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Image# 201511099003296713

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For	Other Th	nan An Auth	orized C	commit	tee		Office U	se Only	
NAME OF COMMITTEE (in		E OR PRII	NT ▼	•	ole: If typ ne lines.	ing, type	12FE	4M5		
THE AMERICA	N CONGR	ESS O	F OB-GYN	SPAC	(OB-G	YN PAC)			
ADDRESS (number an		9 12TH ST	REET, SW							
Check if different than previous reported. (At	sly , w	/ASHINGT	ON				DC	20024	<u> </u>	
2. FEC IDENTIFIC	ATION NUMB	ER ▼	CITY	′ ▲			STATE A	L	ZIP CO	DE 🛦
C C0036415	8		3. IS RE	THIS EPORT	×	NEW (N) OR		AMENDED (A)		
4. TYPE OF REF (Choose One) (a) Quarterly Rep	,	b) Monthly Report Due On	Mar 2	20 (M2) 20 (M3) 20 (M4)		May 20 (M5 Jun 20 (M6 Jul 20 (M7)		Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	X	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October Quarterly January	Report (Q3)	PF	-Day RE-Election port for the: Election	Co	imary (12			neral (12G) ecial (12S)	in the State o	Runoff (12R)
July 31 Report (Year On	Mid-Year Non-election	PC	-Day DST-Election port for the: Election		eneral (30	OG)	Ru	noff (30R)	in the State o	Special (30S)
5. Covering Period	10	01	2015		through	10	M / D 31	D / Y Y 20	15 Y	
I certify that I have ex Type or Print Name of		eport and		ny knowle	dge and	belief it is	true, corre	ct and comple	te.	
Signature of Treasure	MARY SCH	HILLING		[El	lectronical	ly Filed]	Date	11 09	D /	2015
NOTE: Submission of t	alse, erroneous,	or incomp	lete information	may subje	ct the pe	rson signing	this Repor	t to the penalti	es of 2 l	J.S.C. §437g.
Office Use Only								I .	FOR Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

01 2015 10 2015 Report Covering the Period: 10 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 171093.63 January 1, 2015 (b) Cash on Hand at 246871.22 Beginning of Reporting Period..... 548409.60 64103.45 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 310974.67 719503.23 6(a) and 6(c) for Column B)..... 14536.73 423065.29 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 296437.94 296437.94 (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) 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

THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	41667.43	370877.69
(ii) Unitemized	, 22436.02	177531.91
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 64103.45	548409.60
(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	01100 15	548409.60
Totals to Line 33, page 5)	64103.45	340409.00
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other		
Political Committees	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	64103.45	548409.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	64103.45	548409.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal	1000 1000	Salondal Tour-to-Date
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	2036.73	14000.29
(c) Total Operating Expenditures		7 7 7
(add 21(a)(i), (a)(ii), and (b))	▶ 2036.73	14000.29
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees		5.00
and Other Political Committees	12500.00	354000.00
Independent Expenditures	0.00	0.00
(use Schedule E)		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loan riepayments wade		7 7 7
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	65.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	▶ 0.00	65.00
Other Disbursements		75000.00
Other Disbursements	0.00	55000.00
Federal Election Activity (2 U.S.C. §43	31(20))	
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
()		0.00
(ii) "Levin" Share		0.00
(b) Federal Election Activity Paid Ent With Federal Funds	·	0.00
(c) Total Federal Election Activity (ad	d	
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(d)	2)) 14536.73	423065.29
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(
from Line 31)	14536.73	423065.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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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)	64103.45	548409.60				
4. Total Contribution Refunds (from Line 28(d))	0.00	65.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64103.45	548344.60				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2036.73	14000.29				
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
3. Net Operating Expenditures (subtract Line 37 from Line 36)	2036.73	14000.29				

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

FOR LINE NUMBER:					PAGE		6	OF	56
(check only one)									
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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) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) A. TOD C. AEBY Mailing Address 1319 PUNAHOU STREET		Date of Receipt
City	State Zip Code HI 96826	10 18 2015 Transaction ID : SA11Al.26911
FEC ID number of contributing federal political committee.	C 96826	Amount of Each Receipt this Period 40.00
Name of Employer UNIVERSITY OF HAWAII	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 215.00	
Full Name (Last, First, Middle Initial) B. DHRUV AGNESHWAR Mailing Address 817 STONEHEDGE DRIVE		Date of Receipt
City VESTAL	State Zip Code NY 13850	Transaction ID : SA11Al.27147 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) THOMAS L. ALDERSON		Date of Receipt
Mailing Address 3664 EDINBOROUGH DR		10 24 2015
City ROCHESTER HILLS	State Zip Code MI 48306	Transaction ID : SA11AI.27065 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer MCLAREN WOMEN'S HEALTH	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		640.00
TOTAL This Period (last page this line numb	er only)	

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

	FO	R LINE	NUMBE	R:	PAGE	7 (OF	56
(check only one)								
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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) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) JOHN R. ALLBERT Mailing Address 2619 SHERWOOD AVENU	JE	Date of Receipt
City CHARLOTTE	State Zip Code NC 28207	10 08 2015 Transaction ID : SA11AI.26797 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer NOVANT HEALTH	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) JOSEPH F. AMATO Mailing Address 1215 KILHAM COURT		Date of Receipt 10 20 2015
City COLUMBUS	State Zip Code OH 43235	Transaction ID : SA11AI.26968 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer COLLEGE OF OSTEOPATHIC OB/GYN	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) . JOSEPH J. APUZZIO		Date of Receipt
Mailing Address 164 JOCKEY HOLLOW	7. 0.1	10 09 / 2015
City UNION	State Zip Code NJ 07083	Transaction ID : SA11AI.26746 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer NEW JERSEY MEDICAL SCHOOL Receipt For:	Occupation PHYSICIAN	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 415.00	
SUBTOTAL of Receipts This Page (optional).		440.00
TOTAL This Period (last page this line numb	er only)	

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

	FO	R LINE	NU	MBER	:	PAGE	8	OF	56
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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) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) THOMAS F. ARNOLD Mailing Address 1145 14TH AVENUE WES	т	Date of Receipt
City DICKINSON	State Zip Code ND 58601	10 06 2015 Transaction ID : SA11AI.26499 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	625.00
Name of Employer CATHOLIC HEALTH INITIATIVES	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2850.00	
Full Name (Last, First, Middle Initial) 3. JESSICA ATRIO Mailing Address 4 WOODLAND AVENUE		Date of Receipt
City BRONXVILLE	State Zip Code NY 10708	10 24 2015 Transaction ID : SA11AI.27148 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer MONTEFIORE HOSPITAL	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) VANESSA M. BARNABEI		Date of Receipt
Mailing Address 640B ESSJAY ROAD	Charles 7in Confe	10 23 2015
City WILLIAMSVILLE	State Zip Code NY 14221	Transaction ID : SA11AI.27117 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer SUNY AT BUFFALO	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1625.00
TOTAL This Period (last page this line numb	er only)	

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

	LINE	_		:	PAGE	9	OF	56
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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) THE AMERICAN CONGRESS (OF OB-GYNS PAC (OB-GYN PAC	C)
۹.	Full Name (Last, First, Middle Initial) MIBHALI M. BHALALA Mailing Address 1150 VETERANS BOULEVAR	D	Date of Receipt
	City REDWOOD CITY FEC ID number of contributing federal political committee. Name of Employer PERMANENTE MEDICAL GROUP Receipt For: Primary General Other (specify)	State Zip Code CA 94063 C Occupation PHYSICIAN Aggregate Year-to-Date ▼ 640.00	Transaction ID : SA11AI.26829 Amount of Each Receipt this Period 40.00
	Full Name (Last, First, Middle Initial) ANNA BIDA-DUDUN Mailing Address 142 FIELDSTONE LANE City DIXON FEC ID number of contributing federal political committee. Name of Employer KSB HOSPITAL Receipt For: Primary General Other (specify) Other (specify)	State Zip Code IL 61021 C Occupation PHYSICIAN Aggregate Year-to-Date ▼ 350.00	Date of Receipt 10 23 2015 Transaction ID: SA11AI.27118 Amount of Each Receipt this Period 350.00
) .	Full Name (Last, First, Middle Initial) MAY H. BLANCHARD Mailing Address 1316 BELT STREET City BALTIMORE FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY OF MARYLAND Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21230 C Occupation PHYSICIAN Aggregate Year-to-Date ▼ 600.00	Date of Receipt 10 06 2015 Transaction ID: SA11Al.26500 Amount of Each Receipt this Period 25.00
s	UBTOTAL of Receipts This Page (optional)	•	415.00
Т	OTAL This Period (last page this line number of	only)	

