Image# 13960621704 PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTIM OX FO	or Other Than An Aut	norized Committee	Office Use Only
NAME OF COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
American College of Rh	neumatology (Rheun	nPAC)	
ADDRESS (number and street)	2200 Lake Boulevard NE		
Check if different			
than previously reported. (ACC)	Atlanta		GA 30319
2. FEC IDENTIFICATION NUI	MBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00432823		S THIS X NEW (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M2) Jun 20 (M3)	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (Q1		20 (M4) Jul 20 (M	7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q3	Report for the:	Convention (12C)	Special (12S)
X January 31 Year-End Report (YE		on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	on on	in the State of
5. Covering Period 11	/ D D / Y Y Y Y 2012	through 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this	Report and to the best of	my knowledge and belief it is	s true, correct and complete.
Type or Print Name of Treasurer	Ed Herzig		
Signature of Treasurer Ed Her	zig	[Electronically Filed]	Date 01 / 31 / 2013
NOTE: Submission of false, erroned	ous, or incomplete information	n may subject the person signi	ng this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American College of Rheumatology (RheumPAC)

Report Covering the Period: From: 11 27 2012 To: 12 31 2012

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		128121.95
	(b) Cash on Hand at Beginning of Reporting Period	135943.86	
	(c) Total Receipts (from Line 19)	12945.16	133844.02
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	148889.02	261965.97
7.	Total Disbursements (from Line 31)	399.02	113475.97
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	148490.00	148490.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American College of Rheumatology (RheumPAC)

I. Receipts	I. Receipts COLUMN A Total This Period		
. Contributions (other than loans) From:			
(a) Individuals/Persons Other			
Than Political Committees		440770.00	
(i) Itemized (use Schedule A)	9576.00	110776.00	
(ii) Unitemized	, 2250.00	17538.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 11826.00	128314.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees			
(such as PACs)	0.00	0.00	
(d) Total Contributions (add Lines			
11(a)(iii), (b), and (c)) (Carry			
Totals to Line 33, page 5)▶	11826.00	128314.00	
. Transfers From Affiliated/Other			
Party Committees	0.00	0.00	
,		7	
. All Loans Received	0.00	0.00	
	7	7	
. Loan Repayments Received	0.00	0.00	
Offsets To Operating Expenditures	0.00	0.00	
(Refunds, Rebates, etc.)			
(Carry Totals to Line 37, page 5)	0.00	0.00	
Refunds of Contributions Made		0.00	
to Federal Candidates and Other			
	0.00	0.00	
Political Committees	0.00	0.00	
Other Federal Receipts	1440.40	5500.00	
(Dividends, Interest, etc.)	1119.16	5530.02	
Transfers from Non-Federal and Levin Funds			
(a) Non-Federal Account	0.00	200	
(from Schedule H3)	0.00	0.00	
(1) 1 · · · · · · · · · · · · · · · · · ·	0.00	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.00	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00	
(5) 15:41 1141151615 (404 15(4) 414 15(5))	0.00	0.00	
. Total Receipts (add Lines 11(d),			
12, 13, 14, 15, 16, 17, and 18(c))▶	12945.16	133844.02	
. Total Federal Receipts			
. IVIAL I EUCLAI NEUCIUIS			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	Total This Period	Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I Ollow	Calcinual Teal-to-Date
(i) Federal Share	0.00	0.00
``		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures		3.55
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party		
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	108500.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other	0.00	365.00
Than Political Committees	0.00	303.00
(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 Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	365.00
Other Disbursements	399.02	4610.97
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	5.55	
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))	399.02	113475.97
	7	
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	399.02	113475.97

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)	11826.00	128314.00
4. Total Contribution Refunds (from Line 28(d))	0.00	365.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11826.00	127949.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

FOR LINE NUMBER (check only one)

FOR LINE NUMBER:					PAGE	6	OF	15	
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16		17

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) American College of Rheuma	tology (RheumPAC)	
Full Name (Last, First, Middle Initial) Max Hamburger Mailing Address 315 Middle Co Rd		Date of Receipt
City Smithtown	State Zip Code NY 11787	Transaction ID : 11291134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	479.00
Name of Employer Rheum Assoc of Long Island Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 2579.00	
Full Name (Last, First, Middle Initial) 3. Eileen Moynihan Mailing Address 1304 Maple Ave		Date of Receipt
City Haddon Heights	State Zip Code NJ 08035	Transaction ID : 11291499 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) David Daikh		Date of Receipt
Mailing Address 3633 Clement	Choto Zin Co-d-	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City San Francisco	State Zip Code CA 94121	Transaction ID : 11293099 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	49.00
Name of Employer UCSF/VA Medical Center	Occupation Rheumatologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 299.00	
SUBTOTAL of Receipts This Page (optional)	•	1528.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

