

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines American College of Cardiology Political Action Committee

ADDRESS (number and street) 2400 N St NW Washington DC 20037 1153 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00375360 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 09 01 2008 through 09 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Goldberg

Signature of Treasurer Electronically Filed by Richard Goldberg Date 10 20 2008

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American College of Cardiology Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		268897.92
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	163659.56									
(c) Total Receipts (from Line 19)	87006.11	314427.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	250665.67	583324.95								
7. Total Disbursements (from Line 31)	39916.29	372575.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	210749.38	210749.38								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American College of Cardiology Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	65091.15	247112.25
(i) Itemized (use Schedule A)		
(ii) Unitemized	18854.00	60911.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)	83945.15	308023.91
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	83945.15	308023.91
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	560.96	3903.12
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	87006.11	314427.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	87006.11	314427.03

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	916.29	4975.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	916.29	4975.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	39000.00	365000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2600.00
(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	2600.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	39916.29	372575.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39916.29	372575.57

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	83945.15	308023.91
34. Total Contribution Refunds (from Line 28(d))	0.00	2600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	83945.15	305423.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	916.29	4975.57
37. Offsets to Operating Expenditures (from Line 15, page 3)	560.96	3903.12
38. Net Operating Expenditures (subtract Line 37 from Line 36)	355.33	1072.45

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 69
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Rafique Ahmed

Mailing Address 12307 Cleghorn Road

City State Zip Code
Cockeysville MD 21030-2228

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

Name of Employer Self-Employed
Occupation ELECTROPHYSIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2008

Transaction ID: 6e7cde5baad046b78b06

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Costa Andreou

Mailing Address 210 Keyhole Court

City State Zip Code
Cramerton NC 28054-2179

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

Name of Employer
Mid Carolina Cardiology P.A.
Occupation INTERVENTIONAL CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2008

Transaction ID: 6690b7bd4c3642fa91b6

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Cesar E. Aranguri

Mailing Address 12021 South Wilmington Avenue

City State Zip Code
Los Angeles CA 90059-3019

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

Name of Employer Self-Employed
Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: dea49a4d8054f632851

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Anthony R. Arn		Date of Receipt
	Mailing Address 331 Glen Arbor Street		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Belmont	NC	28012-3761
	FEC ID number of contributing federal political committee. C		Transaction ID: d6483676f4e446e58d0f
Name of Employer MidCarolina Cardiology		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

B.	Full Name (Last, First, Middle Initial) Jeffrey Askew		Date of Receipt
	Mailing Address 1201 Sam Perry Blvd Ste 280		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fredericksburg	VA	22401-8400
	FEC ID number of contributing federal political committee. C		Transaction ID: 9a76414c13394baaab34
Name of Employer Virginia Cardiovascular Consultants		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	

C.	Full Name (Last, First, Middle Initial) Elie C. Azrak		Date of Receipt
	Mailing Address 1016 Brightfield Manor Court Suite 2346		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chesterfield	MO	63136-6119
	FEC ID number of contributing federal political committee. C		Transaction ID: ecd8c35b32794ef39f0e
Name of Employer Self-Employed		Occupation INTERVENTIONAL CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Timothy M. Bateman	Date of Receipt MM / DD / YYYY 09 / 29 / 2008
	Mailing Address 3410 West 89th Street	Transaction ID: 40ee94d2db26f06d323b
	City State Zip Code Leawood KS 64111-5939	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Cardiovascular Consultants, PC	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) Louis L. Battey	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 1076 Brookhaven Square	Transaction ID: 51a439b8f1854634ac28
	City State Zip Code Atlanta GA 30319-2878	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Barry D. Bertolet	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address PO Box 4449	Transaction ID: f7167457b5de4ac18b6e
	City State Zip Code Tupelo MS 38803-4449	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Cardiology Associates of North Mississ	Occupation INTERVENTIONAL CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 69
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Shyam Bhakta

Mailing Address 1502 Huntington Lane

City Cleveland State OH Zip Code 44118-1539

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

Name of Employer Self-Employed Occupation INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2008

Transaction ID: 57328362b44944e49353

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Daniel G. Blanchard

Mailing Address 3612 Princeton Avenue

City San Diego State CA Zip Code 92117-5637

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

Name of Employer UCSD Medical Center Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2008

Transaction ID: ba318993108f4af7ad1e

Amount of Each Receipt this Period 250.00

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

Mailing Address 1002 Willets Road

City Marmora State NJ Zip Code 08210-1968

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

Name of Employer Regional Heart and Lung Associates Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 09 / 2008

Transaction ID: 45cfccdc5fbc49afb8d1

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ▶ 625.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Randy K. Bottner

Mailing Address 6301 Abercorn Street

City Savannah State GA Zip Code 31405-5701

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

Name of Employer Savannah Cardiology, P.C. Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 08 / 2008
Transaction ID: 99f861bc55b24b1c9f3f
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Alfred A. Bove

Mailing Address 110 Anton Road
3401 N Broad Street

City Wynnewood State PA Zip Code 19140-4105

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

Name of Employer Temple University Hospital Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: dbcc55b244f149809da0
 Amount of Each Receipt this Period: 500.00

C.

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

Mailing Address 1317 Killdeer Street

City New Orleans State LA Zip Code 70121

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

Name of Employer Self-Employed Occupation NON-INVASIVE CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 04 / 2008
Transaction ID: b69fbfbf8000486585b1
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Kenneth P. Brin	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 528 Castle Wynd Drive	Transaction ID: 328497a78467444d8358
	City State Zip Code Loves Park IL 61111-8967	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Midwest Heart Specialists ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) John E. Brush	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 1426 N Woodhouse Rd.	Transaction ID: 4219C551-7D05-4637-
	City State Zip Code Virginia Beach VA 23454	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cardiology Consultants, Ltd. ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Brett C. Burgess	Date of Receipt MM / DD / YYYY 09 / 17 / 2008
	Mailing Address 2 Flying Jib Lane	Transaction ID: d72599bcd9d4492a96a1
	City State Zip Code Savannah GA 31404-6220	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cardiovascular Consultant- s, P.C. CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Joseph G. Cacchione		Date of Receipt
	Mailing Address 5740 Hickory Knoll Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 19 / 2008
	City	State	Zip Code
	Fairview	PA	16544-0002
	FEC ID number of contributing federal political committee. C		Transaction ID: f55d4789829b4cf3b5f9
Name of Employer St. Vincent Health Center		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Linda P. Calhoun		Date of Receipt
	Mailing Address 106 Chimney Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 15 / 2008
	City	State	Zip Code
	Wilmington	NC	28403-5345
	FEC ID number of contributing federal political committee. C		Transaction ID: cf318e13b7994af5836d
Name of Employer Wilmington Cardiology PLLC		Occupation CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1250.00

C.	Full Name (Last, First, Middle Initial) James C. Campbell		Date of Receipt
	Mailing Address 3599 University Boulevard South Su		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 17 / 2008
	City	State	Zip Code
	Jacksonville	FL	32216-4269
	FEC ID number of contributing federal political committee. C		Transaction ID: 280162af3519416cba2c
Name of Employer Self-Employed		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Paul T. Campbell

Mailing Address 616 Channing Circle

City State Zip Code
Concord NC 28025-2948

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

Name of Employer Self-Employed
Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: cc6b91b0492a45adb286

Amount of Each Receipt this Period
250.00

B.

