	Mailing Address 8 Bent Tree Circle	Chala Tin Code	10 16 2014
	City Savannah	State Zip Code GA 31411-3019	Transaction ID : 6529218 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
 с.	Full Name (Last, First, Middle Initial) Robert M Ruth MD		Date of Receipt
	Mailing Address 5265 Paseo Camio		10 16 2014
	City Santa Barbara	State Zip Code CA 93111-1133	Transaction ID : 6529219 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Self Employed Receipt For:	Occupation Orthopaedic Surgeon	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)		6250.00
т	OTAL This Period (last page this line number of	only)	

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Veerabhadra Reddy MD		Date of Receipt
Mailing Address 6729 Kenwood Ave		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 6529220
Dallas	TX 75214-3148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Health Texas	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Nijay John Mani MD		Date of Receipt
Mailing Address 240 E 47th St #21-D		10 16 2014
City	State Zip Code	Transaction ID : 6529221
New York	NY 10017-2136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Lutheran Medical Center	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Rocci V Trumper MD		Date of Receipt
Mailing Address 4377 Woody Creek Ln.		10 16 2014
City	State Zip Code	Transaction ID: 6529222
Fort Collins	CO 80524	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Orthopaedic Center of the Rockies	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	r only)	

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

	_		MBER	PAGE	 11	OF	73		
(0	che	ck only	or	ne)					
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01 101 0	ommercial purposes, other than using the	name and address of any political committee to	Solicit Communions from Such Committee.
\	ME OF COMMITTEE (In Full) Iitical Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS
4. Ke	Name (Last, First, Middle Initial) vin Edward Rosas MD ing Address 167 Woodlawn Avenue		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sara	atoga Springs	State Zip Code NY 12866-1523	Transaction ID : 6529223 Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	250.00
Orth	ne of Employer o New York	Occupation Orthopaedic Surgeon	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
3. Ro	Name (Last, First, Middle Initial) bert H Blotter MD ing Address 1116 Ortman		Date of Receipt
City		State Zip Code MI 49855-9333	10 21 2014 Transaction ID : 6529227 Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	500.00
Adva	ne of Employer anced Center for Orthopaedics	Occupation Orthopaedic Surgeon	
Rece	eipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Name (Last, First, Middle Initial) aniel William Green MD		Date of Receipt
	ing Address 535 E 70th St		10 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Nev	w York	State Zip Code NY 10021-4823	Transaction ID : 6529229 Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	175.00
	ne of Employer	Occupation	
	pital for Special Surgery eipt For:	Orthopaedic Surgeon	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBT	OTAL of Receipts This Page (optional)	>	925.00
TOTAL	L This Period (last page this line number o	nly)	

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

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(c	he	ck only	or	ne)						
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Christopher J Walsh MD Mailing Address 190 Wellborn Chase		Date of Receipt
City Fayetteville FEC ID number of contributing federal political committee. Name of Employer Resurgens Orthopaedics Receipt For: Primary General	State Zip Code GA 30215-2964 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Transaction ID: 6533067 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) 3. Gregory D Gramstad MD	250.00	Date of Receipt
Mailing Address 6702 SW Canyon Crest Dr City Portland	State Zip Code OR 97225	10 21 2014 Transaction ID: 6534689 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Northwest Surgical Specialists	Occupation Orthopaedic Surgeon	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Allen A Deutsch MD Mailing Address 4516 Oleander St City	State Zip Code	Date of Receipt 10 21 2014 Transaction ID: 6534691
Bellaire FEC ID number of contributing federal political committee. Name of Employer Kelsey Seybold Clinic	TX 77401 C Occupation Orthopaedic Surgeon	Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line number	r only)	

	FOR	LINE	NU	MBER	:	PAGE	 13	OF
Use separate schedule(s) for each category of the	`	ck only		. ′				
Detailed Summary Page	×	11a		11b		11c	12	
		10		11		15	16	

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

NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name (Last, First, Middle Initial) Jeffrey H Richmond MD Date of Receipt Mailing Address 8 Hilltop Dr 2014 10 21 City Zip Code State Transaction ID: 6534693 NY Laurel Hollow 11791 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Peter M Kelleher MD Date of Receipt Mailing Address 501 Perkins Place 10 2014 21 City State Zip Code Transaction ID: 6534695 MT Bozeman 59715-3738 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Employed Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ramesh Gidumal MD Date of Receipt Mailing Address 300 East 74th St Apt 2G 10 21 2014 City Zip Code State Transaction ID: 6534698 NY New York 10021 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation NYU Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General

250.00

1000.00

Other (specify)

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

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

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

ı	FOR	LINE	NU	MBER	:	PAGE	. 1	14	OF	73
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	×	11a		11b		11c		12		
		13		14		15		16		17

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthopa	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Richard W Barth MD Mailing Address 6516 Coldlect Dr.		Date of Receipt
Mailing Address 6516 Goldleaf Dr		10 21 7 2014
City Bethesda	State Zip Code MD 20817	Transaction ID : 6534699
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer Washington Orthopaedic Center	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Andre Nicolas Gay MD Mailing Address 26 Chimney Rock		Date of Receipt
City Oakland	State Zip Code CA 94605-4605	10 25 2014 Transaction ID: 6536037 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Beloit Health System	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Daniel P Holub MD		Date of Receipt
Mailing Address 1111 Delafield St Ste 120		10 27 _ 2014 _
City Waukesha	State Zip Code WI 53188-3402	Transaction ID : 6536088 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Orthopaedic Associates of Wisconsin Receipt For:	Orthopaedic Surgeon	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)		1350.00
TOTAL This Period (last page this line number	· only)	

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

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F F F F F F L	NAME OF COMMITTEE (In Full)	name and address of any political committee to American Association of Orthopa State Zip Code NY 14127-3962 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	
B	Other (specify) Full Name (Last, First, Middle Initial) John N Hall MD Mailing Address 3196 Turnberry Circle	375.00	Date of Receipt
F f	City Charlottesville FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code VA 22911-7489 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	Transaction ID: 6538931 Amount of Each Receipt this Period 250.00
C N	Full Name (Last, First, Middle Initial) Jeffery D Angel MD Mailing Address 501 Virginia Dr Ste C City Batesville FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code AR 72501-7331 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 586.00	Date of Receipt 10 28 2014 Transaction ID: 6538932 Amount of Each Receipt this Period 84.00
	JBTOTAL of Receipts This Page (optional)	<u>_</u>	384.00
то	OTAL This Period (last page this line number o	nly)	

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

	Full Name (Last, First, Middle Initial)						
١.	Matthew C Anderson MD		Date of Receipt				
	Mailing Address 101 South Main Avenue Apt. #701		10 28 2014				
	City	State Zip Code					
	Sioux Falls	SD 57104-6453	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	250.00				
	Name of Employer	Occupation					
	Self Employed						
	Receipt For:						
	Primary General Other (specify) ▼	250.00					
3.	Full Name (Last, First, Middle Initial) Nicholas G Weiss MD	Date of Receipt					
	Mailing Address 14916 122nd St N		10 21 2014				
	City	State Zip Code	Transaction ID: 6541627				
	Stillwater	MN 55082	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	500.00				
	Name of Employer	Occupation					
	St Croix Orthopaedics	Orthopaedic Surgeon					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General Other (specify) ▼	1000.00					
	Full Name (Last, First, Middle Initial) Keith D Nord MD		Date of Receipt				
	Mailing Address 31 Stonehaven Rd		10 21 2014				
	City Jackson	State Zip Code TN 38305-1941	Transaction ID : 6541628 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	500.00				
	Name of Employer	Occupation					
	Self Employed	Orthopaedic Surgeon					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General Other (specify) ▼	500.00					

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or for commercial purposes, other than using the	ie name and address of any political committee to	5 SOIIGIL COMMIDULIONS HOITI SUCH COMMINILEE.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Kevin Coupe MD Mailing Address 7409 Teaswood Dr		Date of Receipt
City Conroe FEC ID number of contributing	State Zip Code TX 77304-1402	Transaction ID : 6541629 Amount of Each Receipt this Period 250.00
Federal political committee. Name of Employer UT Physicians Receipt For: Primary General	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael Augustine Yusaf MD	500.00	Date of Receipt
Mailing Address 1096 Canyon Creek Dr. City Rochester Hills	State Zip Code MI 48306-4281	10 21 2014 Transaction ID: 6541630 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Rochester Hills Orthopaedics	Occupation Orthopaedic Surgeon	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Subramanyan Jayasankar MD Mailing Address 74 Country Dr		Date of Receipt
City Weston	State Zip Code MA 02493-1165	Transaction ID : 6541631 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
	r only)	

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	1 1 7	71	****
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Roland Y Nakata MD Mailing Address 815 S Fairmont Ave		Date of Receipt
	City Lodi FEC ID number of contributing	State Zip Code CA 95240-5116	10 21 2014 Transaction ID: 6541634 Amount of Each Receipt this Period 250.00
	federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 750.00	230.00
3.	Full Name (Last, First, Middle Initial) Thomas R Dennis MD Mailing Address 128 Lubrano Drive		Date of Receipt 10 21 2014
	City Annapolis	State Zip Code MD 21401-7028	Transaction ID : 6541635 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer Annapolis Hand Center	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
-	Full Name (Last, First, Middle Initial) Richard M Dix MD, JD		Date of Receipt
	Mailing Address P.O. Box 50129	Chata 7: Oct	10 21 2014
	City Henderson	State Zip Code NV 89016	Transaction ID : 6541659 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer	Occupation	
	Self Employed Receipt For:	Orthopaedic Surgeon	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)	>	750.00
T	OTAL This Period (last page this line number of	only)	