15

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Rheumatology (RheumPAC) Full Name (Last, First, Middle Initial) Deborah D. Desir MD Date of Receipt Mailing Address 3018 Dixwell Ave. 2012 11 27 City State Zip Code Transaction ID: 11298137 CT Hamden 06518 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Arthritis and Osteoporosis PC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Engelbrecht Date of Receipt Mailing Address 4281 Rosemary Lane 11 29 2012 City State Zip Code Transaction ID: 11299990 Rapid City SD 57702 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Black Hills Orth and Spine Cen Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Thomas Geppert Date of Receipt Mailing Address 8144 Walnut Hill Lane 11 29 2012 City Zip Code State Transaction ID: 11299992 TX **Dallas** 75231 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Rheumatology Associates Rheumatologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 600.00 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

FOR LINE NUMBER:				PAGE	Ξ	8	OF	15	
(che	(check only one)								
X	11a		11b		11c		12		
	13		14		15		16	;	17

or for commercial purposes, other than using the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	
American College of Rheumatology (RheumPAC)	
Full Name (Last, First, Middle Initial) Melvin Britton	Date of Receipt
Mailing Address 167 Toyon Road	1.1 29 2012
City State Zip Code	Transaction ID : 11299993
Attierton CA 94027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer Occupation	
Self-Employed Physician	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 250.00	
Full Name (Last, First, Middle Initial) Aryeh Abeles	Date of Receipt
Mailing Address 816 Broad Street St 14	11 29 2012
City State Zip Code	Transaction ID : 11299994
Meriden CT 06450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer Occupation	
Micha Abeles rheumatologist	
Receipt For: Primary Other (specify) Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) David Greenblatt	Date of Receipt
Mailing Address 6755 W. Beechlands Dr.	11 30 2012 _
City State Zip Code	Transaction ID : 11300099
Cincinnati OH 45237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	250.00
Name of Employer Occupation	
Self Physician	
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 only)	

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

FOR LINE	ER: P	AGE	9 OF	15			
(check only one)							
X 11a	11b	11	С	12			
13	14	15		16	17		

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

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American College of Rheuma	atology (RheumPAC)				
Full Name (Last, First, Middle Initial) Samuel Pegram Mailing Address 44825 Almeda Rd		Date of Receipt			
	Mailing Address 44825 Almeda Rd				
City Houston	State Zip Code TX 77004-5655	Transaction ID : 11312832 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation				
Information Requested Receipt For:	Information Requested				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial) 3. Joseph Flood		Date of Receipt			
Mailing Address 751 Jaeger Street		12 04 2012			
City	State Zip Code	Transaction ID: 11319653			
Columbus	OH 43206-2272	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	449.00			
Name of Employer	Occupation				
Musculoskeletal Med Specialist Receipt For:	Physician Rheumatologist				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2449.00				
Full Name (Last, First, Middle Initial) C. Evan L Siegel		Date of Receipt			
Mailing Address 10821 Willow Run Court		12 092012			
City Potomac	State Zip Code MD 20854	Transaction ID : 11339908 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation				
Arthritis & Rheumatism Associates, pc Receipt For:	Rheumatologist				
Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional)	949.00			
TOTAL This Period (last page this line numl	per only)				

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one)

15

ı	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12			
_			13 14 15 16 17			
	ny information copied from such Reports and Stateme for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full) American College of Rheumatology	(RheumPAC)				
/	, anomour conege of renearitationary	(Tallouilli 710)				
١.	Full Name (Last, First, Middle Initial) V.Michael Holers	Michael Holers				
	Mailing Address 1775 Aurora Ct.	12 10 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y				
	City Sta Aurora CC	•	Transaction ID: 11339913			
		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		49.00			
	Name of Employer Occu	pation				
		matologist	_			
	Receipt For: Primary General Aggr	regate Year-to-Date ▼	_			
	Other (specify) ▼	249.00				
3.	Full Name (Last, First, Middle Initial) William Palmer	Date of Receipt				
	Mailing Address 9016 Harney	12 10 2012				
	City Sta	'	Transaction ID: 11339914			
	Omaha NE	68114	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		2000.00			
	Mastraada Madigal Craup	pation matologist				
	Receipt For: Aggr	regate Year-to-Date ▼				
	Primary General	 	1			
	Other (specify) ▼	2000.00				
).	Full Name (Last, First, Middle Initial) Steven J Klein MD		Date of Receipt			
	Mailing Address 346 Mill St.		12 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Sta Hagerstown MI	•	Transaction ID : 11339916			
		≥ ∠1/4U	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		1000.00			
	' '	pation				
		ımatologist	_			
	Receipt For: Primary General Aggr	regate Year-to-Date ▼	_			
	Other (specify) ▼	1000.00				
s	SUBTOTAL of Receipts This Page (optional)		3049.00			
т	OTAL This Period (last page this line number only)					
	The time to one (last page this line number only)					