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

Mailing Address 100 McGregor Street

City State Zip Code
Manchester NH 03102-3730

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

Name of Employer
New England Heart Institute
Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 9c63cc18cf1f4a81b752

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Jeffrey F. Caren

Mailing Address 8635 W Third Street Suite 890W

City State Zip Code
Los Angeles CA 90048-6101

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

Name of Employer Self-Employed
Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: c2861683ce23404fa9bd

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ranjiv S. Choudhary		Date of Receipt
	Mailing Address 3220 camino del sur		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
	City lancaster	State CA	Zip Code 93536
	FEC ID number of contributing federal political committee. C		Transaction ID: 55C124AF-C6BC-4AED-
	Amount of Each Receipt this Period		<input type="text" value="250.00"/>
Name of Employer Los Angeles Cardiology Associates		Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>	

B.	Full Name (Last, First, Middle Initial) Rajib Choudhury		Date of Receipt
	Mailing Address 4011 Talbot Rd. S 5th Floor		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Renton	State WA	Zip Code 98055-5773
	FEC ID number of contributing federal political committee. C		Transaction ID: d3109c8812424dc3ad4f
	Amount of Each Receipt this Period		<input type="text" value="500.00"/>
Name of Employer Self-Employed		Occupation INTERVENTIONAL CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="500.00"/>	

C.	Full Name (Last, First, Middle Initial) Russell A. Ciafone		Date of Receipt
	Mailing Address 66 Highridge Road		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City West Simsbury	State CT	Zip Code 06105-2335
	FEC ID number of contributing federal political committee. C		Transaction ID: 677e9323d58642228605
	Amount of Each Receipt this Period		<input type="text" value="250.00"/>
Name of Employer Central Connecticut Cardiologists, LLC		Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Michael P. Cinquegrani

Mailing Address 14755 Ridgemoor Drive

City Elm Grove State WI Zip Code 53226-3522

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

Name of Employer Medical College of Wisconsin Occupation INTERVENTIONAL CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 04 / 2008
Transaction ID: 327b4efdc5cc4d1d96a4
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Thomas J. Ciotola

Mailing Address 118 Ferrara Avenue

City Hazleton State PA Zip Code 18201-5852

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

Name of Employer Cardiology Associates of Greater Hazle Occupation NON-INVASIVE CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: d543555ae2a94c4bbcaf
 Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
David J. Clardy

Mailing Address 737 Broadway

City Fargo State ND Zip Code 58102-4421

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

Name of Employer Meritcare Medical Center Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 19 / 2008
Transaction ID: f9895731a8f04a39b822
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Bernard A. Clark		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 95 Johnny Cake Lane		Transaction ID: 54df4a3602054fbda5c4		
	City Glastonbury	State CT	Zip Code 06105-1208	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer St. Francis Hospital and Medical Centre	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 950.00		

B.	Full Name (Last, First, Middle Initial) Bernard A. Clark		Date of Receipt MM / DD / YYYY 09 / 29 / 2008		
	Mailing Address 95 Johnny Cake Lane		Transaction ID: 4a12a775ad652973ba99		
	City Glastonbury	State CT	Zip Code 06105-1208	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer St. Francis Hospital and Medical Centre	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 950.00		

C.	Full Name (Last, First, Middle Initial) Craig B. Clark		Date of Receipt MM / DD / YYYY 09 / 09 / 2008		
	Mailing Address 6748 bramwell court		Transaction ID: A413D9AE-A696-4030-		
	City johnston	State IA	Zip Code 50131	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Iowa Heart Center	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) George H. Crossley	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 276 Stratton Court	Transaction ID: 4e8e0ebf9e0a44aea0e9
	City State Zip Code Brentwood TN 37203-1831	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation St. Thomas Heart ELECTROPHYSIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) Jennifer E. Cummings	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 25752 Kensington Drive Desk F-15	Transaction ID: 176d063aacee4c04aca1
	City State Zip Code Westlake OH 44195-0001	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cleveland Clinic ELECTROPHYSIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) David W. Cundey	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 30 Holley Lake Circle	Transaction ID: 768c1880b6da41408023
	City State Zip Code Aiken SC 29801-6840	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Aiken Cardiovascular Associates INTERVENTIONAL CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Geeta N. Dalal	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 100 Llansfair Drive	Transaction ID: d470dee96ead41b6ac03
	City State Zip Code Lafayette LA 70506-4205	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Pediatric Cardiology of Acadiana Occupation: PEDIATRICS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ira M. Dauber	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 9933 E Berry Drive 1000 Southpark Drive	Transaction ID: 655e4f5422b94daeac5f
	City State Zip Code Englewood CO 80120-5654	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: South Denver Cardiology Associates Occupation: ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Robert M. Davidson	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 8635 W 3rd St	Transaction ID: d12796f5dd9745c4b54f
	City State Zip Code Los Angeles CA 90048-6101	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Robert M. Davidson, M.D., Inc. Occupation: ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Robert M. Davidson		Date of Receipt MM / DD / YYYY 09 / 17 / 2008
Mailing Address 9646 Wendover Drive		Transaction ID: 1dc7610355ec43dbb53f
City Beverly Hills	State Zip Code CA 90048-6105	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Robert M. Davidson, M.D., Inc.	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) John M. Dent		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 1260 Bayberry Court PO Box 800662		Transaction ID: 9c32bdc0edfe4671b510
City Crozet	State Zip Code VA 22908-0001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer University of Virginia Health SystemDe	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date ▼ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Yuri A. Deychak		Date of Receipt MM / DD / YYYY 09 / 24 / 2008
Mailing Address 10 Floral Park Court		Transaction ID: bce39ba6ad63473a8e03
City Gaithersburg	State Zip Code MD 20817-1830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Maryland Heart, P.C.	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Rodoljub Z. Dimitrijevic