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NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Paul Seaberg MD	io / imonoan / iooooiation or Onnop	Date of Receipt
Mailing Address 2931 Georgetown Street		10 21 2014
City	State Zip Code	Transaction ID: 6541663
Houston	TX 77005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Houston Methodist Hospital	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mark J Lemos MD	Date of Receipt	
Mailing Address 1164 Ocean Blvd		M = M / D = D / Y = Y = Y
City	State Zip Code	10 21 2014
Rye	NH 03870	Transaction ID : 6541664 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Lahey Clinic	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) William Bugbee MD		Date of Receipt
Mailing Address 10666 North Torrey Pines Ro MS116		10 21 2014
City La Jolla	State Zip Code CA 92037-1027	Transaction ID : 6541665 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Scripps Clinic	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) James P Jamison MD		Date of Receipt
	Mailing Address 7092 Killdeer Dr		10 28 _ 2014 _
	City Canfield	State Zip Code OH 44406	Transaction ID : 6541703 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer	Occupation	
	Youngstown Orthopaedics	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
— В.	Full Name (Last, First, Middle Initial) George V Russell Jr, MD		Date of Receipt
	Mailing Address 102 Hawthorne Vale		M M / D D / Y Y Y Y
	5 TOE HAWMONIO VAIO		10 21 _ 2014 _
	City	State Zip Code	Transaction ID: 6542338
	Ridgeland	MS 39157	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer	Occupation	
	UMMC	Orthopaedic Surgeon	
	Receipt For:		
	Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	270.00	
<u> </u>	Full Name (Last, First, Middle Initial) George V Russell Jr, MD		Date of Receipt
	Mailing Address 102 Hawthorne Vale		10 21 2014
	City	State Zip Code	Transaction ID: 6542339
	Ridgeland	MS 39157	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	UMMC	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggiogate Teat-to-Date V	
	Other (specify) ▼	520.00	
s	UBTOTAL of Receipts This Page (optional)		485.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS				
۹.	Full Name (Last, First, Middle Initial) Pasquale Petrera MD		Date of Receipt				
	Mailing Address 1675 Woodbrooke Dr		10 21 2014				
	City Salisbury	State Zip Code MD 21804-8502	Transaction ID : 6542340 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	1000.00				
	Name of Employer Peninsula Orthopaedic Associates	Occupation Orthopaedic Surgeon					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00					
3.	Full Name (Last, First, Middle Initial) Jeffrey W Cook MD Mailing Address 3310 Aspen Grove Dr Ste 102	Date of Receipt					
	City Franklin	State Zip Code TN 37067	10 21 2014 Transaction ID : 6542341 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	250.00				
	Name of Employer Franklin Ortho & Sports Medicine	Occupation Orthopaedic Surgeon					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
<u> </u>	Full Name (Last, First, Middle Initial) Stephen M Cyphers MD		Date of Receipt				
	Mailing Address 2100 Valley View Parkway #2116		10 21 _2014 _				
	City El Dorado Hills	State Zip Code CA 95762-5543	Transaction ID : 6542342 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С	250.00				
	Name of Employer Western Sierra Orthopaedics Receipt For: Primary General	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼					
	Other (specify) SUBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		1500.00				
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Bret T Kean MD Mailing Address 2930 SE Carlton St		Date of Receipt 10 21 2014
City	State Zip Code	Transaction ID : 6542345
Portland	OR 97202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Frank R Kolisek MD		Date of Receipt
Mailing Address 1260 Innovation Pkwy		M = M / D = D / Y = Y = Y
Ste 100	Stato 7in Codo	10 21 2014
City Greenwood	State Zip Code IN 46143	Transaction ID : 6542348
	40143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Ortholndy	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. John C Gordon MD	•	Date of Receipt
Mailing Address 1232 Race Rd. #102		10 21 2014
City	State Zip Code	Transaction ID: 6542351
Baltimore	MD 21237-4377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	2500.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Nicholas Rajacich MD		Date of Receipt
Mailing Address 619 North I Street		10 21 2014 _
City	State Zip Code WA 98403	Transaction ID: 6542356
Tacoma	WA 98403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
Multicare Health Systems	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) 3. David Alan Goertzen MD		Date of Receipt
Mailing Address 5050 N Clinton St Ste 3		10 21 2014
City	State Zip Code	Transaction ID: 6542358
Fort Wayne	IN 46825-5886	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Orthopedics North East	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 500.00	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Luis M Espinoza MD		Date of Receipt
Mailing Address 5 Savannah Ridge Lane		10 21 2014
City Metairie	State Zip Code LA 70001	Transaction ID : 6542359
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	>	850.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Joseph W Pullekines MD Mailing Address 408 Cedar Ridge Drive		Date of Receipt
City	State Zip Code	10 21 2014 Transaction ID : 6542360
London	KY 40744-7446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Richard E McCarthy MD Mailing Address 1 Childrens Way Slot 839		Date of Receipt
		10 21 2014
City	State Zip Code AR 72202-3500	Transaction ID : 6542361
Little Rock	AR 72202-3500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
University of Arkansas	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Edward Adrian Connolly MD		Date of Receipt
Mailing Address 2300 53rd Ave Ste LL04		10 28 2014
City	State Zip Code	Transaction ID: 6557405
Bettendorf	IA 52722-7565	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	
Ortho & Rheumatology Assoc.	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional)		1150.00
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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Steven Trinkl MD		Date of Receipt
Mailing Address 13820 N Pine Bluff Rd		10 28 2014
City	State Zip Code	Transaction ID: 6557408
Mequon	WI 53097	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
OIW	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. William C Andrews Jr, MD		Date of Receipt
Mailing Address 4717 John Scott Dr		10 28 2014
City	State Zip Code	Transaction ID: 6557412
Lynchburg	VA 24503-1003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	850.00
Name of Employer	Occupation	
Orthopaedic Center of Central Virginia	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	
Full Name (Last, First, Middle Initial) C. John Charles Kofoed MD		Date of Receipt
Mailing Address 2619 Seminole Ct		10 28 _2014 _
City	State Zip Code	Transaction ID: 6557415
Fairfield	CA 94534-7871	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	
Sutter Medical Group	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	832.00	
SUBTOTAL of Receipts This Page (optional)	•	1184.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
/	of the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Theodore W Crofford MD Mailing Address 2228 Winton Terrace E		Date of Receipt
City	State Zip Code	10 28 2014 Transaction ID : 6557419
Fort Worth	TX 76109-1153	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Texas Health	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) 3. Paul L Benfanti MD		Date of Receipt
Mailing Address 7172 9th St S		10 28 2014
City	State Zip Code	Transaction ID: 6557420
Saint Petersburg	FL 33705-6219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Richard Lee Crank DO		Date of Receipt
Mailing Address 6588 Eagle Ridge Way		10 28 2014
City Lakeland	State Zip Code FL 33813-5683	Transaction ID : 6557421 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	-
Lakeland Regional Medical Center	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
SUBTOTAL of Receipts This Page (option	al)	2250.00
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Mailing Address 1303 Woodland Dr SW City State Zip Code	ate of Receipt
Mailing Address 1303 Woodland Dr SW City State Zip Code	
City State Zip Code T	M = M / D = D / Y = Y = Y
	10 28 2014
Rochester MN 55902	Transaction ID : 6557422
FEC ID number of contributing federal political committee.	mount of Each Receipt this Period 500.00
Name of Employer Occupation	
Mayo Clinic Orthopaedic Surgeon	
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
	ate of Receipt
Mailing Address 4715 Whitesburg Dr	M M / D D / Y Y Y Y Y Y
City State Zip Code T	10 28 2014 Transaction ID : 6557423
A1	mount of Each Receipt this Period
FEC ID number of contributing federal political committee.	1000.00
Name of Employer Occupation Sportsmed Orthopaedics Orthopaedic Surgeon	
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)	nto of Descint
Madistry Address and Address	ate of Receipt 10 28 2014
Pieles a City	Transaction ID : 6557424 mount of Each Receipt this Period
FEC ID number of contributing federal political committee.	500.00
Name of Employer Occupation	
Scranton Orthopaedic Specialists Orthopaedic Surgeon	
Receipt For: Aggregate Year-to-Date ▼ Primary General	
Other (specify) ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	2000.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle		American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Bruce A Bollinger MD		Date of Receipt
	Mailing Address 4401 Ridgehaven Rd		10 28 2014
	City Fort Worth	State Zip Code TX 76116	Transaction ID: 6557425 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
В.	Full Name (Last, First, Middle Initial) Marc R Labbe MD Mailing Address 3424 Sunset Blvd.		Date of Receipt
	City Houston	State Zip Code TX 77005	Transaction ID : 6557427 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
-	Name of Employer Bone & Joint Clinic	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
С.	Full Name (Last, First, Middle Initial) Lawrence S Crossett MD		Date of Receipt
	Mailing Address 9 Fairview Manor		10 28 2014
	City Pittsburgh	State Zip Code PA 15238-1934	Transaction ID : 6557428 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer University of Pittsburgh Medical Cente Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
SI	JBTOTAL of Receipts This Page (optional)		2000.00
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Christopher W DiGiovanni MD		Date of Receipt
Mailing Address 210 Randolph Ave		10 30 2014
City	State Zip Code	Transaction ID : 6557496
Milton	MA 02186-3509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
University Orthopaedics	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. John T Prather MD	ı	Date of Receipt
Mailing Address 301 W Broughton St #4A		10 30 2014
City	State Zip Code	Transaction ID : 6559691
Savannah	GA 31401-3261	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Chatham Orthopedic Associates	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Franklin Mirrer MD		Date of Receipt
Mailing Address 351 Elm Grove Ave		10 30 2014
City	State Zip Code	Transaction ID: 6559692
Providence	RI 02906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
SURTOTAL of Receipts This Page (optional	l)	750.00
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TOTAL This Period (last page this line num	ber only)	