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or for commercial purposes, other than using	ng the name and address of any political committee	
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRE	SS OF OB-GYNS PAC (OB-GYN P	AC)
Full Name (Last, First, Middle Initial) HOWARD A. BLANCHETTE Mailing Address 7 BRINSCALL COURT		Date of Receipt 10 24 2015
City	State Zip Code	Transaction ID : SA11AI.27151
DANBURY	CT 06810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
NEW YORK MEDICAL COLLEGE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	490.00	
Full Name (Last, First, Middle Initial) 3. KEITH R. BRILL	'	Date of Receipt
Mailing Address 5502 SOUTH FORT APA	ACHE ROAD	M = M / D = D / Y = Y = Y
City	State Zip Code	10 18 2015
LAS VEGAS	NV 89148	Transaction ID : SA11AI.26819 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer WOMEN'S SPECIALTY CARE	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1313 RED RIVER STRE	ET	10 02 _ 2015 _
City AUSTIN	State Zip Code TX 78701	Transaction ID : SA11AI.26572 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
SELF-EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	al)	815.00
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TOTAL This Period (last page this line nur	mber only)	

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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	SS OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle Initial) HAYWOOD L. BROWN		Date of Receipt
Mailing Address 10113 BARNHART WAY		10 02 2015
City	State Zip Code	Transaction ID : SA11AI.26573
RALEIGH	NC 27617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	
DUKE UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) HAYWOOD L. BROWN		Date of Receipt
Mailing Address 10113 BARNHART WAY		10 09 2015
City	State Zip Code	Transaction ID : SA11AI.26747
RALEIGH	NC 27617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
DUKE UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1200.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 5605 RAVENWOOD DRI	VE	10 30 2015
City	State Zip Code	Transaction ID : SA11AI.27034
COLUMBIA	SC 29206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
UNIVERSITY OF SOUTH CAROLINA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1300.00	
SUBTOTAL of Receipts This Page (optional	l)	675.00
TOTAL This Period (last page this line num	ber only)	

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

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Full Name (Last, First, Middle Initial) RONALD T. BURKMAN		Date of Receipt
Mailing Address 289 ARDSLEY ROAD		10 08 2015
City	State Zip Code	Transaction ID : SA11AI.26798
LONGMEADOW	MA 01106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
BAYSTATE HEALTH	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	525.00	
Full Name (Last, First, Middle Initial) KIMBERLY CARTER	'	Date of Receipt
Mailing Address 9601 RAINLILLY LANE		M = M / D = D / Y = Y = Y
City	State Zip Code	10 23 2015 Transaction ID : SA11AI.27294
AUSTIN	TX 78759	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	
SETON FAMILY OF HOSPITALS	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	210.00	
Full Name (Last, First, Middle Initial) ROBERTO CASANOVA	'	Data of Bossint
Mailing Address 3601 4TH STREET		Date of Receipt
		10 04 2015
City	State Zip Code	Transaction ID : SA11AI.26537
LUBBOCK	TX 79430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
TEXAS TECH UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	230.00	1

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

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	13		14		15	16		17

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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) A. RACHEL K. CASEY Mailing Address 1014 7TH STREET, SE		Date of Receipt
City WASHINGTON	State Zip Code DC 20003	Transaction ID : SA11Al.26748 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer INOVA HEALTH	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) B. EVA CHALAS Mailing Address 27 FRANKLIN COURT		Date of Receipt
City GARDEN CITY	State Zip Code NY 11530	10 23 2015 Transaction ID : SA11AI.27120 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer WINTHROP UNIVERSITY HOSPITAL	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) EVA CHALAS		Date of Receipt
Mailing Address 27 FRANKLIN COURT	2	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GARDEN CITY	State Zip Code NY 11530	Transaction ID : SA11AI.27238 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	2500.00
Name of Employer WINTHROP UNIVERSITY HOSPITAL	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)		5075.00
TOTAL This Period (last page this line numbe	r only)	

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

FOR	R LINE	NU	IMBER	:	PAGE	_ ′	14	OF	56
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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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) PRASANTA CHANDRA Mailing Address 220A ST. NICHOLAS AVEN	IUE	Date of Receipt
City BROOKLYN	State Zip Code NY 11237	10 22 2015 Transaction ID : SA11AI.26810 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	220.00
Name of Employer ST. NICHOLAS OB/GYN ASSOCIATES	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2240.00	
Full Name (Last, First, Middle Initial) SCOTT T. CHATHAM Mailing Address 405 5TH STREET PLACE		Date of Receipt 10 30 _2015 _
City CONOVER	State Zip Code NC 28618	Transaction ID : SA11AI.27037 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer CATAWBA WOMEN'S CENTER	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) . BEN H. CHEEK		Date of Receipt
Mailing Address 231 CASCADE ROAD		10 12 / Y = Y = Y = Y = Y
City COLUMBUS	State Zip Code GA 31904	Transaction ID : SA11AI.26641 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer ST. FRANCIS HOSPITAL	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2483.30	
SUBTOTAL of Receipts This Page (optional)		803.33
TOTAL This Period (last page this line numbe	r only)	

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

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Full Name (Last, First, Middle Initial) BEN H. CHEEK Mailing Address 231 CASCADE ROAD		Date of Receipt
		10 30 2015
COLUMBUS	State Zip Code	Transaction ID : SA11AI.27038
COLUMBUS	GA 31904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
ST. FRANCIS HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2633.30	
Full Name (Last, First, Middle Initial) DONALD D. CHERVENAK		Date of Receipt
Mailing Address 16 BOARDWALK AVENUE	<u> </u>	M = M / D = D / Y = Y = Y = Y
City	State Zip Code	10 26 2015
WINDHAM	ME 04062	Transaction ID : SA11AI.26707 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	800.00
Name of Employer	Occupation	
FLORAM PARK MEDICAL CENTER	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	3300.00	
Full Name (Last, First, Middle Initial) DONALD D. CHERVENAK		Date of Receipt
Mailing Address 16 BOARDWALK AVENUE	<u> </u>	10 30 2015
City WINDHAM	State Zip Code ME 04062	Transaction ID : SA11AI.27039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	-
FLORAM PARK MEDICAL CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	3450.00	

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Full Name (Last, First, Middle Initial)	OF OB-GYNS PAC (OB-GYN PA	,
DONALD D. CHERVENAK Mailing Address 16 BOARDWALK AVENUE		Date of Receipt 10 30 2015
City	State Zip Code	Transaction ID : SA11AI.27040
WINDHAM	ME 04062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer	Occupation	
FLORAM PARK MEDICAL CENTER	PHYSICIAN	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 3575.00	
Full Name (Last, First, Middle Initial) DONALD D. CHERVENAK		Date of Receipt
Mailing Address 16 BOARDWALK AVENUE		M = M / D = D / Y = Y = Y
City	State Zip Code	10 30 2015
WINDHAM	ME 04062	Transaction ID : SA11AI.27041 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer FLORAM PARK MEDICAL CENTER	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3725.00	
Full Name (Last, First, Middle Initial)		
CAMILLE A. CLARE		Date of Receipt
Mailing Address 1376 MIDLAND AVENUE City	State Zip Code	10 30 2015
BRONXVILLE	NY 10708	Transaction ID : SA11AI.27173 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
METROPOLITAN HOSPITAL CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	675.00	
SUBTOTAL of Receipts This Page (optional)		775.00