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

15

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Rheumatology (RheumPAC) Full Name (Last, First, Middle Initial) Gary Bryant Date of Receipt Mailing Address 5429 Vining Point Road 2012 12 City State Zip Code Transaction ID: 11340247 MN Minnetonka 55345 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation University of Minnesota Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Imran Iqbal Date of Receipt Mailing Address 875 Cotswolds CT 2012 12 12 City State Zip Code Transaction ID: 11342235 TX Richardson 75081 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Rheumatology Associates Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Leroy Pacheco Date of Receipt Mailing Address 9013 S. Guadalupe Terr 2012 12 12 City State Zip Code Transaction ID: 11342255 NM Albuquerque 87114 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Albuquerque Rehab and Rheum Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	•	12 OI	F	15
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

	Statements may not be sold or used by any personal ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American College of Rheumato	ology (RheumPAC)	
Full Name (Last, First, Middle Initial) Joseph Laukaitis M.D. Mailing Address 6909 Rannoch Road City Bethesda FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code MD 20817 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 12 13 2012 Transaction ID: 11342488 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Dr. Matthew E Mosbacker Mailing Address 402 Lamont Ave City San Antonio FEC ID number of contributing federal political committee. Name of Employer	State Zip Code TX 78209 C	Date of Receipt 12 17 2012 Transaction ID: 11349291 Amount of Each Receipt this Period 250.00
Arthritis Associates, p.a. Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Karen Kolba Mailing Address 110 Erna Way City Pismo Beach FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code CA 93449 C Occupation Physician Aggregate Year-to-Date ▼ 2050.00	Date of Receipt 12 17 2012 Transaction ID: 11349292 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	400.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 13 OF 15 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Rheumatology (RheumPAC) Full Name (Last, First, Middle Initial) Jayashree Sinha Date of Receipt Mailing Address 309 E 16th 2012 12 City Zip Code State Transaction ID: 11349437 NM **Portales** 88130 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Mercy Arthritis and Osteoporosis Center Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Blake Roessler Date of Receipt Mailing Address Internal Medicine 1150 W Medical Center Dr 12 31 2012 City State Zip Code Transaction ID: 11355038 MI Ann Arbor 48109 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation University of Michigan professor Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... 9576.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 15 (check only one) 11a 11b 11c 12 13 14 15 16 X 17
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Rheumato	logy (Rhe	eumPAC)	
Full Name (Last, First, Middle Initial) American College of Rheumatology Mailing Address 2200 Lake Boulevard NE			Date of Receipt
City	State	Zip Code	11 30 2012 Transaction ID : 11299997
Atlanta	GA	30319	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		720.14
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5131.00	October 2012 Credit Card Fees
Full Name (Last, First, Middle Initial) 3. American College of Rheumatology			Date of Receipt
Mailing Address 2200 Lake Boulevard NE City	State	Zip Code	12 20 2012 Transaction ID : 11352803
Atlanta	GA	30319	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		399.02
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5530.02	November 2012 CC Fees
Full Name (Last, First, Middle Initial)			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.	С		
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)			1119.16

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

1119.16

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 15 OF 15			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)					
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c × 29			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)	ic and address of any pointe	ar committee to	Solicit Contributions	nom sach committee.			
	(/PhoumDAC)						
American College of Rheumatology	y (KneumPAC)						
Full Name (Last, First, Middle Initial)							
A. SunTrust Bank Charges			Date of Disburse	ment			
-			M M / D				
Mailing Address PO Box 622227			12 0	1 2012			
City	State Zip Code						
Orlando	FL 32862-2227		Transaction ID	: 11411484			
Purpose of Disbursement							
		001	Amount of Each	Disbursement this Period			
Candidate Name		Category/		399.02			
		Туре		399.02			
Office Sought: House Disbursen							
	Primary General Other (specify) ▼						
State: District:	Officer (Specify)						
Full Name (Last, First, Middle Initial)							
3.			Date of Disburse	ment			
			M M / D	D / Y Y Y Y			
Mailing Address							
City	State Zip Code						
Purpose of Disbursement							
r dipose of Biobardement			Amount of Each	Disbursement this Period			
Candidate Name		Catagony					
		Category/ Type					
Office Sought: House Disbursen	nent For:						
	Primary General						
	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) C.			Date of Disburse	mont			
J.			M M / D				
Mailing Address			M = M / D =	D			
City	State Zip Code						
Purpose of Disbursement							
Furpose of Disbursement				D. I			
Candidate Name			Amount of Each	Disbursement this Period			
		Category/ Type	1				
Office Sought: House Disbursen	nent For:	.75~					
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)				399.02			
				200.00			
TOTAL This Period (last page this line number only)				399.02			