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or for commerc	ial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\	COMMITTEE (In Full) Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
A. Russell E	Last, First, Middle Initial) Windsor MD		Date of Receipt
	ress 535 E 70th St		10 30 2014
City New York		State Zip Code NY 10021-4892	Transaction ID : 6559693 Amount of Each Receipt this Period
FEC ID num	nber of contributing cal committee.	С	1000.00
Name of En	ed	Occupation Orthopaedic Surgeon	
Receipt For: Primar Other		Aggregate Year-to-Date ▼ 1000.00	
B. Daniel E	Last, First, Middle Initial) Murphy MD ress 602 S Howard Ave		Date of Receipt
City Tampa		State Zip Code FL 33606-2413	10 30 2014 Transaction ID : 6559694 Amount of Each Receipt this Period
	nber of contributing cal committee.	С	375.00
Name of En	ppaedics	Occupation Orthopaedic Surgeon	
Receipt For: Primar Other		Aggregate Year-to-Date ▼ 750.00	
	Last, First, Middle Initial)		Date of Receipt
Mailing Addr	ress PO BOX 5016		10 30 _ 2014 _
City Toms River		State Zip Code NJ 08754-5016	Transaction ID : 6559700 Amount of Each Receipt this Period
	nber of contributing cal committee.	C	150.00
Receipt For: Primar	rthopedics and Sports Medi	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of	f Receipts This Page (optional)	>	1525.00
TOTAL This F	Period (last page this line number	only)	

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or for commercial purposes, other than using the	ie name and address of any political committee to	5 SOIIGIL COMMIDULIONS HOITI SUCH COMMILILEE.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Benjamin Curtis MD Mailing Address 1990 E Browning Ave		Date of Receipt
City Salt Lake Cty	State Zip Code UT 84108-2274	10 30 2014 Transaction ID: 6559701 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Utah Orthopaedic Associates	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Peter Damien Hanson MD Mailing Address 1010 Stuart St	•	Date of Receipt
City Helena	State Zip Code MT 59601-2333	10 30 2014 Transaction ID : 6559702 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Adam Pearson MD		Date of Receipt
Mailing Address 30 Overbrook Field Drive		10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cornish	State Zip Code NH 03745	Transaction ID: 6559723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer DHMC Receipt For:	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	299.00	
SUBTOTAL of Receipts This Page (optional)		400.00
TOTAL This Period (last page this line number	r only)	

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	ie name and address of any political committee to	o solicit contributions from such committee.
/	ne American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Stephen Sandoval MD		Date of Receipt
Mailing Address 2906 Butterfield Trl		10 30 2014
City	State Zip Code	Transaction ID: 6559724
Sherman	TX 75092	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. John Paul Houde MD	1	Date of Receipt
Mailing Address 125 Mascoma Street		10 30 _2014 _
City	State Zip Code	Transaction ID : 6559727
Lebanon	NH 03766	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Alice Peck Day Hospital	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) C. Ross Aron Schumer MD		Date of Receipt
Mailing Address 752 Tipperary Rd		11 02 2014
City	State Zip Code	Transaction ID: 6560324
Iowa City	IA 52246-2791	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	-
U.S. Air Force	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
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$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) Scott Edward Porter MD Mailing Address Dept of Ortho, Acad Serv 701 Grove Rd 2nd Fl Suprt Two City Greenville FEC ID number of contributing federal political committee. Name of Employer Greenville Hospital System Receipt For:	State Zip Code SC 29605-4210 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date	Date of Receipt M M M / D D / Y F Y F Y F Y F Y F Y F Y F Y F Y F Y
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	1172.00	
В.	David J Mansfield MD Mailing Address 5550 Cory Dr City	State Zip Code	Date of Receipt M
	El Paso FEC ID number of contributing federal political committee. Name of Employer El Paso Orthopaedic Surg Group Receipt For: Primary General Other (specify) ▼	TX 79932-3010 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 85.00
C .	Full Name (Last, First, Middle Initial) Neal D Lintecum MD Mailing Address 789 N 1500 Rd City Lawrence	State Zip Code KS 66049-9194	Date of Receipt 11 05 2014 Transaction ID: 6566591 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Ortho Kansas Receipt For: Primary General Other (specify) Other (specify)	C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	100.00
s	UBTOTAL of Receipts This Page (optional)	_	269.00
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	the American Association of Orthop	dedio Gargeons 1710 or7110
Full Name (Last, First, Middle Initial) Chad A Krueger MD	Date of Receipt	
Mailing Address 14827 Forward Pass		11 06 2014
City	State Zip Code	Transaction ID : 6567819
San Antonio	TX 78248-0974	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
U.S. Army	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	330.00	
Full Name (Last, First, Middle Initial) Patrick T McCulloch MD		Date of Receipt
Mailing Address 12 Caley Drive		11 06 2014
City	State Zip Code	Transaction ID : 6567820
Canonsburg	PA 15317-5990	Amount of Each Receipt this Period
FEC ID number of contributing		21.1.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.
federal political committee.	C	84.00
Name of Employer	Occupation	
Advanced Orthopaedics & Rehabilitation	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	502.00	
Full Name (Last, First, Middle Initial)		
Mathias A Masem MD		Date of Receipt
Mailing Address 80 Grand Ave #600		11 03 2014
City Oakland	State Zip Code CA 94612	Transaction ID : 6577250
	5.5.2	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	

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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) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name (Last, First, Middle Initial) Gregory S McDowell MD Date of Receipt Mailing Address 2900 12th Ave N Ste 140W 03 2014 City Zip Code State Transaction ID: 6577251 MT 59101-7503 Billings Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Orthopaedic Surgeon OrthoMontana Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jonathan B Ticker MD Date of Receipt Mailing Address 8 Wood Acres Rd 2014 11 03 City State Zip Code Transaction ID: 6577252 Brookville NY 11545 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation Island Ortho & Sports Med Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. R Michael Gross MD Date of Receipt Mailing Address 17030 Lakeside Hills Plz Ste 200 2014 11 03 City State Zip Code Transaction ID: 6577253 ΝE Omaha 68130 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation **GIKK Orthopaedic Specialists** Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 1650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthop	aedic SurgeonsPAC of AAOS			
Full Name (Last, First, Middle Initial) Jeffrey J Tiedeman MD Mailing Address 17030 Lakeside Hills Plz Ste	Date of Receipt 11 03 2014				
City Omaha FEC ID number of contributing	ID number of contributing				
federal political committee. Name of Employer	Occupation	1000.00			
GIKK Orthopaedic Specialists Receipt For: Primary General Other (specify) ▼	Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial) C Michael Kelly MD Mailing Address 1507 South 152 Circle		Date of Receipt 11 03 2014			
City Omaha FEC ID number of contributing federal political committee.	State Zip Code NE 68144-5114	Transaction ID : 6577265 Amount of Each Receipt this Period 1000.00			
Name of Employer GIKK Orthopaedic Specialists	Occupation Orthopaedic Surgeon				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00				
Full Name (Last, First, Middle Initial) Samuel P Phillips MD Mailing Address 3325 Woolworth Ave City	State Zip Code	Date of Receipt 11 03 2014			
Omaha FEC ID number of contributing federal political committee.	NE 68105-1942	Transaction ID : 6577266 Amount of Each Receipt this Period 1000.00			
Name of Employer GIKK Orthopaedic Specialists Receipt For: □ Primary □ General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00				
SUBTOTAL of Receipts This Page (optional)	>	3000.00			
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or 1	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle		e American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Kimberly A Turman MD		Date of Receipt
	Mailing Address 1521 S 195th Cir		11 03 2014
	City Omaha	State Zip Code NE 68130-3023	Transaction ID: 6577267
-	FEC ID number of contributing		Amount of Each Receipt this Period
	federal political committee.	C	1000.00
Ī	Name of Employer	Occupation	
	GIKK Orthopaedic Specialists	Orthopaedic Surgeon	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1000.00	
	Full Name (Last, First, Middle Initial) James F Scoggin III, MD		Date of Receipt
	Mailing Address P.O. Box 25823		1,1 03 2014
,	City	State Zip Code	Transaction ID : 6577269
_	Honolulu	HI 96825-0823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	Self Employed	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
	Full Name (Last, First, Middle Initial) Douglas J Fauser MD		Date of Receipt
	Mailing Address 664 Stoneleigh Ave Ste 300		11 03 2014
	City	State Zip Code	Transaction ID: 6577290
-	Carmel	NY 10512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
į	Name of Employer	Occupation	
	Somers Orthopaedics	Orthopaedic Surgeon	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	250.00	
SI	JBTOTAL of Receipts This Page (optional)		2250.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Thomas A McEnnerney MD Mailing Address 5150 Journal Center Blvd NE		Date of Receipt
	City Albuquerque FEC ID number of contributing federal political committee. Name of Employer ABQ Health Partners Receipt For: Primary General Other (specify)	State Zip Code NM 87109 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 400.00	Transaction ID: 6577295 Amount of Each Receipt this Period 200.00
3.	Full Name (Last, First, Middle Initial) Craig William Roodbeen MD Mailing Address 1350 Kirts Blvd Ste 160 City Troy FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 48084-4830 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Full Name (Last, First, Middle Initial) Robert A Ruggiero MD Mailing Address 266 East Lancaster Ave Ste 20 City Malvern FEC ID number of contributing federal political committee. Name of Employer Premier Orthopedics Receipt For: Primary General Other (specify)	State Zip Code PA 19355-3256 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 11 03 2014 Transaction ID: 6577299 Amount of Each Receipt this Period 250.00
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	700.00
Т	OTAL This Period (last page this line number of	nly)	