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Full Name (Last, First, Middle Initial) JEANNE A. CONRY	SS OF OB-GYNS PAC (OB-GYN PA	Date of Receipt
Mailing Address 8204 CANTERSHIRE W	'AY	10 06 2015
City	State Zip Code	Transaction ID : SA11AI.26501
GRANITE BAY	CA 95746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	544.44
Name of Employer	Occupation	1
KAISER PERMANENTE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3911.08	
Full Name (Last, First, Middle Initial) JOSE J. CUETO	•	Date of Receipt
Mailing Address 4339 SIERRA MADRE I	DRIVE	M = M / D = D / Y = Y = Y
City	State Zip Code	10 23 2015
SACRAMENTO	CA 95864	Transaction ID : SA11AI.27295 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lacif Heceipt this Fellou
federal political committee.	C	40.00
Name of Employer	Occupation	
SUTTER MEDICAL GROUP	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) General General	340.00	
Full Name (Last, First, Middle Initial) HOLLY CUMMINGS	·	Date of Receipt
Mailing Address 144 UPLAND ROAD		10 16 2015
City HAVERTOWN	State Zip Code PA 19083	Transaction ID : SA11AI.26813 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	-
UNIVERSITY OF PENNSYLVANIA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	30 0	
Other (specify)	250.00	

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or for commercial purposes, other than using the	name and address of any political committee to	
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS (OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial) A. STELLA DANTAS		Date of Receipt
Mailing Address 6906 SOUTHWEST WINDEM	ERE LOOP	10 16 2015
City	State Zip Code	Transaction ID : SA11AI.26843
PORTLAND	OR 97225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
NORTHWEST PERMANENTE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1648.31	
Full Name (Last, First, Middle Initial) 3. STELLA DANTAS		Date of Receipt
Mailing Address 6906 SOUTHWEST WINDEM	ERE LOOP	10 18 _2015 _
City	State Zip Code	Transaction ID : SA11AI.26820
PORTLAND	OR 97225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	208.33
Name of Employer	Occupation	
NORTHWEST PERMANENTE	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1856.64	
Full Name (Last, First, Middle Initial) THOMAS S. DARDARIAN		Date of Receipt
Mailing Address 108 CETON COURT		10 17 2015
City	State Zip Code	Transaction ID : SA11AI.26817
BROOMAIL	PA 19008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	210.00
Name of Employer	Occupation	
MAIN LINE WOMEN'S HEALTH CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1845.00	
SUBTOTAL of Receipts This Page (optional)		458.33
TOTAL This Period (last page this line number of	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) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) NATHANIEL DENICOLA Mailing Address 2046 MANNING STREET		Date of Receipt
Mailing Address 2218 MANNING STREET		10 04 2015
City PHILADELPHIA	State Zip Code PA 19103	Transaction ID : SA11AI.26495
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	417.00
Name of Employer	Occupation	
UNIVERSITY OF PENNSYLVANIA Receipt For:	PHYSICIAN	
Primary General Other (specify)	Aggregate Year-to-Date ▼ 2920.00	
Full Name (Last, First, Middle Initial) JANE ANN DIMER		Date of Receipt
Mailing Address ON ELLIS POND		10 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MERCER ISLAND	State Zip Code WA 98040	Transaction ID : SA11AI.27314
FEC ID number of contributing federal political committee.	C 30040	Amount of Each Receipt this Period 40.00
Name of Employer GROUP HEALTH PERMANENTE	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) C. JONATHAN A. DUNN		Date of Receipt
Mailing Address 1707 FROUDE STREET		10 15 2015
City SAN DIEGO	State Zip Code CA 92107	Transaction ID : SA11AI.26677 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
SCRIPPS CLINIC	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) General	290.00	
SUBTOTAL of Receipts This Page (optional).		497.00
TOTAL This Period (last page this line numb	er only)	

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NAME OF COMMITTEE (IN FUII) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) HELEN A. DUNNINGTON Mailing Address 4810 IMOGENE STREET		Date of Receipt
City	State Zip Code	10 02 2015 Transaction ID : SA11AI.26574
HOUSTON	TX 77096	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer	Occupation	
BAYLOR COLLEGE OF MEDICINE	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) JULIA SCHLAM EDELMAN		Date of Receipt
Mailing Address 3 VIRGINIA DRIVE		M M / D D / Y Y Y Y
City	State Zip Code	10 21 2015 Transaction ID : SA11AI.26987
LAKEVILLE	MA 02347	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) DIANNE M. EDGAR		Date of Descipt
Mailing Address 1340 HIGHLAND AVENUE	<u> </u>	Date of Receipt 10 22 2015
City ROCHESTER	State Zip Code NY 14620	Transaction ID : SA11AI.26811 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
PARK WEST WOMEN'S HEALTH	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
		270.00

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	SS OF OB-GYNS PAC (OB-GYN PAC)	4C)
AARON ELKIN	Date of Receipt	
Mailing Address 1309 NORTH FEDERAL		10 28 2015
City	State Zip Code	Transaction ID : SA11AI.27377
HOLLYWOOD	FL 33020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
SELF-EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	615.00	
Full Name (Last, First, Middle Initial) MEGAN L. EVANS		Date of Receipt
Mailing Address 190 DUDLEY STREET		10 24 2015 _
City	State Zip Code	Transaction ID : SA11AI.27155
BROOKLINE	MA 02445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	_
TUFTS MEDICAL CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	430.00	
Full Name (Last, First, Middle Initial)		Date of Pagaint
Mailing Address 316 ORACLE ROAD		Date of Receipt
City	State Zip Code	10 08 2015 Transaction ID : SA11AI.26799
WILMINGTON	DE 19808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
ST. FRANCIS HOSPITAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (option	al)	260.00
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Full Name (Last, First, Middle Initial) MAUREEN E. FARRELL	SS OF OB-GYNS PAC (OB-GYN PA	Date of Receipt
Mailing Address 4344 SANTA MONICA	AVENUE	10 19 2015
City	State Zip Code	Transaction ID : SA11AI.26821
SAN DIEGO	CA 92107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	-
U.S. NAVY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) MERIDITH FARROW		Date of Receipt
Mailing Address 2026 CHEROKEE DRIV	/E	M = M / D = D / Y = Y = Y
City	State Zip Code	10 09 2015
NEPTUNE BEACH	FL 32266	Transaction ID : SA11AI.26638 Amount of Each Receipt this Period
FEC ID number of contributing	V==0	Amount of Each Heceipt this Fellou
federal political committee.	C	50.00
Name of Employer	Occupation	
UNIVERSITY OF FLORIDA	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) MARTHA T. FERNANDEZ	'	Date of Receipt
Mailing Address 880 KEMPSVILLE ROA	AD	10 25 2015
City NORFOLK	State Zip Code VA 23502	Transaction ID : SA11AI.27315 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	1
THE GROUP FOR WOMEN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	340.00	