Mailing Address 3361 Chickering Ln

City Bloomfield Hills State MI Zip Code 48302-1415

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2008

Transaction ID: 3d8b8828457942199df9

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Thomas J. Doyle

Mailing Address 7700 Southwest Indian Woods Place

City Topeka State KS Zip Code 66615-1420

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 24c51e857d074feb97e2

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
John H. Edmunds

Mailing Address 4002 Westmount Drive

City Greensboro State NC Zip Code 27401-1231

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

Name of Employer Eagle Physicians, P.A. Wender Medical Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 15 / 2008

Transaction ID: 064e1838e0164243805d

Amount of Each Receipt this Period 750.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Blair D. Erb

Mailing Address 905 Highland Boulevard Suite 4330

City Bozeman State MT Zip Code 59715-6901

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

Name of Employer Cardiology Consultants of Bozeman Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2008
Transaction ID: 0c165b480ae54ee09471
 Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
John P. Farry

Mailing Address 5 Willow Way

City Florham Park State NJ Zip Code 07932-1726

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 09 / 2008
Transaction ID: 8ba17edf20eb4720ae99
 Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Joseph Feldschuh

Mailing Address 350 5th Avenue, Suite 7120

City New York State NY Zip Code 10118-7120

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2008
Transaction ID: 1d379b0a78314b0289c4
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ **725.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Steven R. Fera		Date of Receipt MM / DD / YYYY 09 / 17 / 2008		
	Mailing Address 30 Tomahawk Trail		Transaction ID: 8a4df057d207431ca2b2		
	City Wakefield	State RI	Zip Code 02879	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer S County Cardiology Assocs Inc	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Daniel P. Fishbein		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 6057 31st Avenue, Northeast Box #356422		Transaction ID: e93a2de1be914044adbc		
	City Seattle	State WA	Zip Code 98195-0001	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Univ. of Washington Med. Ctr.	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Simon Flynn		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address Flynn Management Associates 100 Roscommon Drive Suite 320		Transaction ID: dfb36c0142f54a1da85f		
	City Middletown	State CT	Zip Code 06457	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Connecticut Chapter of the American Col	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Patrick A. Frias		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 2321 Old Ivey Walk 2835 Brandywine, Suite 300		Transaction ID: 72954a5102f24233b499		
	City Stone Mountain	State GA	Zip Code 30329	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Sibley Heart Center Cardiology	Occupation PEDIATRIC CARD.	Aggregate Year-to-Date 500.00		

B.	Full Name (Last, First, Middle Initial) Gordon L. Fung		Date of Receipt MM / DD / YYYY 09 / 08 / 2008		
	Mailing Address 1600 Divisadero Street, C-244 Box 1609		Transaction ID: 899715b270834883a2fc		
	City San Francisco	State CA	Zip Code 94115-3010	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UCSF Medical Center at Mt. Zion	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 250.00		

C.	Full Name (Last, First, Middle Initial) Joseph A. Gabis		Date of Receipt MM / DD / YYYY 09 / 17 / 2008		
	Mailing Address 92 North Fourth Street		Transaction ID: 769cad4f98b54957923d		
	City Martins Ferry	State OH	Zip Code 43935-1691	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Medical Office Building	Occupation Cardiologist	Aggregate Year-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 69
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Carl J. Gessler

Mailing Address 930 Franklin Street

City State Zip Code
Huntsville AL 35804-4002

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

Name of Employer
The Heart Center, PCATTN:
Accounts Pay

Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2008

Transaction ID: 5867162cb08743d482f9

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Sukhjit S. Gill

Mailing Address 62 Baybrook Lane

City State Zip Code
Oak Brook IL 60523-1640

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

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: e0e9f223549e4a94b00c

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Rama M. Godishala

Mailing Address 281 Grant Avenue

City State Zip Code
Auburn NY 13021-1421

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

Name of Employer
Auburn Cardiology Associa-
tes

Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 570c282fc9934678bf81

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional) ► **875.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 69
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Allan M. Greenspan

Mailing Address 5501 Old York Road

City Philadelphia State PA Zip Code 19141-3018

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

Name of Employer Self-Employed Occupation ELECTROPHYSIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2008

Transaction ID: f5aed6be9edc47bda4a8

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Vinod K. Gupta

Mailing Address 100 Willow Plaza Suite 200

City Visalia State CA Zip Code 93291-6213

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2008

Transaction ID: f9826504cdcd41f49751

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
Hasan Guven

Mailing Address 904 Park Crest Circle

City Birmingham State AL Zip Code 35242-7537

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

Name of Employer Alabama Cardiovascular Group Occupation INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 03 / 2008

Transaction ID: 273e81c28370406ea0c3

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kenneth A. Hahn

Mailing Address 1462 South Colorado Street
Apt. 2F

City Greenville State MS Zip Code 38703-7263

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

Name of Employer Delta Regional Medical Center Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
09 / 04 / 2008

Transaction ID: b163d51ee5ec4be988a4

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Maurice D. Harris

Mailing Address 2675 N Decatur Road Suite 200

City Decatur State GA Zip Code 30033-6132

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

Name of Employer Emory Heart & Vascular Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
09 / 29 / 2008

Transaction ID: d0c49fb9249741f6b190

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
J. Clay Hays

Mailing Address 971 Lakeland Drive Suite 450

City Jackson State MS Zip Code 39216-4615

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

Name of Employer Jackson Heart Clinic PA Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
09 / 04 / 2008

Transaction ID: bc8761894a2e45099e60

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
J. Chris Higgins
Mailing Address 35 Edgewood Road
City Cornwall State VT Zip Code 05753-8537
FEC ID number of contributing federal political committee. **C**
Name of Employer Champlain Valley Cardiovascular Associ
Occupation ADULT CARDIOLOGY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 09 / 17 / 2008
Transaction ID: 592c32cfd1674d858087
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Jerome L. Hines
Mailing Address 11 Salt Creek Lane #2
City Hinsdale State IL Zip Code 60521-2990
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation ADULT CARDIOLOGY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00
Date of Receipt 09 / 19 / 2008
Transaction ID: 428cc939a1b94065bef9
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Clair S. Hixson
Mailing Address 2050 Meadowview Parkway
City Kingsport State TN Zip Code 37660-7332
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardiovascular Associates, P.C. The He
Occupation ADULT CARDIOLOGY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 11 / 2008
Transaction ID: 8c52137e544e4c51bcba
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.