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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) Political Action Committee of	the American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) 1. Jack Farr II, MD		Date of Receipt
Mailing Address 5287 N 400 W		11 03 2014
City	State Zip Code	Transaction ID: 6577301
Bargersville	IN 46106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Ortholndy	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Prasad V Gourineni MD		Date of Receipt
Mailing Address 3420 Adams Rd		11 03 2014
City	State Zip Code	Transaction ID: 6577304
Oak Brook	IL 60523-2708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Ryan Edward Will MD		Date of Receipt
Mailing Address 2007 60th Ave NW		11 03 2014
City	State Zip Code	Transaction ID : 6577305
Gig Harbor	WA 98335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Multicare Health System	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
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\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) Tudor Roberts Tien MD Mailing Address 3090 Andora Dr		Date of Receipt
	City Ypsilanti	State Zip Code MI 48198-9649	11 03 2014 Transaction ID: 6577306 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Jose Miguel Santiago-Figueroa MD Mailing Address Cond Plaza de Diego		Date of Receipt
	310 Ave de Diego Ste 301 City San Juan FEC ID number of contributing federal political committee.	State Zip Code PR 00907-4442	11 07 2014 Transaction ID : 6577512 Amount of Each Receipt this Period 250.00
	Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	
C.	Full Name (Last, First, Middle Initial) John G Lane MD Mailing Address 715 La Canada City	State Zip Code	Date of Receipt 11 07 2014
	La Jolla FEC ID number of contributing federal political committee.	CA 92037	Transaction ID : 6577513 Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
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NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS Full Name (Last, First, Middle Initial) Michael T O'Neil MD Date of Receipt Mailing Address Nebraska Ortho Assoc LLP 2725 S 144th St Ste 110 07 2014 City Zip Code State Transaction ID: 6577514 ΝE Omaha 68144-5253 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Orthopaedic Surgeon Self Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ian Lin MD Date of Receipt Mailing Address 104 Foster Dr 2014 11 07 City State Zip Code Transaction ID: 6577516 IΑ Des Moines 50312-2538 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Des Moines Ortho Surgeons Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen Andrew Mikulak MD Date of Receipt Mailing Address 360 San Miguel Dr Ste 701 2014 11 07 City State Zip Code Transaction ID: 6577556 CA Newport Beach 92660-5927 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation California Orthopaedic Orthopaedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	he name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) William Kemp Montgomery MD Mailing Address 2517 Timber Cove Lane City Plano FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code TX 75093-6141 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 11 07 2014 Transaction ID: 6577557 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Jeffrey Todd Brodie MD Mailing Address 12 Hambleton Court City Baltimore FEC ID number of contributing federal political committee. Name of Employer University of Maryland Medical System Receipt For: Primary General Other (specify)	State Zip Code MD 21208 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 11 07 2014 Transaction ID: 6577558 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) John Bernard Ryan MD Mailing Address 11012 E 13 Mile Rd Ste 201 City Warren FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code MI 48093 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 350.00	Date of Receipt 11 07 2014 Transaction ID: 6577560 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u>*</u>	1350.00

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\	E OF COMMITTEE (In Full) itical Action Committee of the	American Association of Orthopa	nedic SurgeonsPAC of AAOS
A. Dav	lame (Last, First, Middle Initial) rid J Collon MD g Address 26175 Carol Avenue		Date of Receipt
City Frank	klin	State Zip Code MI 48025	11 07 2014 Transaction ID: 6577562 Amount of Each Receipt this Period
	ID number of contributing al political committee.	C	250.00
Michig	e of Employer gan Orthopaedic Institute	Occupation Orthopaedic Surgeon	
	pt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
3. <u>Mat</u>	lame (Last, First, Middle Initial) thew P Gardner MD g Address 207 Cumberland Dr		Date of Receipt
City	ester	State Zip Code IL 62563-9286	11 07 2014 Transaction ID: 6577563 Amount of Each Receipt this Period
	ID number of contributing al political committee.	C	150.00
Self E	e of Employer Imployed	Occupation Orthopaedic Surgeon	
	pt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
. <u>Cra</u>	lame (Last, First, Middle Initial) iig P Smith MD		Date of Receipt
	g Address 4140 Centennial Hills Blvd Ste A	7. 2.	11 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Casp	per	State Zip Code WY 82609-3265	Transaction ID : 6590107 Amount of Each Receipt this Period
	ID number of contributing al political committee.	C	500.00
Self E	e of Employer Employed	Occupation Orthopaedic Surgeon	
	pt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTO	TAL of Receipts This Page (optional)		900.00
TOTAL	This Period (last page this line number of	only)	

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or for commercial purposes, other than u	sing the name and address of any political committee t	o solicit contributions from such committee.					
/	of the American Association of Orthop	paedic SurgeonsPAC of AAOS					
Full Name (Last, First, Middle Initial) Paul A Sauer MD Mailing Address 2444 River Hills I. a.		Date of Receipt					
Mailing Address 2414 River Hills Ln		11 07 2014					
City Bolingbrook	State Zip Code IL 60490	Transaction ID : 6590108					
FEC ID number of contributing		Amount of Each Receipt this Period					
federal political committee.	C	250.00					
Name of Employer	Occupation						
Rezin Ortho & Sports Med	Orthopaedic Surgeon	<u> </u> -					
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	250.00						
Full Name (Last, First, Middle Initial) 3. Michael T Stowell MD		Date of Receipt					
Mailing Address 1120A Professional C	Mailing Address 1120A Professional Court						
City	State Zip Code	11 07 2014 Transaction ID : 6590110					
Hagerstown	MD 21740	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	-					
Mid Atlantic Orthopaedic Specialists	Orthopaedic Surgeon						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00						
Full Name (Last, First, Middle Initial) C. Randall Duane Roush MD		Date of Receipt					
Mailing Address 1805 Summer Blosso	m Place	11 07 2014					
City	State Zip Code MO 63017	Transaction ID : 6590111					
Chesterfield	MO 63017	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	250.00					
Name of Employer	Occupation	-					
SSM Orthopedics	Orthopaedic Surgeon						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	250.00						
SUBTOTAL of Receipts This Page (opti	onal)	750.00					
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TOTAL This Period (last page this line i	number only)						

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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) Political Action Committee of	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) William V Arnold MD Mailing Address 1070 Randolph Road		Date of Receipt
City Meadowbrook	State Zip Code PA 19046	11 07 2014 Transaction ID : 6590112 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Rothman Institute	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Michael Thomas Thieken MD Mailing Address 2461 Gwinnett St		Date of Receipt
City Carmel	State Zip Code IN 46032-8386	Transaction ID : 6590127 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Ortholndy	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Eric A Monesmith MD		Date of Receipt
Mailing Address 5726 Central Avenue		11 13 2014
City Indianapolis	State Zip Code IN 46220	Transaction ID : 6590128 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Ortholndy	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line num	ber only)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Dean C Maar MD		Date of Receipt
	Mailing Address 9250 Willowrun Dr		11 13 2014
	City Indianapolis	State Zip Code IN 46260-1479	Transaction ID : 6590129 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer OrthoIndy Receipt For:	Occupation Orthopaedic Surgeon	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Edward J Hellman MD Mailing Address 12715 Norfolk Ln		Date of Receipt
	City Carmel	State Zip Code IN 46032	11 13 2014 Transaction ID: 6590130 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	1000.00
	Name of Employer Ortholndy	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
- Э.	Full Name (Last, First, Middle Initial) John W Dietz MD		Date of Receipt
	Mailing Address 1212 Emerald Viking Court		11 13 2014
	City Westfield	State Zip Code IN 46074	Transaction ID : 6590132 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer OrthoIndy Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)		2500.00
T	OTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using tr	ie name and address of any political committee to	Solicit Contributions from Such Confinititee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) David M Kaehr MD Mailing Address 3942 Oakleaf Dr		Date of Receipt
City Zionsville	State Zip Code IN 46077-9293	11 13 2014 Transaction ID: 6590133
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Ortholndy	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Prasad V Gourineni MD Mailing Address 3420 Adams Rd		Date of Receipt
City Oak Brook	State Zip Code IL 60523-2708	11 13 2014 Transaction ID : 6590134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Perry L Schoenecker MD		Date of Receipt
Mailing Address 428 N. Dickson		11 13 2014
City Kirkwood	State Zip Code MO 63122	Transaction ID: 6590135 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Washington Univ School of Medicine	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than usin	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) Political Action Committee of	of the American Association of Ortho	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Simon Mears MD		Date of Receipt
Mailing Address 3825 Mapleshade Lane,	#7102	11 13 2014
City	State Zip Code	Transaction ID : 6590139
Plano	TX 75075-5798	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	-
Health Texas	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Harris N Silver MD	'	Date of Receipt
Mailing Address 938 East Lake Rd		11 13 2014
City	State Zip Code	Transaction ID : 6590140
Dundee	NY 14837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Arnot Medical Services	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) 2. Jeffrey M Colbert MD		Date of Receipt
Mailing Address 13160 Mindanao Way #3	325	11 13 2014
City	State Zip Code	Transaction ID : 6590142
Marina Del Rey	CA 90292-6614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	_
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (options	al) >	550.00
TOTAL This Period (last page this line nur	mber only)	1