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or for commercial purposes, other than using	the name and address of any political committee			
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	AC)		
Full Name (Last, First, Middle Initial) STEVEN FLEISCHMAN Mailing Address 148 RIMMON ROAD		Date of Receipt		
City	State Zip Code	10		
WOODBRIDGE	CT 06525	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	209.00		
Name of Employer OB/GYN & MENOPAUSE PHYSICIANS	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1459.00			
Full Name (Last, First, Middle Initial) B. DAVID A. FORSTEIN		Date of Receipt		
Mailing Address 890 WEST FARIS ROAD	10 22 2015			
City GREENVILLE	State Zip Code SC 29605	Transaction ID : SA11AI.26812 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer GREENVILLE HEALTH SYSTEM	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address 890 WEST FARIS ROAD		10 23 2015 _		
City GREENVILLE	State Zip Code SC 29605	Transaction ID : SA11AI.27296 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	40.00		
Name of Employer	Name of Employer Occupation			
GREENVILLE HEALTH SYSTEM Receipt For:	_			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00			
SUBTOTAL of Receipts This Page (optional)		349.00		
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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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PA	C)		
Full Name (Last, First, Middle Initial) PAMELA GALLUP GAUDRY Meiling Address B.O. DOX 2005		Date of Receipt		
Mailing Address P.O. BOX 2805	10 24 2015			
City TYBEE ISLAND	State Zip Code GA 31328	Transaction ID : SA11AI.27066 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer MEMORIAL HEALTH MEDICAL CENTER Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) B. DAVID L. GANDELL Mailing Address 21 WARWICK DRIVE		Date of Receipt		
Mailing Address 21 WARWICK DRIVE City FAIRPORT FEC ID number of contributing federal political committee.	State Zip Code NY 14450	10 23 2015 Transaction ID : SA11AI.27121 Amount of Each Receipt this Period 2500.00		
Name of Employer ROCHESTER OB/GYN ASSOCIATES Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 2500.00			
Full Name (Last, First, Middle Initial) WENDY GILES Mailing Address 140 VANN STREET NORTH	HEAST State Zip Code	Date of Receipt 10 29 2015 Transaction ID: SA11AI.27046		
MARIETTA FEC ID number of contributing federal political committee.	GA 30060	Amount of Each Receipt this Period 500.00		
Name of Employer SELF-EMPLOYED Receipt For: Primary General	Occupation PHYSICIAN Aggregate Year-to-Date ▼			
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	<u> </u>	3250.00		
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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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial) R. MOSS HAMPTON Mailing Address 3930 EDGEBROOK COURT	г	Date of Receipt
City MIDLAND	State Zip Code TX 79707	10 09 2015 Transaction ID : SA11AI.26488 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer TEXAS TECH UNIVERSITY Receipt For: Primary General Other (specify)	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 4360.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial) B. VERONICA HELGANS	4300.00	Date of Receipt
Mailing Address 123 DOG LANE City STORRS	State Zip Code CT 06268	10 28 2015 Transaction ID : SA11AI.27379 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	40.00
SELF-EMPLOYED Receipt For: Primary General Other (specify) ▼	PHYSICIAN Aggregate Year-to-Date ▼ 290.00	
Full Name (Last, First, Middle Initial) C. RICHARD W. HENDERSON Mailing Address 1709 CLEAVER LANE		Date of Receipt
City WILMINGTON	State Zip Code DE 19803	Transaction ID : SA11AI.26756 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	2500.00
Name of Employer ST. FRANCIS HOSPITAL Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 4720.00	
SUBTOTAL of Receipts This Page (optional)	•	3540.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) A. RICHARD W. HENDERSON		Date of Receipt
Mailing Address 1709 CLEAVER LANE		10 16 7 2015
City WILMINGTON	State Zip Code DE 19803	Transaction ID : SA11AI.26814
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	210.00
Name of Employer	Occupation	
ST. FRANCIS HOSPITAL	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	4930.00	
Full Name (Last, First, Middle Initial) LISA M. HOLLIER		Date of Receipt
Mailing Address 6612 MERCER STREET		10 04 2015
City	State Zip Code	Transaction ID: SA11AI.26536
HOUSTON	TX 77005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
BAYLOR COLLEGE OF MEDICINE	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2700.00	
Full Name (Last, First, Middle Initial) C. ANN L. HONEBRINK		Date of Receipt
Mailing Address 130 VALLEY ROAD		10 08 2015
City	State Zip Code	Transaction ID : SA11AI.26800
ARDMORE	PA 19003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	
UNIVERSITY OF PENNSYLVANIA	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional)		810.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
/	SS OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle Initial) RICHARD T. IVEY		Date of Receipt
Mailing Address 4023 BETSY LANE		10 02 2015
City	State Zip Code	Transaction ID : SA11AI.26578
HOUSTON	TX 77027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	800.00
Name of Employer	Occupation	
BAYLOR COLLEGE OF MEDICINE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2000.00	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) MARIE JOHANTGEN		Date of Receipt
Mailing Address 3115 31ST COURT SOL	10 04 _2015 _	
City	State Zip Code	Transaction ID : SA11AI.26496
OLYMPIA	WA 98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer		
GROUP HEALTH COOPERATIVE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) DAPHNE L. JONES		Date of Receipt
Mailing Address 1755 DECATUR AVENU	JE	10 15 2015
City	State Zip Code	Transaction ID : SA11Al.26696
FLORENCE	AL 35630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
NORTH ALABAMA OB/GYN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (options	al)	1600.00
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	the name and address of any political committee	
THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	AC)
Full Name (Last, First, Middle Initial) ELLEN M. JOYCE		Date of Receipt
Mailing Address P.O. BOX 363		10 09 2015
City	State Zip Code	Transaction ID : SA11AI.26757
MERIDEN	NH 03770	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer	Occupation	
DARTMOUTH-HITCHCOCK MEDICAL	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) 3. SCOTT JULIAN		Date of Receipt
Mailing Address 5911 OAK CREEK DRIVE		10 03 2015
City	State Zip Code	Transaction ID : SA11AI.26546
MIDLAND	TX 79707	Amount of Each Receipt this Period
FEC ID number of contributing		T
federal political committee.	C	350.00
Name of Employer	Occupation	
TEXAS TECH UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) DEBORAH D. KAMALI		Date of Receipt
Mailing Address 783 35TH AVENUE		10 23 2015 _
City	State Zip Code	Transaction ID : SA11AI.27083
SAN FRANCISCO	CA 94121	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
USC SAN FRANCISCO	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional).		1200.00
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NAME OF COMMITTEE (In Full)	the name and address of any political committee S OF OB-GYNS PAC (OB-GYN PA	
Full Name (Last, First, Middle Initial) A. ADI KATZ Mailing Address 7610 34TH AVENUE City JACKSON HEIGHTS FEC ID number of contributing federal political committee. Name of Employer NSLI JEWISH HEALTH SYSTEM Receipt For: Primary General Other (specify)	State Zip Code NY 11372 C Occupation PHYSICIAN Aggregate Year-to-Date ▼ 250.00	Date of Receipt 10 23 2015 Transaction ID: SA11AI.27125 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) CAROLINE A. KAUFMAN Mailing Address 1000 SAN MARCOS STRE City AUSTIN FEC ID number of contributing federal political committee. Name of Employer AUSTIN REGIONAL CLINIC Receipt For: Primary General Other (specify)	State Zip Code TX 78702 C Occupation PHYSICIAN Aggregate Year-to-Date 365.00	Date of Receipt 10 14 2015 Transaction ID: SA11AI.26611 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) LEAH A. KAUFMAN Mailing Address 8525 WOODBOX ROAD City MANLIUS FEC ID number of contributing federal political committee. Name of Employer SUNY UPSTATE MEDICAL Receipt For: Primary General Other (specify)	State Zip Code NY 13104 C Occupation PHYSICIAN Aggregate Year-to-Date ▼ 525.00	Date of Receipt 10 08 2015 Transaction ID: SA11AI.26634 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional).	>	400.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) MICHAEL P. KEZMOH		Date of Receipt
Mailing Address 1525 FRESWICK DRIVE		10 23 2015
City	State Zip Code	Transaction ID : SA11AI.27085
FOLSOM	CA 95630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
KAISER PERMANENTE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. LEANNE K. KOMOROWSKI		Date of Receipt
Mailing Address 1750 GEORGE BELL CIRC	10 26 2015	
City	State Zip Code	Transaction ID : SA11AI.27335
ANCHORAGE	AK 99515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	
SOUTH CENTRAL FOUNDATION	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) . NICHOLAS KULBIDA		Date of Receipt
Mailing Address 1043 LAMPLIGHTER ROA	D	10 24 2015
City NISKAYUNA	State Zip Code NY 12309	Transaction ID : SA11AI.27162 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
ELLIS MEDICINE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	800.00	
SUBTOTAL of Receipts This Page (optional).	>	790.00
TOTAL This Period (last page this line number	er 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.
/	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) VIRGINIA C. LESLIE Mailing Address 2816 NORTHEAST 12TH A	AVENUE	Date of Receipt
City PORTLAND	State Zip Code OR 97212	10 15 2015 Transaction ID : SA11AI.26703 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	100.00
OREGON HEALTH & SCIENCE Receipt For: Primary General Other (specify)	PHYSICIAN Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. JUDY LEVISON Mailing Address 4607 PINE STREET		Date of Receipt 10 15 _2015 _
City BELLAIRE FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.26704 Amount of Each Receipt this Period 40.00	
Name of Employer BAYLOR COLLEGE OF MEDICINE Receipt For: Primary General	Occupation PHYSICIAN Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) ROBERT P. LORENZ	240.00	Date of Receipt
Mailing Address 3226 WELLINGTON COUL City WEST BLOOMFIELD	State Zip Code MI 48324	10 16 2015 Transaction ID : SA11AI.26863 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00
BEAUMONT HEALTH Receipt For: Primary General Other (specify)	PHYSICIAN Aggregate Year-to-Date ▼ 290.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	390.00
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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) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) A. JAY S. LUPIN		Date of Receipt
Mailing Address 12 CHURCH LANE SOUTI	H	10 25 2015
City	State Zip Code	Transaction ID : SA11AI.27141
SCARSDALE	NY 10583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
WESTMED GROUP	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) BERNARD LYNCH	<u> </u>	Date of Receipt
Mailing Address 507 SABINE STREET	10 14 2015	
City AUSTIN	State Zip Code TX 78701	Transaction ID : SA11AI.26616
_		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer AUSTIN REGIONAL CLINIC	Occupation	
	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) C. GLENN R. MARKENSON		Date of Receipt
Mailing Address 19 CHATHAM		10 09 2015
City LONGMEADOW	State Zip Code MA 01106	Transaction ID : SA11AI.26765
	1010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
BAYSTATE HEALTH	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	525.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	500.00
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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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAG	C)					
Full Name (Last, First, Middle Initial) A. ROGER W. MARSHALL		Date of Receipt					
Mailing Address 4501 QUAIL CREEK		10 30 2015					
City	State Zip Code	Transaction ID : SA11AI.27193					
GREAT BEND	KS 67530	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	1000.00					
Name of Employer	Occupation						
HEARTLAND OB/GYN	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	1000.00						
Full Name (Last, First, Middle Initial) CLAYTON H. MCCRACKEN		Date of Receipt					
Mailing Address P.O. BOX 35100		10 15 _ 2015 _					
City	ty State Zip Code						
BILLINGS	MT 59107	Transaction ID : SA11AI.26711 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	40.00					
Name of Employer	Occupation						
BILLINGS CLINIC	PHYSICIAN						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2540.00						
Full Name (Last, First, Middle Initial) AASTA MEHTA		Date of Receipt					
Mailing Address 1001 TOWAMENCIN AVENU	UE	10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : SA11AI.26642					
LANSDALE	PA 19446	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	210.00					
Name of Employer	Occupation						
LEHIGH VALLEY PHYSICIAN GROUP	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	2306.00						
SUBTOTAL of Receipts This Page (optional)	•	1250.00					
TOTAL This Period (last page this line number	r only)						

