PAGE 1 / 30

Image# 12972551756

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	Office Use Only					
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5			
American Academy of	f Neurology BrainPAC					
ADDRESS (number and street)	509b 2nd St NE					
Check if different	Lower Level					
than previously reported. (ACC)	Washington		DC 20002			
2. FEC IDENTIFICATION N	UMBER ▼ CITY	(▲	STATE ▲ ZIP CODE ▲			
C C00435933	3. IS	THIS X NEW (N) OR	AMENDED (A)			
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb :	20 (M2) May 20 (M5)) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)			
(a) Quarterly Reports:		20 (M3) Jun 20 (M6)	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)			
April 15		20 (M4) Jul 20 (M7)	X Oct 20 (M10) Jan 31 (YE)			
Quarterly Report (PRF-Flection	Primary (12P)	General (12G) Runoff (12R)			
Quarterly Report (October 15	Report for the:	Convention (12C)	Special (12S)			
Quarterly Report (Flastics	M M / D D /	in the State of			
Year-End Report ((d) 30-Day		State of			
Report (Non-election Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)			
Termination Report (TER)	t Election	on M=M / D=D /	in the State of			
5. Covering Period 0		through 09	30 / 2012			
I certify that I have examined t	his Report and to the best of i	my knowledge and belief it is to	rue, correct and complete.			
Type or Print Name of Treasure	er Mr. Timothy J. Engel					
Signature of Treasurer Mr.	Timothy J. Engel	[Electronically Filed]	Date 10 15 / 2012			
NOTE: Submission of false, error	neous, or incomplete information	may subject the person signing	this Report to the penalties of 2 U.S.C. §437g.			
Office Use			FEC FORM 3X Rev. 12/2004			

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS							
FEC Form 3X (Rev. 02/2003)		Page 2					
rite or Type Committee Name							
American Academy of Neurology	BrainPAC						

09 2012 09 30 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 155948.02 January 1, 2012 (b) Cash on Hand at 63982.02 Beginning of Reporting Period..... 207082.21 29374.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 93356.02 363030.23 6(a) and 6(c) for Column B)..... 32000.00 301674.21 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 61356.02 61356.02 (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

American Academy of Neurology BrainPAC

tributions (other than loans) From: Individuals/Persons Other		Calendar Year-to-Date
Individuals/Porsons Other		
Than Political Committees	17914 00	144004.00
(i) Itemized (use Schedule A)	17914.00	7
(ii) Unitemized	6460.00	50654.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	24374.00	194658.00
Political Party Committees	0.00	0.00
	0.00	0.00
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	24374.00	194658.00
sfers From Affiliated/Other		
y Committees	0.00	0.00
oans Received	0.00	0.00
	0.00	0.00
1 1	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	7	7
	5000.00	8900.00
	7	
idends, Interest, etc.)	0.00	3524.21
sfers from Non-Federal and Levin Funds		
Non-Federal Account		
(from Schedule H3)	0.00	0.00
puis Funda (fram Cabadula UE)	0.00	0.00
Levin Funds (from Schedule H5)	0.00	0.00
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(iii) Unitemized	(ii) Unitemized

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period			
21. Ope (a)	erating Expenditures: Allocated Federal/Non-Federal		Calendar Year-to-Date		
(4)	Activity (from Schedule H4)				
	(i) Federal Share	0.00	0.00		
	(ii) Non-Federal Share	0.00	0.00		
(b)	Other Federal Operating				
	Expenditures	0.00	0.00		
(c)	Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
Trai	nsfers to Affiliated/Other Party				
	nmittees	0.00	0.00		
Fed	ntributions to leral Candidates/Committees Other Political Committees	32000.00	297150.00		
	ependent Expenditures	0.00	0.00		
	e Schedule E) ordinated Party Expenditures	0.00	0.00		
(2 l (use	J.S.C. §441a(d)) e Schedule F)	0.00	0.00		
Loa	n Repayments Made	0.00	0.00		
Loa	ns Madeuns Madeuns Made	0.00	0.00		
	Individuals/Persons Other Than Political Committees	0.00	1000.00		
(b)	Political Party Committees	0.00	0.00		
(c)	Other Political Committees (such as PACs)	0.00	0.00		
	,				
(d)	Total Contribution Refunds	0.00			
	(add Lines 28(a), (b), and (c))▶	0.00	1000.00		
Oth	er Disbursements	0.00	3524.21		
Fed	leral Election Activity (2 U.S.C. §431(20))				
	Allocated Federal Election Activity				
	(from Schedule H6)				
	(i) Federal Share	0.00	0.00		
	(ii) "Levin" Share	0.00	0.00		
(b)	Federal Election Activity Paid Entirely				
(-\ <u>`</u>	With Federal Funds	0.00	0.00		
(c)	Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Tota	al Disbursements (add Lines 21(c), 22,				
	24, 25, 26, 27, 28(d), 29 and 30(c))	32000.00	301674.21		
	al Federal Disbursements				
	otract Line 21(a)(ii) and Line 30(a)(ii)	22222.22	204674.04		
iron	n Line 31)	32000.00	301674.21		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	24374.00	194658.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	1000.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24374.00	193658.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00		

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

	FOR LINE NUMBER:				PAGE		6	OF		30	
((check only one)										
	X	11a		11b		11c		12	!		
		13		14		15		16	;		17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Academy of Neurolog	gy BrainPAC	
Full Name (Last, First, Middle Initial) A. Dr. Drasko Simovic		Date of Receipt
Mailing Address 50 Prospect St Rm 404		09 05 2012
City	State Zip Code	Transaction ID : 35198902
Lawrence	MA 01841-2838	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Dr. Joseph Jankovic		Date of Receipt
Mailing Address 6550 Fannin St Ste 1801		M = M / D = D / Y = Y = Y
Department of Neurology	01-11-	09 05 2012
City	State Zip Code	Transaction ID : 35198908
Houston	TX 77030-2744	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Baylor College Of Medicine	Neurologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Edward F. Good		Date of Receipt
Mailing Address 3229 Preston Hollow Rd		09 05 _ 2012 _
City	State Zip Code	Transaction ID: 35203431
Fort Worth	TX 76109-2052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	1750.00
TOTAL This Period (last page this line number	only)	

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

30

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Azreena B. Thomas Date of Receipt Mailing Address 7711 Louis Pasteur Dr Ste 914 2012 06 City Zip Code State Transaction ID: 35203521 TX 78229-3424 San Antonio Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Donald S. Gervais Jr. Date of Receipt Mailing Address 8120 Main St Ste 400 09 07 2012 City State Zip Code Transaction ID: 35206493 LA Houma 70360-3403 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation Southeast Neuroscience Center of Excel Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Nilay R. Shah Date of Receipt Mailing Address 160 W. 66th St Apt. 22J 2012 09 07 City Zip Code State Transaction ID: 35207725 NY New York 10023 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 8 OF 30 Use for ea Detail

	I OIT LINE	NONDELL.	ITAGE						
separate schedule(s)	(check only one)								
ach category of the led Summary Page	X 11a	11b	11c	12					
.ou ouninary rago	13	14	15	16	17				

Full Name (Last, First, Middle Initial) Dr. Judy S. Fine-Edelstein Mailing Address 27 Saddle Club Road City State Zip Code Lexington MA 02420-2121 FEC ID number of contributing federal political committee. Name of Employer Self Neurologist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Mariecken V. Fowler Mailing Address 309 Courtfield Ave Winchester Neurological Consul City State Zip Code Winchester VA 22601-3203 FEC ID number of contributing federal political committee. Name of Employer Winchester Neurological Consultants Occupation Neurologist	
Mailing Address 309 Courtfield Ave Winchester Neurological Consul City State Zip Code Winchester VA 22601-3203 FEC ID number of contributing federal political committee. Name of Employer Winchester Neurological Consultants Occupation Neurologist	Date of Receipt 09 10 2012 Transaction ID: 35222160 Amount of Each Receipt this Period 250.00
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D / 2012 Transaction ID: 35267700 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. Bruce H. Cohen Mailing Address 3141 Neille Lane City State Zip Code OH 44087 FEC ID number of contributing federal political committee. Name of Employer Children's Hospital and Med. Center of Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1600.00	Date of Receipt 17 2012 Transaction ID: 35278960 Amount of Each Receipt this Period 150.00
SUBTOTAL of Receipts This Page (optional)	1400.00

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

30

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Glen R. Finney Date of Receipt Mailing Address 9235 NW 26th Avenue 2012 City State Zip Code Transaction ID: 35278962 FL Gainesville 32606-9180 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation Univ. of FL Dept. of Neurology Behavioral Neurology Receipt For: Aggregate Year-to-Date ▼ Primary General 756.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. William S. Gilmer Date of Receipt Mailing Address 2323 Dunstan Rd 09 17 2012 City State Zip Code Transaction ID: 35278968 TX Houston 77005-2613 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Ralph F. Jozefowicz Date of Receipt Mailing Address 78 Lac Kine Drive 2012 09 17 City Zip Code State Transaction ID: 35278970 NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation University of Rochester Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 419.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

30

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Joseph S. Kass Date of Receipt Mailing Address One Baylor Plaza NB-302 2012 City State Zip Code Transaction ID: 35278972 TX Houston 77030 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Baylor College of Medicine** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Steven L. Lewis Date of Receipt Mailing Address 1725 W Harrison St Ste 1106 09 2012 17 City State Zip Code Transaction ID: 35278974 IL Chicago 60612-3845 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Rush Univ. Med. Ctr. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Nancy L. Mueller Date of Receipt Mailing Address 610 E Palisade Ave 2012 09 17 State Zip Code Transaction ID: 35278978 NJ **Englewood Cliffs** 07632-1801 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

-(FOR LINE NUMBER:			PAGE	-	П	OF		30		
(check only one)											
[X	11a		11b		11c		12			
		13		14		15		16	;		17

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Academy of Neurol	iogy BrainPAC	
Full Name (Last, First, Middle Initial) A. Dr. Daniel C. Potts		Date of Receipt
Mailing Address 136 Covey Chase		09 17 2012
City	State Zip Code	Transaction ID : 35279268
Tuscaloosa	AL 35406-1801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
AL Neurology and Sleep Medicine, P.C.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial) Dr. Awais Riaz		Date of Receipt
Mailing Address 4454-A Kelmscott Lane		09 17 2012
City	State Zip Code	Transaction ID : 35279769
Salt Lake City	UT 84124-2580	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		250.00
Name of Employer	Occupation	7
Univ. of Utah	Neurologist]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Dr. Dariush Saghafi		Date of Receipt
Mailing Address 2741 Belgrave Rd		M = M / D = D / Y = Y = Y
City	State Zip Code	09 17 2012
Pepper Pike	OH 44124-4601	Transaction ID : 35280184 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Parma Neurology	Neurologist	4
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	700.00	
Other (specify) ▼	700.00	
SUBTOTAL of Receipts This Page (ontional))	450.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 12 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Jeremy M. Shefner Date of Receipt Mailing Address 7994 Everglades Dr 2012 City Zip Code State Transaction ID: 35281144 NY Manlius 13104-8501 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation SUNY Upstate Medical University Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Alan G. Stein Date of Receipt Mailing Address 1301 Punchbowl St 09 2012 17 City State Zip Code Transaction ID: 35281276 HI Honolulu 96813-2402 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation The Queen's Medical Center Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Dario M. Zagar Date of Receipt Mailing Address 127 Brookview Ave 2012 09 17 City State Zip Code Transaction ID: 35281280 CT Fairfield 06825-1867 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Associated Neurologists of So. Ct. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 425.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 13 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. M Barry Louden Jr. Date of Receipt Mailing Address PO Box 4179 20 2012 City Zip Code State Transaction ID: 35300929 WV Parkersburg 26104-4179 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Parkersburg Neurological Associates, I Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Terri Andrea Edwards-Lee Date of Receipt Mailing Address 773 Edmondson Pike 09 2012 21 City State Zip Code Transaction ID: 35301059 TN **Brentwood** 37027-8206 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Neurology Specialists of Middle TN Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Jorge T. Gonzalez Date of Receipt Mailing Address 1280 Dow Dr 2012 09 26 City Zip Code State Transaction ID: 35313269 MI Alpena 49707 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

30

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Larry Charleston IV Date of Receipt Mailing Address 5841 West River Dr NE 2012 28 City State Zip Code Transaction ID: 35318702 49306-8806 Belmont MI Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Spectrum Health Medical Group Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Gregory L. Barkley Date of Receipt Mailing Address 2890 Burlington St 09 28 2012 City State Zip Code Transaction ID: 35318845 MI Ann Arbor 48105-1435 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Henry Ford Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Maureen A. Callaghan Date of Receipt Mailing Address PO Box 6059 2012 09 28 1617 Sylvester St SW City Zip Code State Transaction ID: 35318850 WA Olympia 98501-2228 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Madigan Army Medical Center / Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Madeleine Geraghty Date of Receipt Mailing Address 1803 E Westminster Ln 2012 City Zip Code State Transaction ID: 35318854 WA Spokane 99223-8406 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Providence Stroke and TIA Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Todd J. Janus Date of Receipt Mailing Address 4008 Muskogee Avenue 09 2012 28 City State Zip Code Transaction ID: 35318856 IΑ Des Moines 50312-4627 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Iowa Health Physicians Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Edgar J. Kenton III Date of Receipt Mailing Address 2 Clearview Dr 2012 09 28 City State Zip Code Transaction ID: 35318861 PΑ Danville 17821 Amount of Each Receipt this Period FEC ID number of contributing 750.00 С federal political committee. Name of Employer Occupation Geisinger Health system Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) 950.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOF	R LINE	NU	IMBER	PAGE	1	16 OI	F	30	
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

	statements may not be sold or used by any persename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Neurolog	gy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Brett M. Kissela Mailing Address 9979 7ig 7eg Bood		Date of Receipt
Mailing Address 9878 Zig Zag Road		09 28 2012
City	State Zip Code	Transaction ID : 35318864
Cincinnati	OH 45252	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Univ of Cincinnati, Dept of Neuro	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) Dr. Jerome Lisk		Date of Receipt
Mailing Address 65 N Madison Ave Ste 410	7. 0	09 28 2012
City	State Zip Code CA 91101-2049	Transaction ID : 35318867
Pasadena	CA 91101-2049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Southern California Mvmnt Dis	Neurologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	700.00	
Full Name (Last, First, Middle Initial) C. Dr. Constantine Moschonas		Date of Receipt
Mailing Address 8113 E Del Cuarzo Dr		09 28 2012
City Scottsdale	State Zip Code AZ 85258-2254	Transaction ID : 35318873 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	
Four Peaks Neurology	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2250.00	
SUBTOTAL of Receipts This Page (optional)	>	1100.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 17 OF 30 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Gregory T. Pupillo Date of Receipt Mailing Address 225 9th Street S, 2012 28 City Zip Code State Transaction ID: 35318876 WI La Crosse 54601-4145 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation Franciscan-Skemp Healthcare Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 405.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Bruce Sigsbee Date of Receipt Mailing Address 1199 Sennebec Rd 09 2012 28 City State Zip Code Transaction ID: 35318878 ME Union 04862-4628 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Penobscot Bay Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Sarah Song Date of Receipt Mailing Address 2045 W. Concord Place, #405 2012 09 28 City State Zip Code Transaction ID: 35318880 IL Chicago 60647 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Georgetown University Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 195.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 18 OF 30 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Bradford Lynn Talcott Date of Receipt Mailing Address 5636 Veil Dr 2012 28 City Zip Code State Transaction ID: 35318883 ID Ammon 83406-8387 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Carolyn L. Taylor Date of Receipt Mailing Address 11 Bellwether Way Suite 210 09 28 2012 City State Zip Code Transaction ID: 35318885 WA Bellingham 98229-2574 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Northwest Neurology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. William G. Preston Date of Receipt Mailing Address 232 Emerald Bay 2012 09 28 Zip Code State Transaction ID: 35318915 CA Laguna Beach 92651-1267 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Saddleback Valley Neurosci. Med. Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 1225.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

30

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. John Y. Choi Date of Receipt Mailing Address 125 Medical Cir Ste A 2012 City Zip Code State Transaction ID: 35318917 VA Winchester 22601-3322 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Winchester Neurological Consultants Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Vernon D. Rowe Date of Receipt Mailing Address 8550 Marshall Dr Ste 100 09 29 2012 City State Zip Code Transaction ID: 35319984 KS Lenexa 66214-9836 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Rowe Neurology Institute Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General This contribution was refunded on 10/9/2012 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... 17914.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 20 OF 30 (check only one) 11a 11b 11c 12 13 14 15 X 16 17
Any information copied from such Reports and Stator for commercial purposes, other than using the n	ements may not be ame and address of	e sold or used by any portany political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Neurology	BrainPAC		
Full Name (Last, First, Middle Initial) Russ Carnahan In Congress Committee Mailing Address PO Box 190033 City St Louis FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2012 Primary Ceneral			Date of Receipt 09 06 2012 Transaction ID: 35205545 Amount of Each Receipt this Period 5000.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing		5000.00 Code	Date of Receipt M.M. / D.D. / Y.Y.Y.Y.Y. Amount of Each Receipt this Period
federal political committee. Name of Employer	Occupation Aggregate Year-to-	Date ▼	
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip C Occupation Aggregate Year-to-	Code Date ▼	Date of Receipt Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		······••••••••••••••••••••••••••••••••	5000.00

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

5000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 OF 30				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 28a 28b 28c 29	26 30k		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) American Academy of Neurology	BrainPAC					
Full Name (Last, First, Middle Initial)			D . (D)			
A. Friends Of Bernie Sanders			Date of Disbursement	V		
Mailing Address PO Box 391			09 07 2012			
City	State Zip Code		Transaction ID : 35212089			
Burlington Purpose of Disbursement	VT 05402					
Void - Friends Of Bernie Sanders		011	Amount of Each Disbursement this	Period		
Candidate Name		Category/	100	00.00		
Sen. Bernie Sanders		Type	-100	00.00		
Senate President	ment For: 2012 Primary		Void - Friends Of Bernie Sanders			
State: VT District:						
B. Friends Of Bernie Sanders			Date of Disbursement	V		
Mailing Address PO Box 391			09 10 2012			
City Burlington Purpose of Disbursement	State Zip Code VT 05402		Transaction ID: 35220167			
Campaign Contribution		011	Amount of Each Disbursement this	Period		
Candidate Name		Category/	10	00.00		
Sen. Bernie Sanders Office Sought: House Disburse	ment Fee: 0040	Туре		30.00		
Office Sought: House Senate President State: VT District:	ment For: 2012 Primary		Campaign Contribution			
Full Name (Last, First, Middle Initial) C. Latta For Congress			Date of Disbursement			
Mailing Address PO Box 106			09 10 / 2012	Y		
City Bowling Green	State Zip Code OH 43402		Transaction ID : 35220712			
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this	s Period		
Candidate Name		Category/	100	00.00		
Rep. Robert Latta Office Sought: House Disburse	ment For: 2012	Туре	7			
Senate President	Primary ☐ General Other (specify) ▼		Campaign Contribution			
State: OH District: 05						
SUBTOTAL of Disbursements This Page (optional).		<u> </u>	100	00.00		
TOTAL This Period (last page this line number only)	·····•				

SCHEDULE B (FEC Form 3X)		NUMBER: PAGE 22 OF 30	
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🔀 23 🔲 24 📗 25 🖂 26
	Botanoa oanniary r ago	27	28a 28b 28c 29 30b
Any information copied from such Reports and State			
or for commercial purposes, other than using the na	me and address of any politic	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Academy of Neurology I	BrainPAC		
/ Full Name (Last, First, Middle Initial)			
_			Date of Disbursement
A. Scalise For Congress			M M / D D / Y Y Y Y
Mailing Address PO Box 23219			09 10 2012
City	State Zip Code		Transaction ID : 35220713
Jefferson Chickenson C	LA 70183		Transaction is . SOLLOT TO
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Disbursement this Penou
Rep. Steve Scalise		Category/ Type	1000.00
	ment For: 2012	Турс	, , , , , , , , , , , , , , , , , , , ,
Senate	Primary X General		Campaign Contribution
President	Other (specify)		Campaig. Commonic
State: LA District: 01			
Full Name (Last, First, Middle Initial)			
B. Ellison For Congress			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO Box 6072			09 10 2012
City	State Zip Code		
Minneapolis	MN 55406		Transaction ID: 35220714
Purpose of Disbursement			
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Keith Ellison		Туре	1000.00
	ment For: 2012		
Senate President	Primary General		Campaign Contribution
State: MN District: 05	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Doyle For Congress Committee			Date of Disbursement
Boyle For Congress Committee			M M / D D / Y Y Y Y
Mailing Address 205 Hawthorne Court			09 10 2012
City	State Zip Code		Transaction ID: 35220716
Pittsburgh Purpose of Disbursement	PA 15221		
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Disbursement this Penou
Rep. Michael F. Doyle		Category/ Type	1000.00
•	ment For: 2012		
Senate	Primary		Campaign Contribution
President	Other (specify) ▼		
State: PA District: 14			
			3000.00
SUBTOTAL of Disbursements This Page (optional).		·····•	3000.00
TOTAL This Period (last page this line number only)		
TOTAL THIS FEHOO DASE DADE THE HITCHE THINDS THE			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE		PAGE 23 OF 30
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21h	one) 22	24 25 26 28c 29 36
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	ie and address of any poil	lical committee to	Solicit Contributions in	om such committee.
American Academy of Neurology B	BrainPAC			
Full Name (Last, First, Middle Initial)			Date of Disbursem	ant
L. Castor For Congress			Date of Disbursem	ent
Mailing Address 301 W Platt Street, #385			09 10	2012
,	State Zip Code		Transaction ID :	35220717
Tampa Purpose of Disbursement	FL 33606		Transaction ib .	33220111
Campaign Contribution		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		1000.00
Rep. Katherine Castor		Type		1000.00
Senate President	nent For: 2012 Primary		Campaign Contribut	tion
State: FL District: 11				
Full Name (Last, First, Middle Initial)			D . (D)	
Friends For Jim Mcdermott			Date of Disbursem	
Mailing Address PO Box 21786				2012
•	State Zip Code WA 98111		Transaction ID :	35220719
Purpose of Disbursement Campaign Contribution		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		4000.00
Rep. Jim McDermott		Type		1000.00
Senate	nent For: 2012 Primary		Campaign Contribu	tion
Full Name (Last, First, Middle Initial) Gingrey For Congress, Inc.			Date of Disbursem	ent
			M M / D D	/ Y = Y = Y = Y
Mailing Address PO Box U			09 10	2012
Marietta	State Zip Code GA 30060		Transaction ID :	35220720
Purpose of Disbursement Campaign Contribution		011	Amount of Each D	isbursement this Period
Candidate Name		Category/		
Rep. Phil Gingrey M.D.		Type		500.00
Senate	nent For: 2012 Primary		Campaign Contribut	iion
				2522.22
SUBTOTAL of Disbursements This Page (optional)		·····•		2500.00
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	FOR LINE	FOR LINE NUMBER: PAGE 24 OF 30				
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER:			
	for each category of the Detailed Summary Page	21b	22 🔀 23 🔲 24 📗 25 🔲 26			
	ago	27	28a 28b 28c 29 30b			
Any information copied from such Reports and						
or for commercial purposes, other than using	the name and address of any politic	cal committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	D : D40					
American Academy of Neurol	ogy BrainPAC					
Full Name (Last, First, Middle Initial)						
A. Continuing a Majority PAC						
			M M / D D / Y Y Y Y			
Mailing Address 2501 Wisconsin Ave. NW #304			09 10 2012			
City	State Zip Code					
Washington	DC 20007		Transaction ID: 35220723			
Purpose of Disbursement						
Leadership PAC Contribution		011	Amount of Each Disbursement this Period			
Candidate Name		Category/	2500.00			
Office Sought: House Di	sbursement For:	Type	7			
Senate	Primary General		Leadership PAC Contribution			
President	Other (specify) ▼		Education Printe Continuation			
State: District:						
Full Name (Last, First, Middle Initial)						
B. Mike Thompson For Congress	5		Date of Disbursement			
Mailing Address 5429 Madison Avenue			09 10 2012			
Mailing Address 5429 Madison Avenue			09 10 2012			
City	State Zip Code		Transaction ID : 35220727			
Sacramento	CA 95841		Transaction ib . 33220727			
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period			
Candidate Name			500.00			
Rep. Mike Thompson		Category/ Type				
	sbursement For: 2012					
Senate	Primary General		Campaign Contribution			
President	Other (specify)					
State: CA District: 01						
Full Name (Last, First, Middle Initial)	Committee		Date of Disbursement			
C. The Congressman Joe Bartor	Committee					
Mailing Address P.O. Box 1444			09 11 2012			
City	State Zip Code		Transaction ID: 35222708			
Ennis Purpose of Disbursement	TX 75120					
Campaign Contribution		011	Amount of Each Disbursement this Period			
Candidate Name		Category/				
Rep. Joe L. Barton		Туре	1000.00			
	sbursement For: 2012					
Senate	Primary General		Campaign Contribution			
State: TX District: 06	Other (specify) ▼					
Jaco. 17. Biotion 00						
SUBTOTAL of Disbursements This Page (opt	ional)		4000.00			
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	,					
TOTAL This Period (last page this line number	er only)					

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 25 OF 30
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orliny	,	7
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	monto mou not be cold or us			
or for commercial purposes, other than using the nati				
NAME OF COMMITTEE (In Full)				
American Academy of Neurology I	BrainPAC			
Full Name (Last, First, Middle Initial)			Date of Disburseme	.nt
A. Citizens For Harkin				
Mailing Address P O Box 811			09 12	2012
City	State Zip Code		Transaction ID: 3	5237859
Des Moines Purpose of Disbursement	IA 50304			
Campaign Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		
Sen. Tom Harkin		Type		1000.00
	ment For: 2014			
Senate	Primary General		Campaign Contribution	on
State: IA District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Friends Of Joe Heck			Date of Disburseme	nt
			M M / D D	/ Y Y Y Y Y
Mailing Address PO Box 750114			09 13	2012
City	State Zip Code			
Las Vegas	NV 89136		Transaction ID: 3	5244048
Purpose of Disbursement				
Campaign Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2500.00
Rep. Joseph J. Heck Office Sought: House Disburse	ment For: 2012	Туре		
Senate	Primary Seneral		Campaign Contribution	on
President	Other (specify) ▼		Campaign Commodis	011
State: NV District: 03				
Full Name (Last, First, Middle Initial)			5	
C. Blumenthal For Connecticut			Date of Disburseme	
Mailing Address C/O Cacace Tusch & Santagata			09 17	2012
777 Summer St Suite 103				
City	State Zip Code		Transaction ID: 3	5278850
Stamford Purpose of Disbursement	CT 06901			
Campaign Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/	Amount of Each Dis	
Sen. Richard Blumenthal		Type		1000.00
	ment For: 2016			
Senate President	Primary General		Campaign Contribution	on
State: CT District:	Other (specify) ▼			
<u> </u>				
SUBTOTAL of Disbursements This Page (optional).				4500.00
<u> </u>				
TOTAL This Period (last page this line number only)		1	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 26 OF 30			
ITEMIZED DISBURSEMENTS	(onlook only	ly one)				
	for each category of the Detailed Summary Page	21b		4 25 26 8c 29 30b		
Any information copied from such Reports and State	aments may not be sold or us					
or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
American Academy of Neurology	BrainPAC					
Full Name (Last, First, Middle Initial)	· · · · · ·					
A. Michael Burgess For Congress			Date of Disbursement			
Mailing Address PO Box 2334			09 17	2012		
City	State Zip Code		Transaction ID - 0505	70054		
Denton	TX 76202		Transaction ID: 3527	1 000		
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbur	rsement this Period		
Candidate Name		Category/		2000.00		
Rep. Michael C. Burgess M.D.	amont Fore 2012	Туре		2000.00		
Senate President	ement For: 2012 Primary		Campaign Contribution			
State: TX District: 26						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
B. Mccollum For Congress						
Mailing Address P.O. Box 14131			09 17 2012			
City St. Paul	State Zip Code MN 55114		Transaction ID: 3527	78852		
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbu	sement this Period		
Candidate Name		Category/		1000.00		
Rep. Betty McCollum	amont Fore on the	Туре		1000.00		
Office Sought: House Disburse	ement For: 2012 Primary		Campaign Contribution			
Full Name (Last, First, Middle Initial)						
C. Kevin Mccarthy For Congress			Date of Disbursement	Y		
Mailing Address PO Box 12667			09 17	2012		
City Bakersfield	State Zip Code CA 93389		Transaction ID: 3527	78853		
Purpose of Disbursement Campaign Contribution						
Candidate Name		011	Amount of Each Disbu	sement this Period		
Rep. Kevin McCarthy		Category/ Type		4000.00		
•	ement For: 2012	Type		7		
Senate President	Primary ☐ General Other (specify) ▼		Campaign Contribution			
State: CA District: 22						
SUBTOTAL of Disbursements This Page (optional)				7000.00		
TOTAL This Period (last page this line number onl	y)			,		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 27 OF 30
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🗶 23 🔲 24 🔲 25 🖂 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and State			
or for commercial purposes, other than using the na	arrie ariu address or arry politic	ai committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	Droin DAC		
American Academy of Neurology	DIAIIIPAC		
Full Name (Last, First, Middle Initial)			
^{A.} Walden For Congress			Date of Disbursement
Mailing Address DOD 4004			M M / D D / Y Y Y Y Y
Mailing Address PO Box 1091			09 17 2012
City	State Zip Code		
Hood River	OR 97031		Transaction ID: 35278855
Purpose of Disbursement Campaign Contribution		044	
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Gregory P. Walden		Category/ Type	1000.00
	ement For: 2012	1,700	, , , , , , , , , , , , , , , , , , , ,
Senate	Primary X General		Campaign Contribution
President	Other (specify) ▼		
State: OR District: 02			
Full Name (Last, First, Middle Initial)	nacional Commoian		Date of Disbursement
B. Texans For Henry Cuellar Congre	essional Campaign		M M / D D / Y Y Y Y
Mailing Address 1519 Washington Street			09 17 2012
Suite 200			
City	State Zip Code TX 78040		Transaction ID: 35278859
Laredo Purpose of Disbursement	TX 78040		
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Rep. Henry Cuellar		Type	1000.00
	ement For: 2012		
Senate President	Primary		Campaign Contribution
State: TX District: 28	Other (specify)		
Full Name (Last, First, Middle Initial)			
C. Braley For Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 390			09 17 2012
City	State Zip Code		
Waterloo	IA 50704		Transaction ID: 35278860
Purpose of Disbursement Campaign Contribution			
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Bruce Braley		Category/	1000.00
•	ement For: 2012	Туре	
Senate	Primary General		Campaign Contribution
President	Other (specify) ▼		
State: IA District: 01			
			3000.00
SUBTOTAL of Disbursements This Page (optional)		·····•	3000.00
TOTAL This Period (last page this line number on	y)		

SCHEDU	JLE B (FEC Form 3X)		NUMBER: PAGE 28 OF 30	_	
ITEMIZE	D DISBURSEMENTS	Use separate schedule(s	(check only		
		for each category of the Detailed Summary Page	21b	22 🗶 23 24 25 26	
		Botanoa Gammary 1 ago	27	28a 28b 28c 29 30	b
				on for the purpose of soliciting contributions	
or for comn	nercial purposes, other than using the nan	ne and address of any polit	ical committee to	solicit contributions from such committee.	
NAME C	F COMMITTEE (In Full)				
Amer	ican Academy of Neurology E	BrainPAC			
<u>/</u>					
_	ne (Last, First, Middle Initial)				
A. Cathy	Mcmorris Rodgers For Cong	gress		Date of Disbursement	
				M M / D D / Y Y Y Y	
Mailing A	Address Box 137			09 17 2012	
City		State Zip Code			_
Spokane		WA 99210		Transaction ID: 35278861	
	of Disbursement	30210			
	gn Contribution		011	Amount of Each Disbursement this Period	
Candidat	e Name		Catagony		i
Rep. (Cathy McMorris Rodgers		Category/ Type	1000.00	
Office So	<u></u>	ment For: 2012	71	,	J
	Senate	Primary X General		Campaign Contribution	
	President	Other (specify)		Campaign Commoduen	
State:	WA District: 05				
Full Nam	ne (Last, First, Middle Initial)				
B. Bucsl	non For Congress			Date of Disbursement	
				M M / D D / Y Y Y Y	
Mailing A	Address PO Box 250			09 17 2012	
City		State Zip Code		Transaction ID : 35278862	
Newburg	•	IN 47629			
	of Disbursement gn Contribution		011	Amount of Fook Dishurosment this Devied	
Candidat			011	Amount of Each Disbursement this Period	
	Larry Bucshon MD		Category/	1000.00	
Office So	,	ment For: 2012	Туре		
Office of	Senate	Primary Seneral		Comparing Contain the	
	President	Other (specify)		Campaign Contribution	
State:	IN District: 08	• (opeany) •			
Full Nam	ne (Last, First, Middle Initial)				-
	ra For Congress			Date of Disbursement	
- Decei	ia i di Congress			M M / D D / Y Y Y Y	
Mailing A	Address P.O. Box 261060			09 21 2012	
_					
City	,	State Zip Code		Transaction ID : 35301599	
Los Ange		CA 90026		Transaction ib . 33301333	
	of Disbursement gn Contribution				
	•		011	Amount of Each Disbursement this Period	
Candidat			Category/	1500.00	
	Xavier Becerra		Type	1000.00	
Office So		ment For: 2012			
	Senate	Primary General		Campaign Contribution	
Stata	President District: 24	Other (specify) ▼			
State:	CA District: 31				_
CURTOT	L of Disharananta This Days (and 1)			3500.00	
SORIOTA	L of Disbursements This Page (optional)		·····	5555.50	
	is Period (last page this line number only)	1			
TOTAL Th					

SCHEDULE B (FEC Form 3X)				NUMBER: PAGE 29 OF 30					
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only					
			Summary Page	21b	22 28a	X 23 28b	24 28c	25	26 30b
Λ.	ay information copied from such Departs and Ctatam	l mou n	at he cold or use						
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam								
$\overline{\ }$	NAME OF COMMITTEE (In Full)		7.						
	American Academy of Neurology B	rainPAC	<u>.</u>						
_	, ,	, a							
_	Full Name (Last, First, Middle Initial)								
Α.	Price For Congress				Date of	Disburse	ment		
	Mailing Address P.O. Box 425				09	24		2012	Y
	Maining 7,64,666 1.0. Box 420				00	-		2012	
	City	State	Zip Code		Trans	action ID	. 2520204	13	
	1.00.110.11	GA	30077		Irans	action ID	: 353020	13	
	Purpose of Disbursement Campaign Contribution			011	Δ		Diahaa		Daviad
	Candidate Name			011	Amoun	t of Each	Disburser	nent this	Period
	Rep. Thomas Edmunds Price M.D.			Category/ Type				250	00.00
	•	nent For: 20	 012	Турс		,	,		
	Senate	Primary	✓ General		Campai	gn Contrib	ution		
	President	Other (spec	ify) ▼						
	State: GA District: 06								
_	Full Name (Last, First, Middle Initial)				Data at	. D'ala			
ο.	People For Patty Murray					Disburse			
	Mailing Address PO Box 3662				09	/ D 2		2012	Y
	ag / tau. eee 1 0 box 3002								
	City	State Zip Code			Transaction ID : 35318397				
					∣ Irans	action ib	. 3331033		
	Seattle	WA	98124		Irans	action ib	: 333163	,	
				011					Period
	Seattle Purpose of Disbursement			011		t of Each			Period
	Seattle Purpose of Disbursement Campaign Contribution			011 Category/ Type				nent this	Period
	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray		98124	Category/				nent this	
	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Disbursem Senate	ment For: 2 Primary	98124 016 General	Category/	Amount		Disburser	nent this	
	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President Disbursem	WA	98124 016 General	Category/	Amount	t of Each	Disburser	nent this	
	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District:	ment For: 2 Primary	98124 016 General	Category/	Amount	t of Each	Disburser	nent this	
	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Disbursem Senate President State: WA District: Full Name (Last, First, Middle Initial)	ment For: 2 Primary	98124 016 General	Category/	Amount	t of Each	Disburser	nent this	
C .	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District:	ment For: 2 Primary	98124 016 General	Category/	Amount Campai	t of Each gn Contrib	Disburser oution ment	nent this	00.00
<u> </u>	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Disbursem Senate President State: WA District: Full Name (Last, First, Middle Initial)	ment For: 2 Primary	98124 016 General	Category/	Amount	t of Each	Disburser pution ment	nent this	00.00
C .	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662	ment For: 2 Primary Other (speci	98124 016 General ify) ▼	Category/	Amount Campai	gn Contrib	Disburser pution ment	nent this	00.00
C .	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City	ment For: 2 Primary Other (speci	98124 016 General ify) ▼ Zip Code	Category/	Campai Date of	gn Contrib	Disburser pution ment	nent this 100	00.00
с.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662	ment For: 2 Primary Other (speci	98124 016 General ify) ▼	Category/	Campai Date of	gn Contrib	Disburser pution ment	nent this 100	00.00
С.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle	ment For: 2 Primary Other (speci	98124 016 General ify) ▼ Zip Code	Category/	Campai Date of	gn Contrib	Disburser pution ment 7	2012	00.00
С.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name	ment For: 2 Primary Other (speci	98124 016 General ify) ▼ Zip Code	Category/ Type	Campai Date of	gn Contrib	Disburser pution ment 7	nent this 100 2012 00 nent this	Period
c.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray	ment For: 2 Primary Other (speci	98124 016	Category/ Type	Campai Date of	gn Contrib	Disburser pution ment 7	nent this 100 2012 00 nent this	00.00
C.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray Office Sought: House Disbursement	ment For: 2 Primary Other (speci	98124 016	Category/ Type 011 Category/	Date of 09	gn Contrib	Disburser pution ment : 3531840 Disburser	2012 2012 nent this	Period
C.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray Office Sought: House Senate	ment For: 2 Primary Other (speci	98124 016	Category/ Type 011 Category/	Date of 09	gn Contrib	Disburser pution ment : 3531840 Disburser	2012 2012 nent this	Period
c.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray Office Sought: House Senate	ment For: 2 Primary Other (speci	98124 016	Category/ Type 011 Category/	Date of 09	gn Contrib	Disburser pution ment : 3531840 Disburser	2012 2012 nent this	Period
c.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray Office Sought: House Senate President Disbursement Void - People For Patty Murray Disbursement Void - People For Patty Murray Office Sought: House Senate President	ment For: 2 Primary Other (speci	98124 016	Category/ Type 011 Category/	Date of 09	gn Contrib	Disburser pution ment : 3531840 Disburser	2012 2012 nent this	Period
C.	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray Office Sought: House Senate President Disbursement Void - People For Patty Murray Disbursement Void - People For Patty Murray Office Sought: House Senate President	ment For: 2 Primary Other (special State WA ment For: 20 Primary Other (special	98124 016 General ify) ▼ Zip Code 98124 016 General ify) ▼	Category/ Type 011 Category/ Type	Date of 09	gn Contrib	Disburser pution ment : 3531840 Disburser	2012 2012 nent this -100	Period
	Seattle Purpose of Disbursement Campaign Contribution Candidate Name Sen. Patty Murray Office Sought: House Senate President State: WA District: Full Name (Last, First, Middle Initial) People For Patty Murray Mailing Address PO Box 3662 City Seattle Purpose of Disbursement Void - People For Patty Murray Candidate Name Sen. Patty Murray Office Sought: House Senate President Senate President State: WA District:	ment For: 2 Primary Other (special state) WA ment For: 2 Primary Other (special state)	98124 016 General ify) ▼ Zip Code 98124 016 General ify) ▼	Category/ Type 011 Category/ Type	Date of 09	gn Contrib	Disburser pution ment : 3531840 Disburser	2012 2012 nent this -100	Period 10.00

SCHEDULE B (FEC Form 3X)		FOR LINE	R LINE NUMBER: PAGE 30 OF			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	21b	22 X 23	24 25 26		
	<u> </u>	27	28a 28b	28c 29 30		
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan						
NAME OF COMMITTEE (In Full)	no and address of any point	oar committee to	Solicit Contributions in	on saon committee.		
American Academy of Neurology E	Rrain PAC					
/ American Academy of Neurology L	Jiann 710					
Full Name (Last, First, Middle Initial)						
A. People For Patty Murray			Date of Disburseme	ent		
Mailing Address PO Box 3662			09 27	2012		
IVIAIIIII Addiess PO Box 3002			09 27	2012		
City	State Zip Code		Transaction ID : 3	E240404		
Seattle	WA 98124		Transaction ID: 3	5318401		
Purpose of Disbursement Campaign Contribution		044	Assessment of Foods Die	de la constant de la Barda de		
Candidate Name		011	Amount of Each Dis	sbursement this Period		
Sen. Patty Murray		Category/ Type		1000.00		
	ment For: 2016	туре	,	3		
	Primary General		Campaign Contribution	on		
President	Other (specify) ▼					
State: WA District:						
Full Name (Last, First, Middle Initial)						
3.			Date of Disburseme	ent		
Mailing Addrson			M M / D D	/		
Mailing Address						
City	State Zip Code					
Purpose of Disbursement			Amount of Fool Die	.h		
Candidate Name	Category/ Type		Amount of Each Dis	sbursement this Period		
Candidate Hame						
Office Sought: House Disburser	ment For:	1,700		, , , , , , , , , , , , , , , , , , , ,		
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)			Data of Diahumaana	4		
C.			Date of Disburseme			
Mailing Address			M M / D D	/		
City	State Zip Code					
Durage of Dishuragement						
Purpose of Disbursement						
Candidate Name			Amount of Each Dis	sbursement this Period		
		Category/ Type	1			
Office Sought: House Disburser	ment For:	31	,	7		
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
				1000.00		
SUBTOTAL of Disbursements This Page (optional)		·····		1000.00		
TOTAL This David difference with the				32000.00		
TOTAL This Period (last page this line number only)				32000.00		