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Charles D Mitchell MD		Date of Receipt
Mailing Address 1410 Acapulco Dr		11 13 2014
City Dallas	State Zip Code TX 75232	Transaction ID: 6590144
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Physician Services Inc Receipt For:	Orthopaedic Surgeon	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. J Kevin Horn MD		Date of Receipt
Mailing Address 9062 N Point Dr		11 13 2014
City	State Zip Code	Transaction ID: 6590145
Beach City	TX 77523-8311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Fondren Orthopedic Group	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Joseph D Zuckerman MD		Date of Receipt
Mailing Address 7 Marbourne Dr		11 20 / Y Y Y Y Y Y Y
City	State Zip Code NY 10543	Transaction ID: 6598685
Mamaroneck FEC ID number of contributing	NY 10543	Amount of Each Receipt this Period
federal political committee.		
Name of Employer	Occupation	
NYU Hospital for Joint Diseases Receipt For:	Orthopaedic Surgeon	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
/	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Robert C Coddington MD		Date of Receipt
Mailing Address 5803 Lake Resort Dr		11 20 Y Y Y Y Y Y
City Hixson	State Zip Code TN 37343-4665	Transaction ID : 6598686 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Retired	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. John O Cletcher Jr, MD Mailing Address Box 150		Date of Receipt
City Hygiene	State Zip Code CO 80533	11 20 2014 Transaction ID : 6598689
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Orthopaedic Surgeon	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Anca Popa MD	<u>'</u>	Date of Receipt
Mailing Address 115 River Rd Ste 825		11 20 2014
City Edgewater	State Zip Code NJ 07020	Transaction ID: 6598692 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Self Employed Receipt For:	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number	per only)	

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	g the name and address of any political committee to	o solicit contributions from such committee.
/	f the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Alan L Whitney MD		Date of Receipt
Mailing Address 2699 N 17th St		1.1 20 2014
City	State Zip Code	Transaction ID : 6598697
Coos Bay	OR 97420-2134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
South Coast Orthopedic Assn	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. David P Mesna MD	1	Date of Receipt
Mailing Address 3704 Camino Codorniz	11 20 2014	
City	State Zip Code	Transaction ID : 6598698
Calabasas	CA 91302-3043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
Kaiser Permanente	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) C. George V Russell Jr, MD		Date of Receipt
Mailing Address 102 Hawthorne Vale		11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 6598699
Ridgeland	MS 39157	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer	Occupation	-
UMMC	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	605.00	
SURTOTAL of Receipts This Page (options	I)	635.00
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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) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) Amar S Ranawat MD		Date of Receipt
	Mailing Address 535 E 70th St 6th FI		11 21 2014
	City New York	State Zip Code NY 10021-4823	Transaction ID : 6598712 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	Hospital for Special Surgery	Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial)		
В.	Basil R Besh MD		Date of Receipt
	Mailing Address 6135 Clubhouse Dr		11 21 2014
	City	State Zip Code CA 94566-9864	Transaction ID: 6598713
	Pleasanton	CA 94566-9864	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	85.00
	Name of Employer	Occupation	
	Self Employed	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	340.00	
	Full Name (Last, First, Middle Initial) William M Strassberg MD		Date of Receipt
	Mailing Address 36 Sailors Bluff		11 21 2014
	City Northport	State Zip Code ME 04849-3063	Transaction ID : 6599729 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer	Occupation	
	Mount Desert Island Hospital	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
s	UBTOTAL of Receipts This Page (optional)		1335.00
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Todd A Schmidt MD		Date of Receipt
Mailing Address 2865 Lake Park Drive		11 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jonesboro	State Zip Code GA 30236-4133	Transaction ID : 6599730 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer Southern Orthopaedic Specialists	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 756.00	
Full Name (Last, First, Middle Initial) 3. David R Chandler MD Mailing Address 165 Middle Plantation Ln		Date of Receipt
City	State Zip Code FL 32561-4899	11 21 2014 Transaction ID : 6599732
Gulf Breeze FEC ID number of contributing federal political committee.	FL 32561-4899	Amount of Each Receipt this Period 85.00
Name of Employer Self Employed	Occupation Orthopaedic Surgeon	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 765.00	
Full Name (Last, First, Middle Initial) 2. Jeffery P Beckenbaugh DO		Date of Receipt
Mailing Address 1302 Lecy Lane NE		11 21 2014
City Stewartville	State Zip Code MN 55976-2500	Transaction ID: 6599734 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Olmsted Medical Center Receipt For:	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	700.00	
SUBTOTAL of Receipts This Page (optional)	269.00
TOTAL This Period (last page this line num	ber only)	

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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Eric Louis Smith MD		Date of Receipt
Mailing Address 1573 Beacon St		11 21 2014
City Waban	State Zip Code MA 02468-1507	Transaction ID: 6599735 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	84.00
Name of Employer	Occupation	
Tufts Medical Center	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 536.00	
Full Name (Last, First, Middle Initial) David F Dalury MD Mailing Address assa B. III. 1882		Date of Receipt
Mailing Address 8322 Bellona Ave Ste 200		11 20 2014
City	State Zip Code	Transaction ID: 6599906
Baltimore	MD 21204-2076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) C. Daniel E Lehman MD		Date of Receipt
Mailing Address Orthopaedics Indianapolis 8450 Northwest Blvd		11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Indianapolis	State Zip Code IN 46278-1381	Transaction ID: 6599907 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Ortholndy	Orthopaedic Surgeon	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1584.00
TOTAL This Period (last page this line number	r only)	

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

FOR	PAGE		55	OF		73				
(check only one)										
X	11a		11b		11c		12			
	13		14		15		16			17

٥.	tor commercial purposes, other than using the	name and address of any political committee to	Conor Contributions from Such Contribution.
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Michael C Gerling MD Mailing Address 133 Sterling PI Apt 2C		Date of Receipt
	City Brooklyn FEC ID number of contributing federal political committee.	State Zip Code NY 11217-3381	Transaction ID : 6599908 Amount of Each Receipt this Period 250.00
	Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	
3 .	Full Name (Last, First, Middle Initial) Courtland G Lewis MD Mailing Address 499 Farmington Ave, Suite 300 City Farmington FEC ID number of contributing federal political committee. Name of Employer Ortho Assoc of RI Receipt For: Primary General Other (specify)	State Zip Code CT 06032-1933 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 11 20 2014 Transaction ID: 6599961 Amount of Each Receipt this Period 500.00
о.	Full Name (Last, First, Middle Initial) Geoffrey H Westrich MD Mailing Address 535 East 70th St City New York FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code NY 10021-4823 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M
s	UBTOTAL of Receipts This Page (optional)	>	1250.00
Т	OTAL This Period (last page this line number of	only)	

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

				PAGE	 56	OF	73	
(check only one)								
X	11a		11b		11c	12		
	13		14		15	16	;	17

or for commercial purposes, other than using the	e name and address of any political committee to	5 SOUCH COMMINUMENTS HOTH SUCH COMMINUTE.
NAME OF COMMITTEE (In Full) Political Action Committee of th	e American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Frank P Giammattei MD Mailing Address 30 Woodbrook Rd City Swarthmore FEC ID number of contributing federal political committee. Name of Employer Premier Orthopaedics Receipt For: Primary General Other (specify)	State Zip Code PA 19081-1234 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 249.99	Date of Receipt 11 22 2014 Transaction ID: 6601731 Amount of Each Receipt this Period 83.33
Full Name (Last, First, Middle Initial) Daniel William Green MD Mailing Address 535 E 70th St City New York FEC ID number of contributing federal political committee. Name of Employer Hospital for Special Surgery Receipt For: Primary General Other (specify)	State Zip Code NY 10021-4823 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 525.00	Date of Receipt 11 22 2014 Transaction ID: 6601732 Amount of Each Receipt this Period 175.00
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	258.33
TOTAL This Period (last page this line number	only)	65927.33