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or for commercial purposes, other than using	the name and address of any political committee					
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	4C)				
Full Name (Last, First, Middle Initial) M. KATHRYN MENARD Mailing Address 1006 WOOD SAGE DRIV	Date of Receipt					
	Mailing Address 1006 WOOD SAGE DRIVE					
City CHAPEL HILL	State Zip Code NC 27516	Transaction ID : SA11AI.26766 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer UNIVERSITY OF NORTH CAROLINA Receipt For:	Occupation PHYSICIAN					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00					
Full Name (Last, First, Middle Initial) KENNETH W. MERKITCH		Date of Receipt				
Mailing Address W5732 HEATHERWOOD	PLACE	10 27 _2015 _				
City LA CROSSE	State Zip Code WI 54601	Transaction ID : SA11AI.27358 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	100.00				
Name of Employer GUNDERSEN HEALTH SYSTEM	Occupation PHYSICIAN					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00					
Full Name (Last, First, Middle Initial) MARY ANN MILLAR		Date of Receipt				
Mailing Address 5171 POINTE EAST DRIV	/E	10 23 2015				
City JAMESVILLE	Transaction ID : SA11AI.27127 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	2500.00				
Name of Employer	-					
UPSTATE COMMUNITY MEDICAL						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00					
SUBTOTAL of Receipts This Page (optional)	<u> </u>	2675.00				
TOTAL This Period (last page this line number	per only)					

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or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committee to	o solicit contributions from such committee.			
	OF OB-GYNS PAC (OB-GYN PA	C)			
Full Name (Last, First, Middle Initial) MARY ANN MILLAR Mailing Address 5171 POINTE EAST DRIVE	Date of Receipt				
	10 31 2015				
City JAMESVILLE	State Zip Code NY 13078	Transaction ID : SA11AI.27239 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer UPSTATE COMMUNITY MEDICAL	Occupation PHYSICIAN				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00				
Full Name (Last, First, Middle Initial) B. EILEAN L. MYER		Date of Receipt			
Mailing Address 40 CRESTVIEW DRIVE		10 08 _2015 _			
City FLORENCE	State Zip Code MA 01062	Transaction ID : SA11AI.26802 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	75.00			
Name of Employer BAYSTATE MEDICAL CENTER	Occupation PHYSICIAN				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00				
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address 831 SOUTH BROADWAY		10 152015			
City MINOT	State Zip Code ND 58701	Transaction ID : SA11AI.26722 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	40.00			
Name of Employer	Occupation				
TRINITY HEALTH	PHYSICIAN				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u> </u>	1115.00			

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Full Name (Last, First, Middle Initial) GORDON J. OSTRUM		Date of Receipt
Mailing Address 1284 KING'S HIGHWAY	10 23 2015	
City	State Zip Code	Transaction ID : SA11AI.27097
PILESGROVE	NJ 08098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
WOMEN FIRST	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	475.00	
Full Name (Last, First, Middle Initial) GRETCHEN PARANYA	'	Date of Receipt
Mailing Address 212 PLEASANT HILL RC	AD	M = M / D = D / Y = Y = Y
City	State Zip Code	10 11 2015
SCARBOROUGH	ME 04074	Transaction ID : SA11Al.26790 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer SOUTHERN MAINE HEALTHCARE	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)		
HARTAJ K. POWELL	_	Date of Receipt
Mailing Address 4103 EDGEVALE COUR	Т	10 23 2015
CHEVY CHASE	State Zip Code MD 20815	Transaction ID : SA11AI.27098 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
CAPITAL WOMEN'S CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1325.00	

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Full Name (Last, First, Middle Initial) SARAH W. PRAGER	SS OF OB-GYNS PAC (OB-GYN PA	Date of Receipt
Mailing Address 1959 NORTHEAST PAG	CIFIC STREET	10 15 2015
City	State Zip Code	Transaction ID : SA11AI.26728
SEATTLE	WA 98195	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	_
UNIVERSITY OF WASHINGTON	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	415.00	
Full Name (Last, First, Middle Initial) HOLLY S. PURITZ	'	Date of Receipt
Mailing Address 7940 NORTH SHORE R	ROAD	M = M / D = D / Y = Y = Y
City	State Zip Code	10 07 2015
NORFOLK	VA 23505	Transaction ID : SA11AI.26498 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	209.00
Name of Employer	Occupation]
THE GROUP FOR WOMEN	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2498.00	
Full Name (Last, First, Middle Initial) LAURA B. RAMSEY	1	Date of Receipt
Mailing Address 839 BROOKBERRY FA	RM CIRCLE	10 23 2015
City	State Zip Code	Transaction ID : SA11AI.27099
WINSTON-SALEM	NC 27106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
NOVANT HEALTH	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General		
Other (specify)	500.00	