Full Name (Last, First, Middle Initial) Robert E. Hobbs		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 2713 Dryden Road		Transaction ID: 2ce53bab8c744766b2c6
City Beachwood	State OH	Zip Code 44195-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cleveland Clinic	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.

Full Name (Last, First, Middle Initial) Arthur B. Hodess		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 3025 Zinn Road		Transaction ID: e9bdaa92aa204b3398a4
City Thorndale	State PA	Zip Code 19372-1131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Steven J. Horn		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 151 Four Seasonrd E		Transaction ID: ac5240daece54780919e
City Buffalo	State NY	Zip Code 14226-4275
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Kaleida Health Buffalo General Foundat	Occupation ECHOCARDIOLOGY/ECHOCARDIOGRAPHY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ashit Jain		Date of Receipt MM / DD / YYYY 09 / 22 / 2008		
	Mailing Address 8543 Lupine Court		Transaction ID: 866116ae113746f8895f		
	City Pleasanton	State CA	Zip Code 94588-8221	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Mark A. Jones		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 5330 E Stop 11 Road		Transaction ID: 3391493a612e4552b9e9		
	City Indianapolis	State IN	Zip Code 46237-6345	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Indiana Heart Physicians	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Martin M. Kay		Date of Receipt MM / DD / YYYY 09 / 09 / 2008		
	Mailing Address 26 Cedar Lane		Transaction ID: 07c3cbbbc3b84b7caf26		
	City Sandspoint	State NY	Zip Code 11361-3002	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Cardiovascular Associates of New York	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 69
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mark W. Keller

Mailing Address 5855 S Forest Street

City State Zip Code
Greenwod Village CO 80012-4508

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

Name of Employer Self-Employed Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: 6a9ecf8a914744f3af12

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Jerry D. Kennett

Mailing Address 1101 Canterbury Drive

City State Zip Code
Columbia MO 65203-5217

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

Name of Employer Missouri Cardiovascular Specialists Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2008

Transaction ID: ed12dc56248347a0bc9f

Amount of Each Receipt this Period
1500.00

C.

Full Name (Last, First, Middle Initial)
Michael G. Kienzle

Mailing Address 812 River Street

City State Zip Code
Iowa City IA 52246

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

Name of Employer University of Iowa, Roy J. & Lucille A Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2008

Transaction ID: EAA08D70-6268-4B2A-

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
David W. Kohl

Mailing Address 7886 Lantana Creek Road

City State Zip Code
Largo FL 33709-3859

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

Name of Employer Occupation
Bay Area Heart Center INTERVENTIONAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2008

Transaction ID: bf3d8b18c83d4942a6ad

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Richard J. Kovacs

Mailing Address 38 East 52nd Street
1801 N Senate Boulevard

City State Zip Code
Indianapolis IN 46202

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

Name of Employer Occupation
Kranert Institute of Cardiology ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: aa2d98beae1d4ff0a0c1

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Seth L. Krauss

Mailing Address 2023 Loussac Drive

City State Zip Code
Anchorage AK 99508-4624

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

Name of Employer Occupation
Alaska Heart Institute LLC ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 6db99bb171d84154b6b8

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Gilead I. Lancaster

Mailing Address 15 Mine Hill Road

City Redding State CT Zip Code 06610-2805

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

Name of Employer: Bridgeport Hospital Dept of Echo
Occupation: ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 19 / 2008
Transaction ID: e2d342835ef741d18cd1
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Phillip L. Laney

Mailing Address 5012 Littlebury Road

City Huntsville State AL Zip Code 35801-4312

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

Name of Employer: The Heart Center, PC
Occupation: ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 19 / 2008
Transaction ID: 4c639fda50a14022bedd
 Amount of Each Receipt this Period: 250.00

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

Mailing Address 306 Dux Landing

City Cape Girardeau State MO Zip Code 63703-4927

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

Name of Employer: Cardiovascular Consultants of Cape Gira
Occupation: ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 03 / 2008
Transaction ID: 295e3dd8c6f04ae0b761
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Roger F. Leonard

Mailing Address 11706 Split Tree Circle

City Potomac State MD Zip Code 20832-1514

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

Name of Employer Montgomery General Hospital Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 08 / 2008

Transaction ID: 0c4139e7a5c347d8b294

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Roger F. Leonard

Mailing Address 11706 Split Tree Circle

City Potomac State MD Zip Code 20832-1514

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

Name of Employer Montgomery General Hospital Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 19 / 2008

Transaction ID: ab5b63e84a2146be8b3c

Amount of Each Receipt this Period 1000.00

C.

Full Name (Last, First, Middle Initial)
Norman E. Lepor

Mailing Address 99 La Cienega Suite 203

City Beverly Hills State CA Zip Code 90211-2285

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2008

Transaction ID: d65e34a7596440019a79

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 69
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Jack Lewin		Date of Receipt MM / DD / YYYY 09 / 17 / 2008
Mailing Address 2400 N Street, Northwest		Transaction ID: 92fd142815ca4fbba040
City Washington	State Zip Code DC 20037-1153	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer American College of Cardiology	Occupation Executive	Aggregate Year-to-Date ▼ 1250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Sandra J. Lewis		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 5342 Southwest Hewett Boulevard		Transaction ID: fb685efd936f40ca943c
City Portland	State Zip Code OR 97210-5104	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NW Cardiovascular Institute	Occupation CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY	Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) William R. Lewis		Date of Receipt MM / DD / YYYY 09 / 04 / 2008
Mailing Address 24707 Tricia Drive		Transaction ID: 493eff5bdeab4408bc88
City Westlake	State Zip Code OH 44109-1900	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer MetroHealth Medical Center	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date ▼ 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 69
(check only one)

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

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

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

Mailing Address 24707 Tricia Drive

City State Zip Code
Westlake OH 44109-1900

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

Name of Employer MetroHealth Medical Center Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 19 / 2008
Transaction ID: 1b8b6bb249dd4a5196b0
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Melchor N. Lim

Mailing Address Cardiology of Tulsa
6151 S Yale Street Suite 400

City State Zip Code
Tulsa OK 74076-2047

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

Name of Employer Cardiology Specialist of Still Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 09 / 2008
Transaction ID: 6075e99b098241d5b1ff
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Timothy N. Logemann

Mailing Address 500 Wind Ridge Drive

City State Zip Code
Wausau WI 54401-4173

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

Name of Employer Cardiovascular Associates- of Northern W Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 03 / 2008
Transaction ID: bf56a795efa6483d9445
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Craig H. Lundgren

Mailing Address 11223 Buenavista

City State Zip Code
Shawnee Mission KS 64114-4698

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

Name of Employer Self-Employed Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2008

Transaction ID: 8c2d2603d0e54405b023

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Bruno Manno

Mailing Address 1275 Fritz Circle

City State Zip Code
Huntingdon Vv PA 19046-8009

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

Name of Employer Self-Employed Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: 8eed8fcd9d184bb7b254

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ramin Manshadi

Mailing Address 4751 Saint Andrews Drive

City State Zip Code
Stockton CA 95204-4429

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

Name of Employer Self-Employed Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 28165a1637b74f22b257

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Joseph E. Marakovits		Date of Receipt MM / DD / YYYY 09 / 03 / 2008		
	Mailing Address 96 Stonehill Drive		Transaction ID: d59ed02978ab40c99afb		
	City Rocky Hill	State CT	Zip Code 06067-4257	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Bristol Cardiovascular Associates	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Edward T. Martin		Date of Receipt MM / DD / YYYY 09 / 03 / 2008		
	Mailing Address 9228 S Mingo Rd		Transaction ID: d7c5915fd3e14be491ec		
	City Tulsa	State OK	Zip Code 74133-5718	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Oklahoma Heart Institute	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) George M. Massoud		Date of Receipt MM / DD / YYYY 09 / 17 / 2008		
	Mailing Address 2200 E First Street Suite 1612		Transaction ID: 7d8902b3a7b846c7bf89		
	City Alamogordo	State NM	Zip Code 88310-3424	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	1075.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 38 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Steven L. McCormick

Mailing Address 2930 Chesterfield Avenue

City Charleston State WV Zip Code 25304-1062

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2008
Transaction ID: 20edaa3f6c5641e4baf5
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Thomas L. McKiernan

Mailing Address 156 E St. Charles Road

City Elmhurst State IL Zip Code 60126-3424

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

Name of Employer Loyola University Stritch School of Me Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2008
Transaction ID: b7163d6b668749b5b8f7
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Andrew L. Mecca

Mailing Address 311 W 24th Street Suite 401

City Erie State PA Zip Code 16502-2667

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

Name of Employer Consultants in Cardiovascular Diseases Occupation ELECTROPHYSIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2008
Transaction ID: 801b56cf6c3d4f28a428
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Steven S. Mehta	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address PO Box 1360	Transaction ID: e5fb53933b614bc59fd3
	City State Zip Code Show Low AZ 85902-1360	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Heart Center of Northeastern Arizona Occupation: INTERVENTIONAL CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Joseph V. Messer	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 540 Washington Ave	Transaction ID: ee1a709524dc4dfc933d
	City State Zip Code Glencoe IL 60022-1837	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Associates in Cardiology, LTD Occupation: ADULT CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Keith A. Miller	Date of Receipt MM / DD / YYYY 09 / 08 / 2008
	Mailing Address 4620 Union Hill Road	Transaction ID: 6f4c8d074f9f47f2881c
	City State Zip Code Lincoln NE 68516-7009	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Bryan LGH Heart Institute Occupation: CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 40 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2005 Prestwick Lane

City State Zip Code
Fort Wayne IN 46805-4705

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

Name of Employer Occupation
Fort Wayne Cardiology ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 66d10704d5fb4aa5a7da

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Alberto E. Montalvo

Mailing Address 5928 Riverview Boulevard

City State Zip Code
Bradenton FL 34205-8805

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

Name of Employer Occupation
Bradenton Cardiology ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 4c0c9faace9e4b4f9b22

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Charn S. Nandra

Mailing Address 100 Welday Avenue

City State Zip Code
Wintersville OH 43953-3779

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

Name of Employer Occupation
Tristate Medical Center ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: c22fc561218e4f6f991f

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Lawrence G. Narun		Date of Receipt
	Mailing Address 9 Atwater Road		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Chadds Ford	PA	19317-9111
	FEC ID number of contributing federal political committee. C		Transaction ID: c741085d3a4b48d1b90c
Name of Employer Self-Employed		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Lisa M. O'Brien		Date of Receipt
	Mailing Address 2500 Metro Health Drive		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cleveland	OH	44109-1900
	FEC ID number of contributing federal political committee. C		Transaction ID: da8936a07a3f48088da1
Name of Employer Metro Health Medical Center		Occupation Cardiologist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Pankaj V. Patel		Date of Receipt
	Mailing Address 3205A Dentcrest Drive		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Midland	TX	79703-4873
	FEC ID number of contributing federal political committee. C		Transaction ID: 99be565f15cb4670b351
Name of Employer Midland Cardiology Clinic-Midland Memor		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bradley Personius

Mailing Address 195 Serenity Lane

City State Zip Code
Grants Pass OR 97527-5573

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

Name of Employer
Cardiology Consultants PC
of Southern

Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2008

Transaction ID: Obd46ab0309d48e5aacb

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Wayne A. Powell

Mailing Address 9625 Podium Dr

City State Zip Code
Vienna VA 22182-3339

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

Name of Employer
Society for Cardiovascular
Angiography

Occupation
Cardiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2008

Transaction ID: bff37a3652b99319ee3

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Eileen Pummer

Mailing Address 147 Ardith Drive

City State Zip Code
Orinda CA 94304-2203

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

Name of Employer
Stanford Hospital and Cli-
nicsQuality I

Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2008

Transaction ID: eef50b13c87a41668172

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) James C. Ramicone		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 6525 Powers Boulevard Suite 301		Transaction ID: ed8b0bae5bbc4303be15
City Parma	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cardiovascular Clinic	Occupation ELECTROPHYSIOLOGY	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Sathyanarayan M. Reddy		Date of Receipt MM / DD / YYYY 09 / 22 / 2008
Mailing Address 3 Cameron Road		Transaction ID: f37114718f594a438d13
City Clarksburg	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) George P. Rodgers		Date of Receipt MM / DD / YYYY 09 / 29 / 2008
Mailing Address 2441 Westlake Drive		Transaction ID: 447c977430b46f4790c2
City Austin	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer Biophysical Corporation	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 845.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	835.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 69
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
John Rogan

Mailing Address 962 Arbutus Street

City Middletown State CT Zip Code 06413-2507

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

Name of Employer Middlesex Card. Assoc., P.C. Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2008

Transaction ID: 6dbd6c352df3428691ee

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Howard S. Rosman

Mailing Address 22151 Moross #126

City Detroit State MI Zip Code 48236-2165

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

Name of Employer St. John Hospital & Medical Center Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2008

Transaction ID: 188099bcd7574eff9599

Amount of Each Receipt this Period 400.00

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

Mailing Address 2000 Viaduct Tuscany

City Winter Park State FL Zip Code 32804-5506

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

Name of Employer Cardiology Consultants Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2008

Transaction ID: f93c711f6b2a4079bcd1

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 69
(check only one)

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

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

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

Mailing Address 2503 Point Drive

City State Zip Code
Monroe LA 71201-2987

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

Name of Employer Self-Employed Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: a8c467b9fc8649bf87ad

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Michele P. Sartori

Mailing Address 2102 Rice Boulevard

City State Zip Code
Houston TX 77030-2308

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

Name of Employer Self-Employed Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2008

Transaction ID: b0e1e5d4604649909888

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Leonard Savino

Mailing Address 31 Willowbrook Drive

City State Zip Code
Caldwell NJ 07110-2900

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

Name of Employer Self-Employed Occupation
ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2008

Transaction ID: a8ea45cd7d924150a8ac

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
John W. Schaeffer

Mailing Address 161 Ridgeland Drive

City Amherst State OH Zip Code 44011-4044

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

Name of Employer North Ohio Heart Center Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2008
Transaction ID: 2d854179b4aa498abf5b
Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
Jane E. Schauer

Mailing Address 2522 Veranda Rd NW

City Albuquerque State NM Zip Code 87107-2939

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

Name of Employer Presbyterian Heart Group Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 17 / 2008
Transaction ID: a4641856e14149ad889a
Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
David E. Schleinkofer

Mailing Address 1819 Carew Street

City Fort Wayne State IN Zip Code 46805-4705

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

Name of Employer Fort Wayne Cardiology Corporation Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2008
Transaction ID: 600b138f4d7346f59db3
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Charlie Shaeffer		Date of Receipt
	Mailing Address 279 Viaduct Las Palmas		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Palm Springs	CA	92270-3221
	FEC ID number of contributing federal political committee. C		Transaction ID: 8e24fdf9cdf14b409765
Name of Employer Desert Cardiology Consultants Medical		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Richard E. Shaw		Date of Receipt
	Mailing Address 1515 Cabrillo Avenue		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Burlingame	CA	94115-1821
	FEC ID number of contributing federal political committee. C		Transaction ID: 91b2b91a0e6344ccaebd
Name of Employer Sutter Pacific Heart Centers		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Roger Shell		Date of Receipt
	Mailing Address 593 Cranbury Road		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	East Brunswick	NJ	08816-4029
	FEC ID number of contributing federal political committee. C		Transaction ID: 36c3e65f9dc544368b54
Name of Employer Cardiology Associates of New Brunswick		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
M. Eugene Sherman

Mailing Address 5110 South Hanover Way

City Englewood State CO Zip Code 80011-6742

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

Name of Employer Aurora Medical Associates, PC Occupation INTERVENTIONAL CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 17 / 2008

Transaction ID: 14398ec9204e4157b692

Amount of Each Receipt this Period 2499.00

B.

Full Name (Last, First, Middle Initial)
Hullukunte Shivaprasad

Mailing Address 1046 Enid Drive

City Wheelersburg State OH Zip Code 45694-9370

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 08 / 2008

Transaction ID: 69e36472b8af4a488453

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
Irwin M. Silverman

Mailing Address 1235 Hackberry

City Deerfield State IL Zip Code 60201-1507

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2008

Transaction ID: 1dcff72e40364f46b945

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 3249.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Patrick J. Simpson

Mailing Address 205 Page Rd

City State Zip Code
Pinehurst NC 28374-8749

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

Name of Employer Occupation
Pinehurst Medical Clinic ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: 45ef66f385ea4e76ade4

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
George L. Smith

Mailing Address 3536 Mendocino Avenue Suite 200

City State Zip Code
Santa Rosa CA 95403-3634

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

Name of Employer Occupation
Self-Employed ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: 2a185045130940f89bc7

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Janet L. Smith

Mailing Address 6420 Dutchmans Parkway Suite 200

City State Zip Code
Louisville KY 40205-3373

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

Name of Employer Occupation
Cardiovascular Associates CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: 2a30463b1d12449c9876

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Richard W. Snyder		Date of Receipt MM / DD / YYYY 09 / 27 / 2008		
	Mailing Address 5514 Yolanda		Transaction ID: 001b548805dd4262a0a5		
	City Dallas	State TX	Zip Code 75230-2500	Amount of Each Receipt this Period 357.15	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Heart Place	Occupation INTERVENTIONAL CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3928.60			

B.	Full Name (Last, First, Middle Initial) D. Gary Soya		Date of Receipt MM / DD / YYYY 09 / 03 / 2008		
	Mailing Address PO Box 51624		Transaction ID: 6eaf97c6a9a49428d75		
	City Amarillo	State TX	Zip Code 79159-1624	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Allen L. Spitler		Date of Receipt MM / DD / YYYY 09 / 29 / 2008		
	Mailing Address 391 Dux Landing Road		Transaction ID: bd4474e2575846399143		
	City Cape Girardeau	State MO	Zip Code 63703-4927	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Cardiovascular Consultants of Cape Gira	Occupation ADULT CARDIOLOGY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	▶	1357.15
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jesse W. St. Clair

Mailing Address 1632 Cutty Sark Road

City State Zip Code
Virginia Beach VA 23454-1549

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

Name of Employer Self-Employed Occupation
Self-Employed ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2008

Transaction ID: e1403773ef1e47c58a00

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Alfred W. Stanley

Mailing Address 4401 Fredericksburg Drive

City State Zip Code
Birmingham AL 35213-1819

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

Name of Employer Self-Employed Occupation
Self-Employed ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2008

Transaction ID: d5d767fb7ccb4cc1a2f1

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Craig A. Stevens

Mailing Address 1409 Northwest Northwoods Drive

City State Zip Code
Ankeny IA 50314-3029

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

Name of Employer Occupation
Iowa Heart Center ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: 9ff8f44d183e4961b974

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Gunnar G. Strobel

Mailing Address 3900 Crosby Drive Apt. 1611

City Lexington State KY Zip Code 99508-4674

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

Name of Employer Alaska Heart Institute LLC Occupation ELECTROPHYSIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2008
Transaction ID: 9fcd4d9a00144332af86
Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
Thevaraya N. Subbiah

Mailing Address 3 Trillum Cr.

City Butler State PA Zip Code 16001-5752

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2008
Transaction ID: f7a6d1a7b8294b3a8f9f
Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Saroj Tom Tampira

Mailing Address 5607 Emerson Pointe Way

City Orlando State FL Zip Code 32819-4055

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 08 / 2008
Transaction ID: 3c71206f38684dd1a16d
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Marc A. Tecce

Mailing Address 5 Great Woods Lane

City Malvern State PA Zip Code 19355-9697

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2008
Transaction ID: 3c69d17ae9964bffc97
Amount of Each Receipt this Period 250.00

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

Mailing Address 7620 Old Georgetown Road, Apt. 121

City Bethesda State MD Zip Code 02199-7815

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

Name of Employer Self-Employed Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2008
Transaction ID: b4032616b5344083a36c
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Andrew Van Tosh

Mailing Address Nuclear Cardiology
100 Port Washington Boulevard

City Roslyn State NY Zip Code 11576

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

Name of Employer St. Francis Hospital Occupation ADULT CARDIOLOGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2008
Transaction ID: cff12ae0e78341d69687
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) William R. Vetter	Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 5301 F Street Suite 117	Transaction ID: f981b98009364b7b93aa
	City State Zip Code Sacramento CA 95819-3220	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Robert N. Vincent	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 2040 Ridgewood Dr., Northeast	Transaction ID: 4e3d44f433f5427eb3e3
	City State Zip Code Atlanta GA 30322-1028	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation PEDIATRIC CARD.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Galen N. Vonk	Date of Receipt MM / DD / YYYY 09 / 29 / 2008
	Mailing Address 2708 S Alana Circle	Transaction ID: f3b60d45e6f543e59e5c
	City State Zip Code Sioux Falls SD 57108-8148	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer North Central Heart Institute Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Thad F. Waites		Date of Receipt	
	Mailing Address 1017 Richburg Road		M M / D D / Y Y Y Y 09 / 19 / 2008	
	City	State	Zip Code	Transaction ID: a4d7dda307424da2a13f
	Hattiesburg	MS	39402-9055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Southern Heart Center		Occupation ADULT CARDIOLOGY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00		

B.	Full Name (Last, First, Middle Initial) Kirk W. Walker		Date of Receipt	
	Mailing Address 2974 Dogwood Dr. S		M M / D D / Y Y Y Y 09 / 19 / 2008	
	City	State	Zip Code	Transaction ID: 3704d3b81f3545f197bc
	Salem	OR	97301-3993	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Cascade Cardiology		Occupation ADULT CARDIOLOGY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Diane E. Wallis		Date of Receipt	
	Mailing Address 3825 Highland Ave		M M / D D / Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	Transaction ID: 346F6A96-7D86-4386-
	Downers Grove	IL	60515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Midwest Heart Specialists		Occupation ADULT CARDIOLOGY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 69
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Mary N. Walsh		Date of Receipt MM / DD / YYYY 09 / 29 / 2008
Mailing Address 428 West 83rd Place		Transaction ID: 499b8bfe975af14856a7
City Indianapolis	State Zip Code IN 46260-1992	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer The Care Group LLC	Occupation HEART FAILURE/TRANSPLANT	Aggregate Year-to-Date 900.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Bruce A. Watt		Date of Receipt MM / DD / YYYY 09 / 29 / 2008
Mailing Address 401 Chestnut Trail		Transaction ID: cab55d5af19b42228c9d
City Brandon	State Zip Code SD 57108-8148	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer North Central Heart Institute	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Steven R. West		Date of Receipt MM / DD / YYYY 09 / 18 / 2008
Mailing Address 15636 Fiddlesticks Boulevard 13411 Parker Commons Boulevard, Su		Transaction ID: 7149453cf30546a282f8
City Fort Myers	State Zip Code FL 33912	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cardiology Consultants of Southwest Fl	Occupation ADULT CARDIOLOGY	Aggregate Year-to-Date 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 69

(check only one)

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

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Steven R. West

Mailing Address 15636 Fiddlesticks Boulevard
13411 Parker Commons Boulevard, Su

City State Zip Code
Fort Myers FL 33912

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardiology Consultants of Southwest Fl

Occupation
ADULT CARDIOLOGY

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: ea461e9bd72628cd0af

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Murray P. Whitaker

Mailing Address 105 Laura Lake Road

City State Zip Code
Vicksburg MS 39180-7031

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 24 / 2008

Transaction ID: 00c3cf85096c493db2c7

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Harvey J. White

Mailing Address 1020 El Pueblo Northwest

City State Zip Code
Albuquerque NM 87102-2512

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardiac Care Consultants of NM

Occupation
ADULT CARDIOLOGY

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: 823c7ae30fbc4904a825

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Michael C. Widmer		Date of Receipt
	Mailing Address 2753 Northeast Red Oak Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2008
	City	State	Zip Code
	Bend	OR	97701-8348
	FEC ID number of contributing federal political committee. C		Transaction ID: 75749a8b6e45438c9193
Name of Employer Heart Center Cardiology		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 2250.00	

B.	Full Name (Last, First, Middle Initial) Michael C. Widmer		Date of Receipt
	Mailing Address 2753 Northeast Red Oak Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 19 / 2008
	City	State	Zip Code
	Bend	OR	97708-6419
	FEC ID number of contributing federal political committee. C		Transaction ID: 821d6064abb04f75a095
Name of Employer Heart Center Cardiology		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 2250.00	

C.	Full Name (Last, First, Middle Initial) Joseph N. Wight		Date of Receipt
	Mailing Address 11 Ironclad Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 08 / 2008
	City	State	Zip Code
	Cape Elizabeth	ME	04107-1902
	FEC ID number of contributing federal political committee. C		Transaction ID: 4e7b075c9c2c49f79cf1
Name of Employer Self-Employed		Occupation ADULT CARDIOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 69
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Edward G. Williams

Mailing Address 1317 Morris Avenue

City State Zip Code
Union NJ 07083-3309

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

Name of Employer Occupation
Union County Cardiology Associates, PA ADULT CARDIOLOGY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: fb6280f4cf5547958fad

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
William T. Witmer

Mailing Address 1485 Bradbury Court

City State Zip Code
Green Bay WI 54313-9351

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

Name of Employer Occupation
Aurora BayCare Medical Center ADULT CARDIOLOGY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2008

Transaction ID: 8856b586e69641cbbc3a

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Richard F. Wright

Mailing Address 1038 South Carmelina Avenue
2001 Santa Monica Boulevard

City State Zip Code
Los Angeles CA 90404-2172

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

Name of Employer Occupation
Pacific Heart Institute ADULT CARDIOLOGY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2008

Transaction ID: ccaef4e1db4043e48824

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) Janet F. Wyman		Date of Receipt MM / DD / YYYY 09 / 17 / 2008
Mailing Address 960 Westchester		Transaction ID: 45ed4513f7fa4b32a51c
City Grosse Pointe Park	State MI Zip Code 48230-1830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Henry Ford Hospital	Occupation CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Kevin R. Young		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 1917 E Rosedown Drive		Transaction ID: e33a2fa477b9472ca9d5
City Lake Charles	State LA Zip Code 70601-5727	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cardiovascular Specialist- sof Southwest	Occupation ADULT CARDIOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	65091.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 61 / 69	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) American College of Cardiology - Admin Account		Date of Receipt																					
	Mailing Address P.O. Box 85024		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		1	6		2	0	0	8														
	City State Zip Code Richmond VA 23285-5024		Transaction ID: 4413533377a32ce8af4																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 560.96																					
Name of Employer Occupation		Reimburse for Aug. Amex and Sep. Merchant Fees																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3903.12																						

SUBTOTAL of Receipts This Page (optional)	▶	560.96
TOTAL This Period (last page this line number only)	▶	560.96

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 69
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) McConnell Senate Committee '08		Date of Receipt
Mailing Address PO Box 1496		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
City	State	Zip Code
Louisville	KY	40201
FEC ID number of contributing federal political committee.		Transaction ID: 90510-69866579771042
<input type="checkbox"/> C C00193342		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2500.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement September Amex Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V0ee75d3cc88ff0d16d5 Date of Disbursement 09 / 30 / 2008 Amount of Each Disbursement this Period 503.12 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Merchant Services Mailing Address 7300 Chapman Hwy City Knoxville State TN Zip Code 37920 Purpose of Disbursement Sept. Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: M7767174034b3dc47b2b Date of Disbursement 09 / 03 / 2008 Amount of Each Disbursement this Period 15.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) SunTrust Merchant Services Mailing Address PO Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Sept. Merchant Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V62be5f15073f94ccb22 Date of Disbursement 09 / 10 / 2008 Amount of Each Disbursement this Period 339.93 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

858.05

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 64 / 69

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Transaction ID: M579f1e44205eaf47d4c

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	0	8

Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City Knoxville State TN Zip Code 37920

Amount of Each Disbursement this Period

58.24

Purpose of Disbursement
Sept. Merchant Fees

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

58.24

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

916.29

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Becerra for Congress</p> <p>Mailing Address PO Box 261060</p> <p>City Los Angeles State CA Zip Code 90026</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Xavier Becerra</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 695941e5ed03fda86ea Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Bill Posey</p> <p>Mailing Address 1824 South Fiske Boulevard</p> <p>City Rockledge State FL Zip Code 32955</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Bill Posey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 15</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: b807a23921562df064a Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Rosa DeLauro</p> <p>Mailing Address 12 Trumbull Street</p> <p>City New Haven State CT Zip Code 06511</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Rosa L. DeLauro</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: e3adf738f84065ae670 Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Hoyer for Congress <hr/> Mailing Address 4201 Northview Dr, Ste 307 <hr/> City Bowie State MD Zip Code 20716 <hr/> Purpose of Disbursement 2008 General Candidate Name Steny H. Hoyer <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 200ad8b6c43b0d7b69d Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jay Love for Congress <hr/> Mailing Address 1020 Monticello Court, Suite 205 <hr/> City Montgomery State AL Zip Code 36117 <hr/> Purpose of Disbursement 2008 General Candidate Name Jay Love, Jr. <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8b11f8243d16435b893 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Larson for Congress <hr/> Mailing Address 29 Ruff Circle <hr/> City Glastonbury State CT Zip Code 06033 <hr/> Purpose of Disbursement 2008 General Candidate Name John B. Larson <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: fb1df878a73ba14efb7 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Matsui for Congress Mailing Address PO Box 1738 City Sacramento State CA Zip Code 95812 Purpose of Disbursement 2008 General Candidate Name Doris Matsui Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: efc3a309387fc373af2 Date of Disbursement 09 / 12 / 2008
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PAC To the Future Mailing Address Pmb 3230 268 Bush Street City San Francisco State CA Zip Code 94104 Purpose of Disbursement 2008 Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 6dab276dc2b9f9cad51 Date of Disbursement 09 / 12 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) People for English Mailing Address PO Box 1940 City Erie State PA Zip Code 16507 Purpose of Disbursement 2008 General Candidate Name Phil English Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 88ac2c7b9272974e0eb Date of Disbursement 09 / 12 / 2008
	Amount of Each Disbursement this Period 2500.00
	Category/Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Putnam for Congress</p> <p>Mailing Address Post Office Box 2257</p> <p>City Bartow State FL Zip Code 33831</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Adam H. Putnam</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 12</p>	<p>Transaction ID: 0d83ce3e3718f80a7c8</p> <p>Date of Disbursement MM / DD / YYYY 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Stupak for Congress</p> <p>Mailing Address 817 Ninth Avenue PO Box 156</p> <p>City Menominee State MI Zip Code 49858</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Bart Stupak</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 01</p>	<p>Transaction ID: 4de3baf458f223785ef</p> <p>Date of Disbursement MM / DD / YYYY 09 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Udall for Colorado</p> <p>Mailing Address PO Box 40158</p> <p>City Denver State CO Zip Code 80204</p> <p>Purpose of Disbursement 2008 General</p> <p>Candidate Name Mark E. Udall</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District:</p>	<p>Transaction ID: 8f27f41147df2dfa6f0</p> <p>Date of Disbursement MM / DD / YYYY 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Walden for Congress <hr/> Mailing Address PO Box 1091 <hr/> City Hood River State OR Zip Code 97031 <hr/> Purpose of Disbursement 2008 General Candidate Name Greg P. Walden <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 328af1ea13d20290546 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wolverine PAC <hr/> Mailing Address 607 14th Street NW Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2008 Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 5d5351b71a4d9c4630a Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

39000.00