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 OF 73 (check only one) 11a
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne Americ	an Association of Ortho	ppaedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) American Association of Orthopaedic Mailing Address 6300 N River Road City Rosemont FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General	State IL C	Zip Code 60018 Year-to-Date ▼	Date of Receipt 10 17 2014 Transaction ID: 6521546 Amount of Each Receipt this Period 1728.83 Refund of bank fees from affiliated organization
Other (specify) ▼ Full Name (Last, First, Middle Initial) American Association of Orthopaed Mailing Address 6300 N River Road City	dic Surgeor	17625.55 IS Zip Code	Date of Receipt 11 19 2014 Transaction ID: 6597638
Rosemont FEC ID number of contributing federal political committee. Name of Employer	Occupation	60018	Amount of Each Receipt this Period 1016.66
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 18642.21	Refund of bank fees from affiliated organization
Full Name (Last, First, Middle Initial) Mailing Address			Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			2745.49

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

2745.49

	FOF	LINE N	NUMBER:		PAGE	= 5	8 OF	- 7	'3
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page		11a	11b		11c		12		
Betaned Summary Lage		13	14		15	X	16	1	17
not be sold or used by any person for the nurnose of soliciting contributions									

	ng the name and address of any political committee		
NAME OF COMMITTEE (In Full) Political Action Committee of	of the American Association of Ortho	paedic SurgeonsPAC of AAOS	
Full Name (Last, First, Middle Initial) Gardner for Congress Mailing Address P.O. Box 2408	Gardner for Congress		
City			
Loveland	CO 80539	Transaction ID : 6545508 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C C00461749	1500.00	
Name of Employer	Occupation		
Receipt For: 2014 Primary	Aggregate Year-to-Date ▼ 1500.00	Refund of excess contribution to candidate	
Full Name (Last, First, Middle Initial) 3.		Date of Receipt	
Mailing Address		M = M / D = D / Y = Y = Y	
City	State Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼		
Full Name (Last, First, Middle Initial)		Date of Receipt	
Mailing Address		M = M / D = D / Y = Y = Y	
City	ity 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 ▼		
SUBTOTAL of Receipts This Page (option	al)	1500.00	
TOTAL This Period (last page this line nur	mber only)	1500.00	

S 17

SC	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 59 OF 73
	EMIZED DISBURSEMENTS		arate schedule(s)	(check onl	TVO WIDELL.
111	LIVIIZED DISDUNSEIVIEN IS		category of the	X 21b	··
		Detailed	Summary Page	27	28a 28b 28c 29 30
An	y information copied from such Reports and Staten	nents mav	not be sold or us	sed by any pers	son for the purpose of soliciting contributions
	for commercial purposes, other than using the name				
	NAME OF COMMITTEE (In Full)				
angle	Political Action Committee of the A	merican	Association	n of Orthor	paedic SurgeonsPAC of AAOS
\angle					-
۸	Full Name (Last, First, Middle Initial)				Date of Disbursement
Α.	Northern Trust Company				
	Mailing Address 50 S La Salle St				10 21 2014
	•	State	Zip Code		Transaction ID : 6566592
	Chicago	IL	60603		- 17a115action ib : 0300392
	Purpose of Disbursement Bank fees deducted from account			001	Amount of Each Dichuragement this Deviced
	Candidate Name				Amount of Each Disbursement this Period
	Canadato Harrio			Category/ Type	90.35
	Office Sought: House Disbursen	nent For:	I	1,460	
		Primary	General		Bank fees deducted from account
	President	Other (spe	cify) ▼		
	State: District:				
_	Full Name (Last, First, Middle Initial)				
В.	Northern Trust Company				Date of Disbursement
	Mailing Address Fo C La Calla Co				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 50 S La Salle St				10 28 2014
	City	State	Zip Code		Transposition ID + 6566502
	Chicago	IL	60603		Transaction ID: 6566593
	Purpose of Disbursement Bank fees deducted from account			224	A
	Candidate Name			001	Amount of Each Disbursement this Period
	Candidate Name			Category/	73.88
	Office Sought: House Disbursen	nent For		Type	
		Primary	General		Bank fees deducted from account
	President	Other (spe			Sank 1000 doddolod from docount
	State: District:		· 		
	Full Name (Last, First, Middle Initial)				
C.	Northern Trust Company				Date of Disbursement
	Markey Address To O to Const.				M M / D D / Y Y Y Y
	Mailing Address 50 S La Salle St				11 04 2014
	City S	State	Zip Code		
	Chicago	IL	60603		Transaction ID: 6566594
	Purpose of Disbursement Bank fees deducted from account				1
				001	Amount of Each Disbursement this Period
	Candidate Name			Category/	50.83
	Office Sought: House Disbursen	nent For:		Туре	7 7 7
	Senate Dispulser	Primary	General		Rank food doducted from account
	President	Other (spe			Bank fees deducted from account
	State: District:	\ \ I	37 *		
	'				
s	UBTOTAL of Disbursements This Page (optional)				215.06
\vdash	·				
Т	OTAL This Period (last page this line number only)				

S 17

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 60 OF	73
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	INOMBETT.	
II LIMILLO DIODONOLIVILINIO	for each category of the Detailed Summary Page	` X 21b	22 23 24 25	26
		27	28a 28b 28c 29	30b
Any information copied from such Reports and Stater				
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and address of any politi	cai committee to	solicit contributions from such committee.	
Political Action Committee of the A	morican Associatio	n of Orthon	andic Surgons PAC of AAC	10
	mencan Associatio	п ог Оппор	aedic SurgeonsPAC of AAC	<i>,</i> 3
Full Name (Last, First, Middle Initial)			Data of Dishausanant	
A. Northern Trust Company			Date of Disbursement	
Mailing Address 50 S La Salle St			11 05 2014	
				1
,	State Zip Code IL 60603		Transaction ID: 6566595	
Chicago Purpose of Disbursement	IL 60603			
Bank fees deducted from account		001	Amount of Each Disbursement this Peri	iod
Candidate Name		Category/	400.00	П
		Type	439.80	
Office Sought: House Disburser				
Senate President	Primary General Other (specify) ▼		Bank fees deducted from account	
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. Northern Trust Company			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address 50 S La Salle St			11 05 2014	
•	State Zip Code		Transaction ID: 6566596	
Chicago Purpose of Disbursement	IL 60603			
Bank fees deducted from account		001	Amount of Each Disbursement this Peri	iod
Candidate Name		Category/		П
		Type	361.80	
Office Sought: House Disburser				
Senate President	Other (appoint) — General		Bank fees deducted from account	
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
F			Amount of Each Disbursement this Peri	iod
Candidate Name		Category/	Amount of Each Blood coment this Fen	00
		Type		_
Office Sought: House Disburser				
Senate President	Primary General			
State: District:	Other (specify) ▼			
State. Blochot.				
SUBTOTAL of Disbursements This Page (optional)			801.60	
				一
TOTAL This Period (last page this line number only)			1016.66	.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) Political Action Committee of the Ar			
Full Name (Last, First, Middle Initial)			
Friends of John Barrasso Mailing Address P.O. Box 52008			Date of Disbursement 10 17 2014
			10 17 2014
	state Zip Code WY 82605		Transaction ID: 6516639
Casper Purpose of Disbursement	WY 82605		
		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
John Barrasso Office Sought: House Disbursem	nent For: 2018	Туре	
Senate President	Primary		
State: WY District:			
Full Name (Last, First, Middle Initial)			
3. Voice for Freedom			Date of Disbursement
Mailing Address 2700 Cumberland Parkway, Suite	150		10 17 2014
City	State Zip Code		Transaction ID : 6516765
	GA 30339		Transaction ID . 0310703
Purpose of Disbursement Price's LPAC		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Voice for Freedom		Type	5000.00
	nent For: Primary General Other (specify)		Price's LPAC
Full Name (Last, First, Middle Initial)			Date of Disbursement
C. Lee Terry for Congress			M M / D D / Y Y Y Y
Mailing Address P.O. Box 540098			10 17 2014
City	state Zip Code		Transaction ID : 6516767
	NE 68154		11411340tion ID . 00 10707
Purpose of Disbursement		011	
Candidate Name			Amount of Each Disbursement this Period
Lee Terry		Category/ Type	1500.00
Office Sought: House Disbursem Senate President	nent For: 2014 Primary General Other (specify)	.,,,,,	
State: NE District: 02			
SUBTOTAL of Disbursements This Page (optional)		·····•	9000.00
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 62 OF 73
ITEMIZED DISBURSEMENTS	Use separate schedule(s) FOR LINE (check only	INOMBET.
	for each category of the Detailed Summary Page	`21b ´	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30
Any information copied from such Reports and State			
or for commercial purposes, other than using the na	ime and address of any polit	ical committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Political Action Committee of the	American Associatio	n of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial)			
A. Blum for Congress			Date of Disbursement
Didili for Congress			M M / D D / Y Y Y Y
Mailing Address 2728 Asbury Road Suite 400			10 17 2014
-			
City	State Zip Code		Transaction ID: 6516781
Dubuque Purpose of Disbursement	IA 52001		
i dipose oi Dispuisement		011	Amount of Each Disbursement this Period
Candidate Name			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Rodney Blum		Category/ Type	2500.00
•	ement For: 2014		
Senate	Primary General		
President	Other (specify) ▼		
State: IA District: 01			
Full Name (Last, First, Middle Initial)			Data of Dishursement
B. John Chapman for Congress			Date of Disbursement
Mailing Address c/o Red Curve Solutions			10 17 2014
138 Conant Street			
City	State Zip Code		Transaction ID : 6516782
Beverly	MA 01915		
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name			dan di Eddi Biodaldonioni tilid i dilot
John Chapman		Category/ Type	1500.00
	ement For: 2014	, , , , , , , , , , , , , , , , , , ,	
Senate	Primary X General		
President	Other (specify) ▼		
State: MA District: 09			
Full Name (Last, First, Middle Initial)			Date of Disbursement
C. Walker 4 NC			
Mailing Address 2941 Battleground Ave			10 17 2014
Box 38334			
City	State Zip Code		Transaction ID : 6516788
Greensboro	NC 27438		
Purpose of Disbursement		011	
Candidate Name			Amount of Each Disbursement this Period
Bradley Walker		Category/ Type	2500.00
•	ement For: 2014	7,6-5	
Senate	Primary General		
President	Other (specify) ▼		
State: NC District: 06			
			0500.00
SUBTOTAL of Disbursements This Page (optional)		·····	6500.00
TOTAL This Desired (lead 1997)			
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	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) Political Action Committee of the A			
Full Name (Last, First, Middle Initial)			
4. Kurt Schrader for Congress			Date of Disbursement
Mailing Address P.O. Box 3314 Suite 240			10 17 2014
	State Zip Code		Transaction ID : 6516789
Oregon City Purpose of Disbursement	OR 97045		
Fulpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
Kurt Schrader		Type	1300.00
Senate President	ment For: 2014 Primary		
State: OR District: 05			
Full Name (Last, First, Middle Initial) B- DAWG PAC			Date of Disbursement
Mailing Address Democrats Against Waste in Gove 315 Inspiration Lane			10 17 2014
City Gaithersburg	State Zip Code MD 20878		Transaction ID: 6516791
Purpose of Disbursement John Barrow's Leadership PAC		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
DAWG PAC Office Sought: House Disburse	ment For:	Туре	3000.00
Office Sought: Senate President State: Disburse Disburse	Primary General Other (specify)		John Barrow's Leadership PAC
Full Name (Last, First, Middle Initial) Kinzinger for Congress			Date of Disbursement
Mailing Address P.O. Box 2365			10 24 2014
Ottawa	State Zip Code IL 61350		Transaction ID : 6534749
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Adam Kinzinger		Type	2500.00
Senate	ment For: 2014 Primary		
State: IL District: 11			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 64 OF 73
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	
Any information copied from such Reports and State or for commercial purposes, other than using the na			
	and and address of any point	oar committee to	color contributions from cach committee.
NAME OF COMMITTEE (In Full)	A	f O = t = =	
Political Action Committee of the	American Association	n of Orthopa	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial)			B (B) .
. Friends of John Delaney			Date of Disbursement
Mailing Address P.O. Box 60320			10 24 2014
City	State Zip Code		Transaction ID : 6534752
Potomac	MD 20854		11a113action ib . 0334732
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Cotogony	
John Delaney		Category/ Type	5000.00
Office Sought: House Disburse	ement For: 2014 Primary		
Full Name (Last, First, Middle Initial)			
3. Whitfield for Congress Committee)		Date of Disbursement
Mailing Address P.O. Box 391			10 24 2014
City	State Zip Code		Transaction ID : 6534753
Hopkinsville Purpose of Disbursement	KY 42241		
r dipose of bisbursement		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Edward Whitfield		Type	4000.00
Office Sought: House Disburse	ement For: 2014 Primary		
Full Name (Last, First, Middle Initial) Mikulski for Senate Committee			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. Box 13147			10 31 2014
City	State Zip Code		Transaction ID : 6558134
Baltimore	MD 21203		1141154CHOH ID : 0000134
Purpose of Disbursement		044	
Candidate Name		011	Amount of Each Disbursement this Period
Barbara Mikulski		Category/ Type	4650.00
	ement For: 2016 Primary General Other (specify)	туре	
State: MD District:	(Spoon)/ \		
SUBTOTAL of Disbursements This Page (optional)			13650.00
TOTAL This Desired (leak see a little line see a			
TOTAL This Period (last page this line number onl	у)		

SCHEDULE B (FEC Form 3X)	Lico congreto cohodula(a)	FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and States or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	,,		
Political Action Committee of the A	merican Association	of Orthopa	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Doing Right - Results, Action, Unit	v Leadershin PAC		Date of Disbursement
Boiling Right - Results, Action, Only	y, Leadership FAC		M M / D D / Y Y Y Y
Mailing Address P.O. Box 3433			10 31 2014
	State Zip Code		Transaction ID : 6558144
Palm Desert Purpose of Disbursement	CA 92261		
Ryuz' LPAC		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Doing Right - Results, Action, Unity, I	•	Type	5000.00
Senate President	ment For: Primary ☐ General Other (specify) ▼		Ryuz' LPAC
State: District:			
Full Name (Last, First, Middle Initial) B. Buck for Colorado			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. Box 338018			10 31 2014
City Greeley	State Zip Code CO 80633		Transaction ID : 6566597
Purpose of Disbursement Void - Buck for Colorado	30000	011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Bioducement this Felica
Kenneth Buck		Category/ Type	-2500.00
Office Sought: House Disbursel	ment For: 2014 Primary		Void - Buck for Colorado
Full Name (Last, First, Middle Initial)			
C. Garret Graves for Congress			Date of Disbursement
Mailing Address P.O. Box 64845			11 13 2014
City	State Zip Code		Transaction ID: 6585912
Baton Rouge	LA 70896		11a113action 15 : 0303912
Purpose of Disbursement		011	
Candidate Name			Amount of Each Disbursement this Period
Garret Graves		Category/ Type	1000.00
Office Sought: House Senate President Disburse	ment For: 2014 Primary General Other (specify)		
State: LA District: 06	Runoff2014		
SUBTOTAL of Disbursements This Page (optional)		·····	3500.00
TOTAL This Paried (last page this line number only)	1		
TOTAL This Period (last page this line number only)	,		

SCHEDULE B (FEC Form 3X)		, FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	Official of his	one) 22
Any information copied from such Reports and States or for commercial purposes, other than using the nar	ments may not be sold or u	used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
	mariaan Associatio	on of Orthon	andia Surganna DAC of AACS
Political Action Committee of the A	imerican Associatio	on of Orthopa	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial)			B (B) .
A. Ralph Abraham for Congress			Date of Disbursement
Mailing Address P.O. Box 270			11 13 2014
City	State Zip Code		Transaction ID : 6585913
Archibald	LA 71218		Transaction ib . 0000010
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Coto mamut	
Ralph Abraham		Category/ Type	5000.00
Office Sought: House Disburse	ment For: 2014		
Senate	Primary General		
President	Other (specify) ▼		
State: LA District: 05	Runoff201	4	
Full Name (Last, First, Middle Initial)			
B. David Scott for Congress			Date of Disbursement
Mailing Address P.O. Box 960821			11 13 2014
City	State Zip Code		Transaction ID : 6585914
Riverdale	GA 30296		
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
David Scott		Type	1000.00
	ment For: 2016 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			
C			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser	ment For: Primary General Other (specify)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
<u> </u>			2000.00
SUBTOTAL of Disbursements This Page (optional)		·····•	6000.00
TOTAL This Period (last page this line number only)		47650.00

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FOR L	NE 24	OF	FORM 3X

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic FEC IDENTIFICATION NUMBER ▼				
SurgeonsPAC of AAOS C C00343137				
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay			
Full Name of Payee Mammen Group, Inc	Date of Public Distribution/Dissemination			
Mailing Address 4004 L Careat N.W.				
1901 L Street, N.W.	Amount			
City State Zip Code	23133.60			
Washington DC 20036	Transaction ID : 6460317 Date of Disbursement or Obligation			
Purpose of Expenditure Capps-Nurse Category/ Type 011	10 01 / 2014			
Name of Federal Candidate Support Office	ce Sought: X House District: 22			
Lois Capps Oppose	President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought Dist 201	bursement For: Primary X General			
	Other (specify) -			
Full Name of Payee Mammen Group, Inc	Date of Public Distribution/Dissemination			
Mailing Address 1901 L Street, N.W.	10 27 2014 Amount			
City State Zip Code	23408.60			
Washington DC 20036	Transaction ID : 6460319 Date of Disbursement or Obligation			
Purpose of Expenditure Capps-Wounded Warriors Category/ Type 011	10 01 2014			
Name of Federal Candidate Support Offi	ice Sought: X House District: 22			
Lois Capps Oppose	President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought Dis 201	bursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	46542.20			
(a) CODITION OF ROMESON Experiences	7 7			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.				
William J. Robb III, MD [Electronically Filed] Date	11 25 2014			
Signature				

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FOR L	INE 24	OF	FORM	ЗХ

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic FEC IDENTIFICATION NUMBER ▼				
SurgeonsPAC of AAOS C C00343137				
Check if 24-hour report 48-hour report New report Amends re	eport filed on			
Full Name of Payee	Date of Public Distribution/Dissemination			
Mammen Group, Inc	10 29 / Y Y Y Y Y			
Mailing Address 1901 L Street, N.W.	Amount			
City State Zip Code	21815.40			
Washington DC 20036	Transaction ID: 6460321 Date of Disbursement or Obligation			
Purpose of Expenditure Capps-Retirement Category/ Type 01	M M / D D / Y Y Y Y			
Name of Federal Candidate Support	Office Sought: X House District: 22			
Lois Capps Oppose				
Calendar Year-To-Date Per Election for Office Sought 68357.60	Disbursement For: Primary General 2014			
	U Other (specify) ▶			
Full Name of Payee Mammen Group, Inc	Date of Public Distribution/Dissemination			
Mailing Address 1901 L Street, N.W.	10 23 2014 Amount			
City State Zip Code	23612.16			
Washington DC 20036	Transaction ID : 6460323 Date of Disbursement or Obligation			
Purpose of Expenditure Maffei-Choose Your Own Doctor Category/ Type 01	M M / D D / Y Y Y Y			
Name of Federal Candidate Support	t Office Sought: X House District: 25			
Daniel Maffei Oppose	President Senate State: NY			
Calendar Year-To-Date Per Election for Office Sought 70836.48	Disbursement For: Primary General 2014 Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	45427.56			
(a) CODIC III O Remizoe masperiaem Experianacem	10121100			
(b) SUBTOTAL of Unitemized Independent Expenditures	····· >			
(c) TOTAL Independent Expenditures	····· >			
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.				
William J. Robb III, MD [Electronically Filed]	ate 11 25 2014			
Signature				

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FOR L	INE 24	OF	FORM	ЗХ

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Political Action Committee of the American Accesiation of Orthonordia				
Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS				
Check if 24-hour report 48-hour report New report Amends report file	ed on M M / D D / Y Y Y Y Y			
Full Name of Payee	Date of Public Distribution/Dissemination			
Mammen Group, Inc	10 27 / Y Y Y Y Y			
Mailing Address 1901 L Street, N.W.	Amount			
City State Zip Code	23612.16			
Washington DC 20036	Transaction ID : 6460325 Date of Disbursement or Obligation			
Purpose of Expenditure Maffei-A Voice for Central NY Category/ Type 011	10 01 Y Y Y Y Y			
Name of Federal Candidate Support Off	fice Sought: X House District: 25			
Daniel Maffei Oppose	President Senate State: NY			
Per Election for Office Sought 70836.48 20				
5 11 11 12	Other (specify)			
Full Name of Payee Mammen Group, Inc	Date of Public Distribution/Dissemination			
Mailing Address 1901 L Street, N.W.	10 29 2014 Amount			
City State Zip Code	23612.16			
Washington DC 20036	Transaction ID: 6460327 Date of Disbursement or Obligation			
Purpose of Expenditure Maffei-Medicare Category/ Type 011	10 01 2014			
Name of Federal Candidate Support Off	fice Sought: X House District:25			
Daniel Maffei Oppose	President Senate State: NY			
	sbursement For: Primary X General Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	47224.32			
	7 7			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	·			
William J. Robb III, MD [Electronically Filed] Date	11 25 2014			
Signature				

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FOR L	INE 24	OF F	ORM 3X

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NAME OF COMMITTEE (In Full) Political Action Consents a set the Association of Only on a dis-				
Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS C C00343137				
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay			
Full Name of Payee Mammen Group, Inc	Date of Public Distribution/Dissemination			
Mailing Address	10 27 7 2014			
1901 L Street, N.W.	Amount			
City State Zip Code	12334.64			
Washington DC 20036	Transaction ID: 6460404 Date of Disbursement or Obligation			
Purpose of Expenditure Richmond-Podium Category/ Type 011	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	e Sought: X House District: 02			
Cedric Richmond Oppose	President Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought Disb 24669.28 Disb				
	Other (specify)			
Full Name of Payee Mammen Group, Inc	Date of Public Distribution/Dissemination 10 29 2014			
Mailing Address 1901 L Street, N.W.	Amount			
City State Zip Code	12334.64			
Washington DC 20036	Transaction ID : 6460406 Date of Disbursement or Obligation			
Purpose of Expenditure Richmond-a Strong Voice for Louisiana Category/ Type 011	10 01 7 2014			
Name of Federal Candidate Support Office	ce Sought: X House District: 02			
Cedric Richmond Oppose	President Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought Disb. 24669.28	oursement For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	24669.28			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•			
William J. Robb III, MD [Electronically Filed] Date	11 25 2014			
Signature				

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FOR L	INE 24	OF FO	ORM 3X

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Political Action Committee of the American Acceptation of Orthogonalis				
Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS				
Check if 24-hour report 48-hour report New report Amends report	ort filed on			
Full Name of Payee	Date of Public Distribution/Dissemination			
Mentzer Media Services, Inc	10 22 7 2014			
Mailing Address 600 Fairmount Ave	Amount			
City State Zip Code	92950.00			
Towson MD 21286-1006	Transaction ID : 6531399 Date of Disbursement or Obligation			
Purpose of Expenditure Coffman-Common Sense Category/ Type 011	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support	Office Sought: X House District: 06			
Mike Coffman Oppose	President Senate State: CO			
Calendar Year-To-Date Per Election for Office Sought 92950.00	Disbursement For: Primary General 2014 Other (appoint)			
	Other (specify) -			
Full Name of Payee Mentzer Media Services, Inc	Date of Public Distribution/Dissemination			
Mailing Address 600 Fairmount Ave	10 22 2014 Amount			
City State Zip Code	22892.00			
Towson MD 21286-1006	Transaction ID: 6531400 Date of Disbursement or Obligation			
Purpose of Expenditure Benishek-Treated Category/ Type 011	10 22 2014			
Name of Federal Candidate Support	Office Sought: X House District: 01			
Daniel Benishek Oppose	President Senate State: MI			
Calendar Year-To-Date Per Election for Office Sought 22892.00	Disbursement For: Primary General 2014 Gther (specify) ►			
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 115842.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	. >			
	4 4 4			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.				
William J. Robb III, MD [Electronically Filed] Date	11 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

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FOR L	INE 24	OF FO	ORM 3X

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthonordia				
Political Action Committee of the American Association of Orthopaedic SurgeonsPAC of AAOS				
Check if 24-hour report 48-hour report New report Amends report file	iled on Man / Dad / Yayayay			
Full Name of Payee	Date of Public Distribution/Dissemination			
Mentzer Media Services, Inc	10 22 / 2014			
Mailing Address 600 Fairmount Ave	Amount			
City State Zip Code	46495.00			
Towson MD 21286-1006	Transaction ID: 6531401 Date of Disbursement or Obligation			
Purpose of Expenditure Heck-Protecting Category/ Type 011	10 22 / Y 2014			
Name of Federal Candidate Support Of	ffice Sought: X House District: 03			
Joe Heck Oppose	President Senate State: NV			
Per Election for Office Sought 46495.00 20	sbursement For: Primary X General			
	U Other (specify) ►			
Full Name of Payee Mentzer Media Services, Inc	Date of Public Distribution/Dissemination			
Mailing Address 600 Fairmount Ave	10 22 2014 Amount			
City State Zip Code	12861.00			
Towson MD 21286-1006	Transaction ID: 6531402 Date of Disbursement or Obligation			
Purpose of Expenditure Flores-Standing Up Category/ Type 011	10 / 22 / 2014			
Name of Federal Candidate Support Of	ffice Sought: X House District:17			
Bill Flores Oppose	President Senate State: TX			
	isbursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	. 59356.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
William J. Robb III, MD [Electronically Filed] Date	11 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

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FOR L	INE 24	OF	FORM 3X

	FOR LINE 24 OF FORM 3X				
NAME OF COMMITTEE (In Full) Political Action Committee of the American Association of Orthopaedic FEC IDENTIFICATION NUMBER ▼					
SurgeonsPAC of AAOS C C00343137					
Check if 24-hour report 48-hour report New report Amends re	port filed on				
Full Name of Payee Mentzer Media Services, Inc	Date of Public Distribution/Dissemination				
Mailing Address	10 22 / 2014				
600 Fairmount Ave	Amount				
City State Zip Code	18945.00				
Towson MD 21286-1006	Transaction ID : 6531404 Date of Disbursement or Obligation				
Purpose of Expenditure Southerland-Keep Fighting Category/ Type 01	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support	Office Sought: X House District: 02				
William Steve Southerland Oppose	President Senate State: FL				
Calendar Year-To-Date Per Election for Office Sought 18945.00	Disbursement For: Primary X General				
Per Election for Office Sought	Other (specify) -				
Full Name of Payee Mentzer Media Services, Inc	Date of Public Distribution/Dissemination				
Mailing Address 600 Fairmount Ave	Amount				
City State Zip Code	23654.00				
Towson MD 21286-1006	Transaction ID : 6531406 Date of Disbursement or Obligation				
Purpose of Expenditure Reed-Fighter Category/ Type 01	M M / D D / Y Y Y Y				
Name of Federal Candidate Support	Office Sought: X House District: 29				
Thomas Reed Oppose	President Senate State: NY				
Calendar Year-To-Date Per Election for Office Sought 23654.00	Disbursement For: Primary				
(a) SUBTOTAL of Itemized Independent Expenditures	• 42599.00				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	▶ 381660.36				
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.					
	ate 11 25 / Y 2014				
Signature					