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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) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) PATRICK S. RAMSEY Mailing Address 1826 FAWN BLUFF		Date of Receipt
City SAN ANTONIO	State Zip Code TX 78248	10 03 2015 Transaction ID : SA11Al.26554 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer UNIVERSITY OF TEXAS	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	
Full Name (Last, First, Middle Initial) PATRICK S. RAMSEY Mailing Address 1826 FAWN BLUFF		Date of Receipt 10 14 2015
City SAN ANTONIO	State Zip Code TX 78248	Transaction ID : SA11AI.26622 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer UNIVERSITY OF TEXAS	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	
Full Name (Last, First, Middle Initial) VIRGINIA A. RAUTH		Date of Receipt
Mailing Address 1309 FOREST COVE COL		10 14 2015
City DICKINSON	State Zip Code TX 77539	Transaction ID : SA11AI.26623 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer UT MEDICAL BRANCH	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional)		590.00
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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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAG	C)
Full Name (Last, First, Middle Initial) A. STEVEN W. REMMENGA		Date of Receipt
Mailing Address 16995 PRINCETON ROAD		10 09 2015
City ADAMS	State Zip Code NE 68301	Transaction ID : SA11AI.26639
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 209.00
Name of Employer UNIVERSITY OF NEBRASKA Receipt For:	Occupation PHYSICIAN Aggregate Year to Date •	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2185.00	
Full Name (Last, First, Middle Initial) BRIAN J. RILEY Mailing Address 30 SUMMIT CREST DRIVE		Date of Receipt
City GLASTONBURY	State Zip Code CT 06073	10 09 2015
FEC ID number of contributing federal political committee.	C1 060/3	Amount of Each Receipt this Period 350.00
Name of Employer ST. FRANCIS HOSPITAL	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) . MARY L. ROSSER		Date of Receipt
Mailing Address 32 STUDIO LANE		10 23 2015
City BRONXVILLE	State Zip Code NY 10708	Transaction ID : SA11AI.27131 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer MONTEFIORE MEDICAL CENTER	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1515.00	
SUBTOTAL of Receipts This Page (optional)	•	1059.00
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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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial) A. HEATHER Z. SANKEY		Date of Receipt
Mailing Address 34 LONGFELLOW DRIVE		10 09 2015
City WEST SPRINGFIELD	State Zip Code MA 01089	Transaction ID : SA11AI.26772
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 400.00
Name of Employer BAYSTATE MEDICAL CENTER Receipt For: Primary General	Occupation PHYSICIAN Aggregate Year-to-Date ▼	
Other (specify)	1600.00	
Full Name (Last, First, Middle Initial) MICHAEL A. SBARRA Mailing Address 4 CONSTITUTION LANE		Date of Receipt 10 28 2015
City TOTOWA	State Zip Code NJ 07512	Transaction ID : SA11AI.27060 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer HACKENSACK UNIVERSITY MEDICAL	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) . ROBERT K. SILVERMAN		Date of Receipt
Mailing Address 2 THORNWOOD LANE		10 23 2015 _
City FAYETTEVILLE	State Zip Code NY 13066	Transaction ID : SA11AI.27132 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer UPSTATE MEDICAL UNIVERSITY	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
SUBTOTAL of Receipts This Page (optional)		1550.00
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NAME OF COMMITTEE (In Full)	o OF OB-GYNS PAC (OB-GYN PA	
Full Name (Last, First, Middle Initial) DONNA C. SINCLAIR Mailing Address 4046 PIROS AVENUS COU	TUMENT	Date of Receipt
Mailing Address 1046 RIDGE AVENUE SOU	IHWEST	10 23 2015
City	State Zip Code	Transaction ID : SA11AI.27303
ATLANTA	GA 30315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
SOUTHSIDE MEDICAL CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	290.00	
Full Name (Last, First, Middle Initial) PATRICIA A. SMITH		Date of Receipt
Mailing Address 738 FONTAINE STREET		M = M / D = D / Y = Y = Y
City	State Zip Code	10 09 2015
ALEXANDRIA	VA 22302	Transaction ID : SA11AI.26775 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lacif neceipt this Fellod
federal political committee.	C	200.00
Name of Employer	Occupation	
GWU MEDICAL FACULTY ASSOCIATES	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	990.00	
Full Name (Last, First, Middle Initial) DANA G. STONE	1	Date of Receipt
Mailing Address 1730 HUNTINGTON AVENU		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OKLAHOMA CITY	State Zip Code OK 73116	Transaction ID : SA11Al.26640 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	210.00
Name of Employer	Occupation	1
SELF-EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2100.00	
Other (specify)	2100.00	
SUBTOTAL of Receipts This Page (optional)		450.00
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TOTAL This Period (last page this line numbe	r only)	

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

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Full Name (Last, First, Middle Initial)	·	,
JOANNE L. STONE Mailing Address 19 EAST 88 STREET		Date of Receipt
City	Stata Zin Code	10 25 2015
NEW YORK	State Zip Code NY 10128	Transaction ID : SA11AI.27145
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
MT. SINAI HOSPITAL	PHYSICIAN	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) RABIYA SULEMAN	1	Date of Receipt
Mailing Address 11609 TOMAHAWK CRI	EEK PARKWAY	M = M / D = D / Y = Y = Y
City	State Zip Code	10 19 2015
LEAWOOD	KS 66211	Transaction ID : SA11AI.26960 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer HCA	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 540.00	
Full Name (Last, First, Middle Initial)	I	Date of Descirt
SCOTT A. SULLIVAN Mailing Address 3423 COLONEL VANDE	ERHORST CIRCLE	Date of Receipt
City	State Zip Code	10 30 2015 Transaction ID : SA11AI.27213
MT. PLEASANT	SC 29466	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
MEDICAL UNIVERSITY OF SC	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	715.00	
	ı	840.00

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 to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	C)		
Full Name (Last, First, Middle Initial) A. ERIC S. SURREY Mailing Address 10290 RIDGE GATE CIRC	LE	Date of Receipt		
City	State Zip Code	10 16 2015 Transaction ID : SA11AI.26870		
LONE TREE FEC ID number of contributing	CO 80124	Amount of Each Receipt this Period		
federal political committee.	C	40.00		
Name of Employer COLORADO CENTER	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 290.00			
Full Name (Last, First, Middle Initial) JANICE TILDON-BURTON Mailing Address 1700 TALLEY ROAD		Date of Receipt		
City WILMINGTON	Transaction ID : SA11AI.26635 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	209.00		
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2090.00			
Full Name (Last, First, Middle Initial) C. JANICE TILDON-BURTON		Date of Receipt		
Mailing Address 1700 TALLEY ROAD		10 09 2015		
City WILMINGTON	State Zip Code DE 19803	Transaction ID : SA11AI.26777 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	200.00		
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2290.00			
SUBTOTAL of Receipts This Page (optional)		449.00		
TOTAL This Period (last page this line numb	er 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 to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	S OF OB-GYNS PAC (OB-GYN PA	C)		
Full Name (Last, First, Middle Initial) JANICE TILDON-BURTON Mailing Address 1700 TALLEY ROAD		Date of Receipt		
City WILMINGTON FEC ID number of contributing	State Zip Code DE 19803	10 30 2015 Transaction ID : SA11AI.27214 Amount of Each Receipt this Period		
federal political committee. Name of Employer	Occupation	100.00		
SELF-EMPLOYED Receipt For: Primary General Other (specify) ▼	PHYSICIAN Aggregate Year-to-Date ▼ 2390.00			
Full Name (Last, First, Middle Initial) EUGENE C. TOY Mailing Address 1115 MARTIN STREET		Date of Receipt 10 02 2015		
City HOUSTON	State Zip Code TX 77018	Transaction ID : SA11Al.26586 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	325.00		
Name of Employer UNIVERSITY OF TEXAS HEALTH	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00			
Full Name (Last, First, Middle Initial) ERIN E. TRACY		Date of Receipt		
Mailing Address 5 HIGH STREET	Chata 7in Cada	10 23 2015		
City STONEHAM	State Zip Code MA 02180	Transaction ID : SA11AI.27109 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	208.33		
Name of Employer MASS GENERAL PHYSICIANS	Occupation PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 835.33			
SUBTOTAL of Receipts This Page (optional).		633.33		
TOTAL This Period (last page this line numb	er only)			

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

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	the name and address of any political committee		
THE AMERICAN CONGRES	S OF OB-GYNS PAC (OB-GYN PA	AC)	
Full Name (Last, First, Middle Initial) JENNIFER VILLAVICENCIO		Date of Receipt	
Mailing Address 131 EVERGREEN STREE		10 09 / 2015	
City PROVIDENCE	State Zip Code RI 02906	Transaction ID : SA11AI.26780	
FEC ID number of contributing federal political committee.	C 02906	Amount of Each Receipt this Period 225.00	
Name of Employer WOMEN & INFANTS HOSPITAL	Occupation PHYSICIAN		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		
Full Name (Last, First, Middle Initial) JENNIFER VILLAVICENCIO		Date of Receipt	
Mailing Address 131 EVERGREEN STREE	Т	10 21 _2015 _	
City PROVIDENCE	State Zip Code RI 02906	Transaction ID : SA11AI.26823 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	ů –		
Name of Employer WOMEN & INFANTS HOSPITAL	Occupation PHYSICIAN		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		
Full Name (Last, First, Middle Initial)	'	Date of Receipt	
Mailing Address 309 RUSTIN WAY		10 08 2015 _	
City WEXFORD	State Zip Code PA 15090	Transaction ID : SA11AI.26636 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	200.00	
Name of Employer	Occupation		
UNIVERSITY OF PITTSBURGH	PHYSICIAN		
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify)	250.00		
SUBTOTAL of Receipts This Page (optional)	·)	435.00	
TOTAL This Period (last page this line numb	per 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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial) JUDITH K. VOLKAR Mailing Address 309 RUSTIN WAY		Date of Receipt
City WEXFORD	State Zip Code PA 15090	10 16 2015 Transaction ID : SA11AI.26876 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer UNIVERSITY OF PITTSBURGH Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 290.00	
Full Name (Last, First, Middle Initial) JAMES WANG Mailing Address 77 TANNERY ROAD		Date of Receipt
City SOUTHWICK FEC ID number of contributing federal political committee.	State Zip Code MA 01072	10 09 2015 Transaction ID : SA11Al.26783 Amount of Each Receipt this Period 200.00
Name of Employer BAYSTATE HEALTH Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial) ELIZABETH D. WARNER Mailing Address 19 CHATHAM WOODS City PITTSFORD	State Zip Code NY 14534	Date of Receipt 10 23 2015 Transaction ID: SA11Al.27136 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer RETIRED Receipt For: Primary General Other (specify) ▼	Occupation PHYSICIAN Aggregate Year-to-Date ▼ 440.00	
SUBTOTAL of Receipts This Page (optional)	•	490.00
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 th	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAG	C)		
Full Name (Last, First, Middle Initial) A. MINAKO WATABE		Date of Receipt		
Mailing Address 448 COURT AVENUE	Address 448 COURT AVENUE			
City	State Zip Code	10 25 2015 Transaction ID : SA11AI.27326		
VENTURA	CA 93003	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	40.00		
Name of Employer	Occupation			
SANTA PAULA HOSPITAL CLINIC	PHYSICIAN			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	330.00			
Full Name (Last, First, Middle Initial) THOMAS WESTOVER		Date of Receipt		
Mailing Address 91 HARROWGATE DRIVE		10 09 2015		
CHERRY HILL	State Zip Code NJ 08003	Transaction ID : SA11AI.26785		
CHERRY HILL	NJ 08003	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	200.00		
Name of Employer	Occupation			
COOPER UNIVERSITY	PHYSICIAN			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00			
Full Name (Last, First, Middle Initial) . ROBERT M. WHEELER		Date of Receipt		
Mailing Address 1233 MARIGOLD LANE		10 09 2015		
City LONGVIEW	State Zip Code TX 75604	Transaction ID : SA11Al.26493		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00		
Name of Employer	Occupation			
DIAGNOSTIC CLINIC OF LONGVIEW	PHYSICIAN			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	240.00			
SUBTOTAL of Receipts This Page (optional)		340.00		
TOTAL This Period (last page this line number	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) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)
Full Name (Last, First, Middle Initial) A. ALLAN J. WHITE		Date of Receipt
Mailing Address 8701 MOUNTAIN TOP		10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.26564
SAN ANTONIO	TX 78255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
START CENTER CANCER CARE	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) B. EMILY M. WHITE		Date of Receipt
Mailing Address 55 FERNCREST AVENUE		10 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CRANSTON	State Zip Code	Transaction ID : SA11AI.26506
CRANSTON	RI 02905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer PROVIDENCE COMMUNITY HEALTH	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1525.00	
Full Name (Last, First, Middle Initial) C. ANNE M. WOODWARD		Date of Receipt
Mailing Address 10633 WYNSPIRE WAY		10 18 2015
City	State Zip Code	Transaction ID : SA11AI.26929
HIGHLANDS RANCH	CO 80130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
PROWERS MEDICAL GROUP	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	540.00	
SUBTOTAL of Receipts This Page (optional)	·····	640.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than usin	g the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRES	SS OF OB-GYNS PAC (OB-GYN PA	C)
Full Name (Last, First, Middle Initial) A. ELIZABETH WU Mailing Address 2504 SAMARITAN DRIV	Date of Receipt	
City SAN JOSE FEC ID number of contributing federal political committee. Name of Employer SAN JOSE WOMEN'S MEDICAL GROUP	State Zip Code CA 95124 C Occupation PHYSICIAN	10 15 2015 Transaction ID : SA11AI.26741 Amount of Each Receipt this Period 40.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	C Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (options	al)	40.00
TOTAL This Period (last page this line nur	nber only)	41667.43

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Distance Company Page	Any information copied from such Reports and Statements may not be sold or used by or for commercial purposes, other than using the name and address of any political cor NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYNS PAC (O	21b 22 23 24 25 26 29 30b any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee. YN PAC) Date of Disbursement 10 05 2015 Transaction ID: SB21B.26508 Amount of Each Disbursement this Period eggry/ype Date of Disbursement Date of Disbursement this Period
Detailed Summary Page 27 28a 27b 28c 20 300 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) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC) Full Name (Last, First, Middle Initial) A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1620 DODGE STREET City State Zp Code NE 68197 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Category/ Type Office Sought: House President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) B. SAGE PAYMENT SOLUTIONS Mailing Address 1750 OLD MEADOW ROAD City State Zp Code Category/ Type Office Sought: House President Other (specify) ▼ Transaction ID : SB218.28507 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Sanate President Other (specify) ▼ Full Name (Last, First, Middle Initial) CREDIT CARD TRANSACTION FEES Candidate Name Other (specify) ▼ Transaction ID : SB218.28507 Amount of Each Disbursement in Period Category/ Type Office Sought: House Disbursement For: Sanate President Other (specify) ▼ Transaction ID : SB218.28510 Transaction ID : SB218.28510 Amount of Each Disbursement Disbursement Eor: Sanate President Disbursement For: Sanate President Other (specify) ▼ SQUARE, INC. Mailing Address 901 MiSSION STREET City State Zp Code CA 94103 Purpose of Disbursement Eor: Senate Primary General Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate Primary General Disbursement For: Sen	Any information copied from such Reports and Statements may not be sold or used by or for commercial purposes, other than using the name and address of any political cor NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYNS PAC (O	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee. YN PAC) Date of Disbursement 10 05 2015 Transaction ID: SB21B.26508 Amount of Each Disbursement this Period egory/ype Date of Disbursement
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 pollical committee to solicit contributions from such committee. NAME OF COMMITTEE (in Ptul) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC) Full Name (Last, First, Middle Initial) A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1620 DODGE STREET City OMAHA NE 63197 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Category/ Office Sought: House Disbursement For: Sanate Primary General District: Pull Name (Last, First, Middle Initial) B. SAGE PAYMENT SOLUTIONS Mailing Address 1750 OLD MEADOW ROAD City State: District: President Primary General Disbursement For: Sanate Primary General Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Category/ Type Office Sought: House Disbursement For: Sanate Primary General District: District:	or for commercial purposes, other than using the name and address of any political cor NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-G') Full Name (Last, First, Middle Initial) A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1620 DODGE STREET City State Zip Code OMAHA Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. SAGE PAYMENT SOLUTIONS Mailing Address 1750 OLD MEADOW ROAD City State Zip Code VA 22102 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Office Sought: House Primary General Office Sought: President Other (specify) ▼ Senate President Other (specify) ▼ State: Full Name (Last, First, Middle Initial) C. SQUARE, INC. Mailing Address 901 MISSION STREET City State Zip Code SAN FRANCISCO CA 94103	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee. YN PAC) Date of Disbursement Transaction ID: SB21B.26508 Amount of Each Disbursement this Period egory/ ype Date of Disbursement
NAME OF COMMITTEE (in Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC) Full Name (Last, First, Middle Initial) A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1620 DODGE STREET City OMAHA Office Sough: House Senate President State: District: Full Name (Last, First, Middle Initial) B. SAGE PAYMENT SOLUTIONS Mailing Address 1750 OLD MEADOW ROAD City MCLEAN VA 22102 Transaction ID : SB21B.26508 Amount of Each Disbursement this Period Category/ 124.84 Transaction ID : SB21B.26508 Transaction ID : SB21B.26508 Amount of Each Disbursement this Period Category/ 124.84 Date of Disbursement this Period Category/ 10 02 2015 Transaction ID : SB21B.26507 Amount of Each Disbursement this Period Category/ 1122.98 Transaction ID : SB21B.26507 Transaction ID : SB21B.26507 Amount of Each Disbursement this Period Category/ 1122.98 Transaction ID : SB21B.26507 Transaction ID : SB21B.26507 Amount of Each Disbursement this Period Category/ 1122.98 Transaction ID : SB21B.26507 Transaction ID : SB21B.26508 Transaction ID : SB21B.26507 Transaction ID : SB21B.26508 Transaction ID : SB21B.26510	NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYNS PAC (OB-	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC) Full Name (Last, First, Middle Initial) A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1820 DODGE STREET City State Zip Code NE 68197 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Office Sought: House Senate President Other (specify) Mailing Address 1750 OLD MEADOW ROAD City MCLEAN TRANSACTION FEES Candidate Name Office Sought: House Disbursement For: Senate President CREDIT CARD TRANSACTION FEES Candidate Name Office Sought: House Disbursement For: Senate President Other (specify) Mailing Address 1750 OLD MEADOW ROAD City MCLEAN VA 22102 Full Name (Last, First, Middle Initial) S. SAGE PAYMENT SOLUTIONS Date of Disbursement Transaction ID : SB21B.26507 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Date of Disbursement Transaction ID : SB21B.26507 Transaction ID : SB21B.26510 Amount of Each Disbursement Transaction ID : SB21B.26510	THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYNS PAC (OB-GY	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1620 DODGE STREET City State Zip Code NE 68197 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Category' Type Date of Disbursement Category' Type 124.84 Disbursement For: Sanate Primary General Other (specify) ▼ State Zip Code Amount of Each Disbursement this Period Category' Type 124.84 Date of Disbursement Transaction ID: SB21B.26508 Amount of Each Disbursement this Period Category' Type 124.84 Date of Disbursement this Period Category' Type Transaction ID: SB21B.26508 Amount of Each Disbursement Category' Type Category' Type Category' Transaction ID: SB21B.26507 Amount of Each Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Category' Type Category' Type Category' Type Date of Disbursement this Period Category' Type Category' Type Category' Type Category' Transaction ID: SB21B.26507 Amount of Each Disbursement this Period Category' Type Category' Type Category' Transaction ID: SB21B.26507 Amount of Each Disbursement this Period Category' Type Category' Type Category' Transaction ID: SB21B.26510 Amount of Each Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Category' Type Category' Type Category' Transaction ID: SB21B.26510 Amount of Each Disbursement this Period Category' Type Category' Typ	Full Name (Last, First, Middle Initial) A. FIRST NATIONAL MERCHANT SOLUTIONS Mailing Address 1620 DODGE STREET City State Zip Code OMAHA NE 68197 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. SAGE PAYMENT SOLUTIONS Mailing Address 1750 OLD MEADOW ROAD City State Zip Code VA 22102 Purpose of Disbursement CREDIT CARD TRANSACTION FEES Candidate Name Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General Office Sought: Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. SQUARE, INC. Mailing Address 901 MISSION STREET City State Zip Code SAN FRANCISCO CA 94103	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 54 OF 56							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	′								
	Detailed Summary Page	27	22 X 23 24 28a 28b 28								
Any information copied from such Reports and Statem	ents may not be sold or use	ed by any perso		ting contributions							
or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
$ \hspace{.05cm} \rangle$ THE AMERICAN CONGRESS OF	OB-GYNS PAC (OF	B-GYN PAG	C)								
Full Name (Last, First, Middle Initial)											
A. DUTCH RUPPERSBERGER FOR	CONGRESS		Date of Disbursement								
Mailing Address P.O. BOX 231			10 13	2015							
Maining 71881888 1 .O. BOX 251			10 10	2010							
•	tate Zip Code		Transaction ID : SB23	.26529							
LUTHERVILLE Purpose of Disbursement	MD 21094										
CONTRIBUTION			Amount of Each Disburs	sement this Period							
Candidate Name		Category/		1000.00							
C.A. DUTCH RUPPERSBERGER		Type		1000.00							
	ent For: 2016 Primary General										
	Other (specify)										
State: MD District: 02											
Full Name (Last, First, Middle Initial)											
B. FRIENDS OF PAT TOOMEY			Date of Disbursement								
Mailing Address 228 SOUTH WASHINGTON STRE			M M / D D /	2015							
•	tate Zip Code VA 22314		Transaction ID : SB23	.26532							
Purpose of Disbursement	VA 22314										
CONTRIBUTION		Amount of Each Disbursement this									
Candidate Name		Category/	1500.00								
PATRICK J. TOOMEY Office Sought: House Disbursem	ent For: 2016	Туре	, , , ,								
	Primary General										
	Other (specify) ▼										
State: PA District: 00											
Full Name (Last, First, Middle Initial)			Date of Disbursement								
C. GRAHAM FOR CONGRESS			M M / D D /	Y							
Mailing Address P.O. BOX 310			10 13	2015							
Cit.	tota Zin Codo										
•	tate Zip Code FL 32302		Transaction ID : SB23	.26527							
Purpose of Disbursement CONTRIBUTION											
Candidate Name		Amount of Each Disburs	sement this Period								
GWEN GRAHAM		Category/ Type		1500.00							
	ent For: 2016	Турс									
	Primary General										
	Other (specify) ▼										
State: FL District: 02											
SUBTOTAL of Disbursements This Page (optional)				4000.00							
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TOTAL This Period (last page this line number only).											

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ΙA	ny information copied from such Reports and Staten	nents may i	not be sold or us	ed by	any i	person	for the	purp	ose o	f solicit	ing co	ntribu	ıtions	<u> </u>			
	for commercial purposes, other than using the nam																
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$ \rangle$	THE AMERICAN CONGRESS OF	OB-GY	NS PAC (O	B-GY	/N I	PAC)										
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٨	Full Name (Last, First, Middle Initial)						Doto -	f Die	huras:	mon*							
A.	GRAHAM FOR CONGRESS						Date o			_							
	Mailing Address P.O. BOX 310					$\overline{}$	10	/	13			015	Y				
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	City	State	Zip Code	Transaction ID : SB23,26528													
	TALLAHASSEE	FL	32302														
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	Full Name (Last, First, Middle Initial)																
В.	NATIONAL REPUBLICAN CONGR	RESSIO	NAL COMM	1ITTE	ĒΕ		Date o	f Dis	burser	ment							
							M - M	/	D	D /		Y	Υ				
	Mailing Address 320 1ST STREET, SE						10 26 2015										
	City.	State Zin Code															
	City S WASHINGTON	State DC	Zip Code 20003				Trans	sacti	on ID	: SB23.	26593	3					
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		Primary	General														
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_	Full Name (Last, First, Middle Initial)						Date o	f Die	hurea	ment							
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	City	State	Zip Code				Trans	sacti	on ID	: SB23.	26535	5					
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	Purpose of Disbursement CONTRIBUTION			Ε.	-	7							_				
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Form/Schedule: SB23

Transaction ID: SB23.26593

BUILDING FUND

Form/Schedule: Transaction ID: