Image# 13961612761 PAGE 1 / 43

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIW 3X	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	g, type 12FE4M5
American Society of	Anesthesiologists Poli	tical Action Comr	nittee
ADDRESS (number and street)	520 N. Northwest Highway		
Check if different			
than previously reported. (ACC)	Park Ridge		IL 60068 -
2. FEC IDENTIFICATION	NUMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00255752		S THIS NE	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:		Aug 20 (M8) Nov 20 (M8) Nov 20 (M8) Nov 20 (M8) Nov 20 (M9) Nov 20
(a) Quarterly Reports:			In 20 (M6) Sep 20 (M9) Dec 20 (Mon-Election Year Only) Il 20 (M7) Oct 20 (M10) Jan 31 (Y
April 15 Quarterly Report	t (Q1)		
July 15 Quarterly Report	t (Q2) (C) 12-Day	Primary (12P)	General (12G) Runoff (12
October 15 Quarterly Report	Report for the:	Convention (12	2C) Special (12S)
January 31 Year-End Report	t (YE)	on on	in the State of
July 31 Mid-Yea Report (Non-elec Year Only) (MY)	ction (d) 30-Day	General (30G)	Runoff (30R) Special (30
Termination Rep (TER)	oort Electi	on on	in the State of
5. Covering Period	01 01 2013	through	01 31 2013
I certify that I have examined	d this Report and to the best o	f my knowledge and be	elief it is true, correct and complete.
Type or Print Name of Treas	urer Mr. Thomas Conway		
Signature of Treasurer $\frac{M}{-}$	1r. Thomas Conway	[Electronically I	Filed] Date 04 15 2013
NOTE: Submission of false, en	roneous, or incomplete information	on may subject the perso	on signing this Report to the penalties of 2 U.S.C. §437
Office Use			FEC FORM 3X Rev. 12/2004
Only		1 1	

Г	OF FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
V	Vrite or Type Committee Name		
/	American Society of Anesthesiologist	ts Political Action Committee	
R	Report Covering the Period: From: 01	/ 01 / 2013 To:	01 31 / 2013
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		1716551.51
	(b) Cash on Hand at Beginning of Reporting Period	1716551.51	
	(c) Total Receipts (from Line 19)	73366.73	73366.73
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1789918.24	1789918.24
7.	Total Disbursements (from Line 31)	60725.98	60725.98
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1729192.26	1729192.26
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 multicandi	idate committee. (see FEC FORM 1M)	
	Fo	r further information contact:	
	ı	Federal Election Commission 999 E Street, NW	

Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Society of Anesthesiologists Political Action Committee

butions (other than loans) From: ndividuals/Persons Other Than Political Committees i) Itemized (use Schedule A)	39025.00	39025.00
han Political Committees	39025.00	20005.00
	39025.00	20005.00
t) Itemized (use Schedule A)	39023.00	
		33023.00
ii) Unitemized	29341.73	29341.73
iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	68366.73	68366.73
Political Party Committees	0.00	0.00
	0.00	0.00
	7	
	68366.73	68366.73
Committees	0.00	0.00
ans Received	0.00	0.00
	0.00	
· ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	0.00	0.00
	5000.00	5000.00
	3000.00	000000
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	0.00	0.00
	0.00	0.00
		0.00
evin Funds (from Schedule H5)	0.00	0.00
viii i unus (iioiii Goriedale 110)		
tal Transfers (add 18(a) and 18(b))	0.00	0.00
		Lines 11(a)(i) and (ii)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period					
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date				
	(i) Federal Share	0.00	0.00				
	(ii) Non-Federal Share	0.00	0.00				
	(b) Other Federal Operating						
	Expenditures	1225.98	1225.98				
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1225.98	1225.98				
22.	Transfers to Affiliated/Other Party						
3.	Committees Contributions to	0.00	0.00				
	Federal Candidates/Committees and Other Political Committees	34500.00	34500.00				
24.	Independent Expenditures (use Schedule E)	0.00	0.00				
25.	Coordinated Party Expenditures (2 U.S.C. §441a(d))	7 7 7					
	(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	0.00				
	(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	0.00				
29.	Other Disbursements	25000.00	25000.00				
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
	(from Schedule H6)						
	(i) Federal Share	0.00	0.00				
	(ii) "Levin" Share	0.00	0.00				
	(b) Federal Election Activity Paid Entirely						
	With Federal Funds	0.00	0.00				
	(c) Total Federal Election Activity (add 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))	60725.98	60725.98				
32.	Total Federal Disbursements						
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	22727.22	00705.00				
	from Line 31)	60725.98	60725.98				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
33. Total Contributions (other than loans) (from Line 11(d), page 3)	68366.73	68366.73				
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	68366.73	68366.73				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1225.98	1225.98				
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
88. Net Operating Expenditures (subtract Line 37 from Line 36)	1225.98	1225.98				

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

FOR LINE NOMIC (check only one)

FOR LINE NUMBER:						PAGE		6	OF		43	
(check only one)												
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		13		14		15		16	,		17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Sivasenthil Arumugam M.D. Date of Receipt Mailing Address 114 Woodland St 25 2013 City State Zip Code Transaction ID: C1913461 CT 06105-1208 Hartford Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation anesthesiologist Woodland Anesthesiology Assoc. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark J Baade D.O. Date of Receipt Mailing Address 11530 Hidden Spring Trail 01 02 2013 City State Zip Code Transaction ID: C1890790 MI 48820 Dewitt Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. Name of Employer Ingham Regional Medical Center Receipt For: Primary General Other (specify)	Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 250.00	250.00
Full Name (Last, First, Middle Initial) Leah Baron M.D. Mailing Address 48 Cardinal Ridge Rd City Medford FEC ID number of contributing federal political committee.	State Zip Code NJ 08055-8322	Date of Receipt 01 17 2013 Transaction ID : C1904327 Amount of Each Receipt this Period
Name of Employer American Anesthesiology,Burlington Ane Receipt For: Primary General Other (specify)	Occupation physician Aggregate Year-to-Date ▼ 250.00	
		1000.00

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

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

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for each category of the Detailed Summary Page	X 1	I1a		11b		11c		12	
,,	1	13		1/		15		16	

43

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	:
Full Name (Last, First, Middle Initial) John Patrick F. Bebawy M.D. Mailing Address 157 Kenilworth Ave City Kenilworth FEC ID number of contributing federal political committee. Name of Employer Northwestern Memorial Hospital Anesthe Receipt For: Primary General Other (specify)	State Zip Code IL 60043-1240 C Occupation Anesthesiologist Aggregate Year-to-Date ▼	Date of Receipt 01 29 2013 Transaction ID: C1917719 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Jeffrey S. Berger M.D., M.B. Mailing Address 900 23rd St. NW Suite G-209 City Washington FEC ID number of contributing federal political committee. Name of Employer Medical Faculty Associates Receipt For: Primary General Other (specify) The Address 900 23rd St. NW Suite G-209 Gity General	State Zip Code DC 20037 C Occupation Associate Professor of Anesthesiology Aggregate Year-to-Date 500.00	Date of Receipt O1 23 2013 Transaction ID : C1910520 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) John J. Breth M.D. Mailing Address 5348 West 100th street City Overland Park FEC ID number of contributing federal political committee. Name of Employer Anesthesiology Chartered Receipt For: Primary General Other (specify)	State Zip Code KS 66207 C Occupation anesthesiologist Aggregate Year-to-Date ▼	Date of Receipt O1 20 2013 Transaction ID: C1905377 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)	

Use separate schedule(s) for each category of the

	R LINE	PAGE	=	8	OF	43			
(che	ck only	or	ne)						
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Detailed Summary Page 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 Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Cameron E. Burrup M.D. Date of Receipt Mailing Address 5135 Pebble Road NW 2013 16 City Zip Code State Transaction ID: C1899805 NM Albuquerque 87114 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Medical Doctor Anesthesia Associates of New Mexico Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Asokumar Buvanendran M.D. Date of Receipt Mailing Address 45 E Birchwood Ave 01 31 2013 City State Zip Code Transaction ID: C1918850 Hinsdale IL 60521-2802 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Rush University Medical College Anes. Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian M. Cadre M.D. Date of Receipt Mailing Address 3019 N Huntington Dr 2013 01 26 State Zip Code Transaction ID: C1913512 IL Arlington Heights 60004-1638 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Physician Northwest Suburban Anesth., Ltd. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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	13		14		15	16	,	17	

NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	9
Full Name (Last, First, Middle Initial) Marino Camaioni M.D. Mailing Address 9317 S. Alder Dr.		Date of Receipt
City	State Zip Code	01 26 2013
Tempe	AZ 85284-3367	Transaction ID : C1913542 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer	Occupation	
self-employed Receipt For:	physician	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Curtis A. Carl M.D.		Date of Receipt
Mailing Address Sparrow Professional Buildin 1200 E. Michigan Ave	ng, Sui	01 02 2013
City	State Zip Code	Transaction ID : C1890789
Lansing	MI 48912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Physician Anesthesia Service	Occupation ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Wei Chao M.D.		Date of Receipt
Mailing Address 583 Kamoku Street Apt 3807		01 26 2013
City Honolulu	State Zip Code HI 96826	Transaction ID : C1913531 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
self Receipt For:	anesthesiologist	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	b	725.00

SCHEDULE A (FEC Form 3X)

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

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Jeffrey M. Clark M.D. Mailing Address 520 Vernon Dr., S.E. City Cedar Rapids FEC ID number of contributing federal political committee. Name of Employer LINN CTY ANESTH Receipt For: Primary General Other (specify)	State Zip Code IA 52403 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 250.00	Date of Receipt O1 08 2013 Transaction ID: C1897482 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mark A. Cook D.O. Mailing Address Physician Anes. Service 1200 E. Michigan Ave.,#370 City Lansing FEC ID number of contributing federal political committee. Name of Employer Physician Anes. Service Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 48912-1812 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼	Date of Receipt 01 02 2013 Transaction ID : C1890788 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Jeffrey F. Croy M.D. Mailing Address P.O. Box 3218 City Albany FEC ID number of contributing federal political committee. Name of Employer Albany Anesthesia, P.C. Receipt For: Primary General Other (specify)	State Zip Code OR 97321-0708 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 1000.00	Date of Receipt O1 29 2013 Transaction ID: C1914493 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	only)	

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

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Mark D'Agostino M.D. Date of Receipt Mailing Address 8714 Woolworth Ave 2013 City Zip Code State Transaction ID: C1917741 ΝE Omaha 68124 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation nebraska methodist hospital anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. David F. Davis III, M.D. Date of Receipt Mailing Address 4242 Medical Dr., Suite #3100 Tejas Anesthesia 2013 01 02 City State Zip Code Transaction ID: C1890767 TX San Antonio 78229-5642 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Tejas Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sandy R. Dillard M.D. Date of Receipt Mailing Address 1175 Rutland Court 01 23 2013 City Zip Code State Transaction ID: C1910678 KS Wichita 67206 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Consulting Services anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Mark A. Eggen M.D. Date of Receipt Mailing Address 5980 Robin Oak Ct 2013 City Zip Code State Transaction ID: C1900397 MN Saint Paul 55126-9122 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Metropolitan Anesthesia Network physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Tate J. Egger D.O. Date of Receipt Mailing Address 4916 Sugar Bush Ln 2013 01 02 City State Zip Code Transaction ID: C1890787 MI Holt 48842-1946 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Imu A. Esmail M.D. Date of Receipt Mailing Address 13200 Primrose Ln 02 2013 01 City State Zip Code Transaction ID: C1890773 MI Dewitt 48820-8164 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER	: PAGE	= 13 OF	•
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for each category of the Detailed Summary Page	X 11a	11b	11c	12	
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Any information copied from such Reports and or for commercial purposes, other than using	nd Statements may not be sold or used by any per g the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthe	esiologists Political Action Committe	e
Full Name (Last, First, Middle Initial) John D. Everett M.D.		Date of Receipt
Mailing Address 3814 Hemmingway Dr		01 02 2013
City	State Zip Code	Transaction ID : C1890785
Okemos	MI 48864-3835	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	+
Physician Anesthesia Service, P.C.	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real-to-Date ¥	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Lisa C. W. Ferguson M.D.		Date of Receipt
Mailing Address 4111 Heritage Trl		01 20 2013
City	State Zip Code	Transaction ID : C1905381
Terre Haute	IN 47803-1368	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	1
self	consultant	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	Aggregate real-to-Date •	
Full Name (Last, First, Middle Initial)		
C. Victor S. Ferguson M.D.		Date of Receipt
Mailing Address 4111 Heritage Trl		01 20 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C1905378
Terre Haute	IN 47803-1368	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
self	consultant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optiona	l)	2250.00
TOTAL This Period (last page this line num	her only)	

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

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Terry Fletcher M.D. Date of Receipt Mailing Address 800 Marshall St., #203 2013 31 City Zip Code State Transaction ID: C1919036 AR Little Rock 72202-3591 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Arkansas Childrens Hospital Pediatric Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wayne M. Fong MD M.D. Date of Receipt Mailing Address 630 1st Ave Apt 27H 01 27 2013 City State Zip Code Transaction ID: C1913563 NY New York 10016 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Park Slope Anesthesia Associates, P.C. MEDICAL DOCTOR ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael C. Garbaccio M.D. Date of Receipt Mailing Address 1200 E Michigan Ave Ste 370 01 02 2013 City State Zip Code Transaction ID: C1890784 MI Lansing 48912-1897 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Anesthesia Service **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 15 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Rajeev Garg M.D. Date of Receipt Mailing Address 112 W Wild Cherry Dr 2013 29 City State Zip Code Transaction ID: C1917746 PΑ Mars 16046-4048 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation University of Pittsburgh Medical Cente Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Grant K. Gillen M.D. Date of Receipt Mailing Address 266 Walnut St 01 26 2013 City State Zip Code Transaction ID: C1913524 **New Orleans** LA 70118-4832 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **PMC** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lawrence H. Goldstein M.D. Date of Receipt Mailing Address 260 W Peachtree St 01 28 2013 City State Zip Code Transaction ID: C1914488 GA Norcross 30071-2053 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Gwinnett Anesthesia Service Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

FEC Schedule A (Form 3X) Rev. 02/2003

1250.00

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

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

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Use separate schedule(s) for each category of the Detailed Summary Page	check only one	′ —	11c	12	¬
	13 1	4	15 I	116	117

	Statements may not be sold or used by any pers name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesi	iologists Political Action Committee	
Full Name (Last, First, Middle Initial) Robert B. Goldstein M.D. Mailing Address 3470 Devon Pnes City Keswick FEC ID number of contributing federal political committee. Name of Employer University of Virginia Receipt For: Primary General Other (specify)	State Zip Code VA 22947-9175 C Occupation physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Leonid I. Gorelik M.D. Mailing Address 1200 E. Michigan Ave., Ste. City Lansing FEC ID number of contributing federal political committee. Name of Employer Physian Anesthesia Service Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MI 48912 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt O1
Full Name (Last, First, Middle Initial) James M. Green M.D. Mailing Address 734 Lindwood Dr City Greensburg FEC ID number of contributing federal political committee. Name of Employer Westmoreland Regional Hospital Receipt For: Primary General Other (specify)	State Zip Code PA 15601-7711 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M / 27 2013 Transaction ID : C1913583 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	•	1000.00
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Alina M Grigore M.D. Date of Receipt Mailing Address 8 Deep Run Ct 2013 28 City Zip Code State Transaction ID: C1913601 MD 21030-1600 Cockeysville Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of Maryland Medical School Cardiovascular Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Francisco Grinberg M.D. Date of Receipt Mailing Address 41 Pinnacle Dr 01 31 2013 City State Zip Code Transaction ID: C1918851 VT South Burlington 05403-7914 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation UVM MD- Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian C. Hales M.D. Date of Receipt Mailing Address 204 N 2350 E 01 29 2013 City Zip Code State Transaction ID: C1915855 UT Layton 84040-3101 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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 Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) David A. Heaton M.D. Date of Receipt Mailing Address 4694 N. Rocky Crest Place 2013 City Zip Code State Transaction ID: C1898472 Tucson ΑZ 85750 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Southern Arizona Anesthesia anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nancy W. High M.D. Date of Receipt Mailing Address 1390 Lake Josephine Dr. 01 24 2013 City State Zip Code Transaction ID: C1911778 FL Sebring 33875-6410 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Florida Hospital Heartland Medical Cen Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Glen E. Holley M.D. Date of Receipt Mailing Address 2104 Peninsula Dr. 2013 01 17 City Zip Code State Transaction ID: C1902367 TX Flower Mound 75022 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Pinnacle Anesthesia Consultants Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1800.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full)		
American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Hobson W. Hornbuckle Jr.,M.D. Mailing Address 490 Harrison Rd		Date of Receipt
		01 23 2013
City	State Zip Code	Transaction ID: C1910516
Roebuck	SC 29376	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
spartanburg regional	anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. Ryan Hulver D.O.		Date of Receipt
Mailing Address 3719 S Atlanta PI		M M / D D / Y Y Y Y
City	State Zip Code	01 30 2013 Transaction ID : C1918451
Tulsa	OK 74105-3526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hillcrest Medical Center Anesthesia	Occupation Apacthosis logist	
Receipt For:	Angregate Veer to Date W	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Anthony larussi M.D.		Date of Receipt
Mailing Address 1438 Dyer Ave		01 16 2013
City	State Zip Code	Transaction ID : C1900393
Cincinnati	OH 45230-2703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Anesthesia Group Practice Bethesda Nor	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Jeffrey M. Jekot M.D. Date of Receipt Mailing Address 3804 Woodcutters Way 2013 27 City State Zip Code Transaction ID: C1913584 TX Austin 78746-1543 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **MEDNAX** physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph J. Kochan III, M.D. Date of Receipt Mailing Address 1200 E Michigan Ave Ste 370 01 02 2013 City State Zip Code Transaction ID: C1890782 MI Lansing 48912-1897 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician Anesthesia Service, P.C. **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael G. Krogulecki D.O. Date of Receipt Mailing Address 1200 E. Michigan Ave., #370 02 2013 01 City Zip Code State Transaction ID: C1890780 MI Lansing 48912 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Anesthesia Service **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	iologists Political Action Committe	ee
Full Name (Last, First, Middle Initial) Charles B. Levine M.D. Mailing Address 755 Oakwood Dr. City Red Lion FEC ID number of contributing federal political committee. Name of Employer Anesthesia Associates of York, PA Receipt For: Primary General Other (specify)	State Zip Code PA 17356-9093 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt O1 27 2013 Transaction ID : C1913581 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Wenshu Liu M.D. Mailing Address 1783 Elk Ln. City Okemos FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify)	State Zip Code MI 48864 C Occupation Anesthesiologist Aggregate Year-to-Date ▼	Date of Receipt 01 02 2013 Transaction ID : C1890779 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Alys L. Long D.O. Mailing Address 5401 Billwood Hwy City Potterville FEC ID number of contributing federal political committee. Name of Employer Ingham Regional Med Ctr Receipt For: Primary General Other (specify)	State Zip Code MI 48876-8735 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 250.00	Date of Receipt 01 02 2013 Transaction ID: C1890793 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		750.00
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FOR LINE NUMBER: PAGE 22 OF 43 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Katarzyna Luba M.D. Date of Receipt Mailing Address University of Chicago Dept.of Anes 5841 S. Maryland Ave Box 4028 2013 31 City Zip Code State Transaction ID: C1918846 Chicago IL 60637 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation University of Chicago physician anesthesiolgist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jason P. Lujan M.D. Date of Receipt Mailing Address 3626 Ruffin Rd 01 26 2013 City State Zip Code Transaction ID: C1913533 CA San Diego 92123-1810 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesia Service Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maria J. Mack M.D. Date of Receipt Mailing Address 7514 91st Ave SW 2013 01 26 City Zip Code State Transaction ID: C1913535 WA Tacoma 98498-3941 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation St. Joseph Med. Ctr. anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Randall J. Malchow B.S., M.D. Date of Receipt Mailing Address 9137 Concord Hunt Cir 2013 City Zip Code State Transaction ID: C1898443 TN Brentwood 37027-8762 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Vanderbilt University Med Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael J. Marcovitz M.D. Date of Receipt Mailing Address 4483 Ford Rd. 01 09 2013 City State Zip Code Transaction ID: C1897973 MI Ann Arbor 48105 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Ann Arbor, P. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wayne K. Marshall M.D. Date of Receipt Mailing Address 691 Olde Ventura Farm Rd 2013 01 27 City Zip Code State Transaction ID: C1913545 PΑ Hummelstown 17036-8501 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Riverside Anesthesia Associates, Ltd. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Alfred J. Martello M.D. Date of Receipt Mailing Address 4912 Nobles Pond Dr. NW 2013 26 City Zip Code State Transaction ID: C1913519 OH Canton 44718-3808 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Ohio Anesthesia Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Veronica L. Massey M.D. Date of Receipt Mailing Address 11811 Shire Wycliffe Ct. 01 21 2013 City State Zip Code Transaction ID: C1905510 FL Tampa 33626-3330 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Florida Gulf To Bay Anesthesiology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Jerry S. Matsumura M.D. Date of Receipt Mailing Address 18124 Wedge Parkway, Suite 232 01 25 2013 City Zip Code State Transaction ID: C1913487 NV Reno 89511-8134 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation self physican Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) Jason S. Mitchell M.D. Mailing Address 1748 Primrose Lane		Date of Receipt
		01 29 2013
City	State Zip Code	Transaction ID : C1914526
Glenview	IL 60026-7766	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
northshore university healthsystem	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) John S. Mitchell M.D.		Date of Receipt
Mailing Address 1200 E Michigan Ave Ste 3		M = M / D = D / Y = Y = Y
1200 E Michigan Ave Ste 3	State Zip Code	01 02 2013 Transaction ID : C1890791
Lansing	MI 48912-1897	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Physcian Anesthesia Service	Medical Doctor	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Partha S. Mookerjee M.D.		Date of Receipt
Mailing Address 1200 E Michigan Ave Ste		01 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lansing	State Zip Code MI 48912-1897	Transaction ID : C1890778
	40312-103/	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Physician Anesthesia Service, PC	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) Robert R. Morrison M.D. Mailing Address FROM Science Last Reints		Date of Receipt
Mailing Address 5801 Spinnaker Pointe		01 07 2013
City	State Zip Code	Transaction ID : C1896326
Parkville	MO 64152-6102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Ad Vivum Anesthesiology, P.C.	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ajay Nath M.D.	•	Date of Receipt
Mailing Address 23 Barclay Ct.		01 27 _2013 _
City	State Zip Code	Transaction ID : C1913546
Somerset	NJ 08873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Anesthesia Consultants of NJ	Occupation	-
Receipt For:	Anesthesiologist	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Krystof J. Neumann M.D.		Date of Receipt
Mailing Address 8 Country View Ter		01 20 2013
City Brockport	State Zip Code NY 14420	Transaction ID : C1905363
 		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
University of Rochester Medical Center	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Daniel G. Nicoli M.D. Date of Receipt Mailing Address 5540 Tanglewood Dr. 2013 26 City Zip Code State Transaction ID: C1913513 48105-9549 Ann Arbor MI Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Ann Arbor Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew P. Norcia M.D. Date of Receipt Mailing Address 11100 Euclid Ave Bolwell Suite 2400 01 24 2013 City State Zip Code Transaction ID: C1911218 OH Cleveland 44106-1716 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation University Hospitals of Cleveland physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. William C. Nordlie M.D. Date of Receipt Mailing Address 12067 N 135th Way 30 01 2013 City State Zip Code Transaction ID: C1918448 ΑZ Scottsdale 85259-3653 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Valley Anes. Consultants, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) Michael O'Connor D.O., M.P. Mailing Address 2388 Lalemant Rd		Date of Receipt
City University Heights FEC ID number of contributing federal political committee.	State Zip Code OH 44118	01 23 2013 Transaction ID : C1909395 Amount of Each Receipt this Period 250.00
Name of Employer Cleveland Clinic Receipt For: Primary General Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) John J. Olson M.D. Mailing Address 1808 Yahara Pl City	State Zip Code	Date of Receipt 01 26 2013 Transaction ID : C1913511
Madison FEC ID number of contributing federal political committee. Name of Employer	WI 53704-5557 C Occupation	Amount of Each Receipt this Period 500.00
Madison Anesthesiology Consultants Receipt For: Primary General Other (specify) ▼	Anesthesiologist Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Udaya Padakandla M.B. Mailing Address 4449 Young Dr. City Carrollton	State Zip Code TX 75010-1145	Date of Receipt O1 19 2013 Transaction ID : C1905362
FEC ID number of contributing federal political committee. Name of Employer Pinnacle Anesthesia Consultants Receipt For: Primary General Other (specify)	C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 250.00
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personal he name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	e
Full Name (Last, First, Middle Initial) A. Edelberto C. Perez M.D. Mailing Address 5322 N Magnolia Ave		Date of Receipt
		01 29 2013
City	State Zip Code	Transaction ID : C1917737
Chicago	IL 60640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Lutheran General Hospital	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼]
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Patricia M. Perry M.D.		Date of Receipt
Mailing Address 257 Bartram Rd		01 31 2013
City	State Zip Code	Transaction ID : C1918873
Riverside	IL 60546-1886	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rush University Anesthesiologists	Occupation	-
Receipt For:	Physician	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. William P. Peterson M.D.	1	Data of Bassist
Mailing Address 3704 Fairhills Dr.		Date of Receipt 01 02 2013
City	State Zip Code	Transaction ID: C1890794
Okemos	MI 48864	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
PHYS ANES SERV	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
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NAME OF COMMITTEE (In Full)		
American Society of Anesthesio	logists Political Action Committee	
Full Name (Last, First, Middle Initial) Thomas J. Petrou M.D.		Date of Receipt
Mailing Address 5105 Madison Ave Apt B2		01 02 2013
City	State Zip Code	Transaction ID : C1890795
Okemos	MI 48864-5125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Jacqueline Poleet M.D.		Date of Receipt
Mailing Address 107 Sezanne Ct.		01 22 2013
City	State Zip Code	Transaction ID : C1907068
Little Rock	AR 72223	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Little Rock Anesthesia Services	Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Hugh M. Pratt M.D.		Date of Receipt
Mailing Address 124 Point Fosdick Circle, NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C1913537
Gig Harbor	WA 98335-7818	Amount of Each Receipt this Period
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Rainier Anesthesia Assoc.	Anesthesiologist	
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Primary General Other (specify) ▼	250.00	
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Jaroslaw Przybyl M.D. Date of Receipt Mailing Address 25W274 Salem Ave. 2013 31 City State Zip Code Transaction ID: C1918454 Naperville IL 60540 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Edward Hospital Dept. of Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Martin Read M.D. Date of Receipt Mailing Address PO Box 7507 01 26 2013 City State Zip Code Transaction ID: C1913516 CO Colorado Springs 80933-7507 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Pikes Peak Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cody Reeves M.D. Date of Receipt Mailing Address 540 Jordan St 01 25 2013 City Zip Code State Transaction ID: C1913459 CA Nevada City 95959-2718 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Sierra Nevada Memorial Hospital Dept. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthe	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) George F. Rich M.D. Mailing Address Anesthesia Department Box 800710 City Charlottesville FEC ID number of contributing federal political committee. Name of Employer University of Virginia Health Sciences Receipt For: Primary General Other (specify)	State Zip Code VA 22908-0710 C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ 250.00	Date of Receipt 01 30 2013 Transaction ID: C1917772 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) James Rinando ,PACBuilde Mailing Address 3502 Yupon St. City Houston FEC ID number of contributing federal political committee. Name of Employer Select Anesthesia Services Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 77006 C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt 01 08 2013 Transaction ID: C1897483 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Melanie J. Robinson-Woodard Mailing Address 4060 Springer Way Apt 18 City East Lansing FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify)		Date of Receipt O1
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists P	olitical Action Committe	ee
Full Name (Last, First, Middle Initial) David M. Rothenberg M.D. Mailing Address 861 Kimball Rd City Highland Park FEC ID number of contributing federal political committee. Name of Employer Rush University Medical Center Receipt For: Primary General Other (specify)	State IL C Occupation Physician Aggregate	Zip Code 60035-3618 Year-to-Date ▼	Date of Receipt O1 31 2013 Transaction ID: C1918467 Amount of Each Receipt this Period 500.00
B. Brian C. Schander M.D. Mailing Address 2624 Winter Park Dr.			Date of Receipt
City Naperville FEC ID number of contributing	State IL	Zip Code 60565	O1 02 2013 Transaction ID : C1890768 Amount of Each Receipt this Period
federal political committee. Name of Employer DUPAGE VALLEY ANES Receipt For: Primary General Other (specify) ▼	Occupation ANESTHES Aggregate		250.00
Full Name (Last, First, Middle Initial) C. Thomas F. Slaughter M.D.			Date of Receipt
Mailing Address Depatment of Anesthesiolo Medical Center Boulevard City Winston-Salem	State NC	Zip Code 27157-1009	01 17 2013 Transaction ID : C1902197 Amount of Fool Propint this Period
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 250.00
Name of Employer Wake Forest School of Medicine	Occupation Physician	1	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Gail L. Smith M.D. Date of Receipt Mailing Address 6875 Ann Arbor Saline Rd. 02 2013 City Zip Code State Transaction ID : C1890792 Saline MI 48176 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Physician Anesthesia Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark D. Snyder M.D. Date of Receipt Mailing Address 1116 E Republic Circle 01 26 2013 City State Zip Code Transaction ID: C1913520 KS Salina 67401 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Central KS Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jose R. Soberon M.D. Date of Receipt Mailing Address 2909 Ridgeway Dr 01 29 2013 City State Zip Code Transaction ID: C1914495 LA Metairie 70002-1832 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Ochsner Clinic Foundation Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) P. Greg St. Claire M.D. Date of Receipt Mailing Address 3049 Summergate Lane 02 2013 City Zip Code State Transaction ID: C1890776 Okemos MI 48864-5919 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Physician Anesthesia Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Aimee D. Stotz D.O. Date of Receipt Mailing Address 5079 W. Catalpa 01 30 2013 City State Zip Code Transaction ID: C1918877 IL Chicago 60630 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Consultants, Ltd. **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Damon A. Templeton M.D. Date of Receipt Mailing Address 3507 Lakestone Ct. 01 29 2013 City State Zip Code Transaction ID: C1917736 GA Martinez 30907 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Consultants of Augusta, LLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Dan-Thuy Tran M.D. Date of Receipt Mailing Address 300 2nd Ave., Anes. Dept. 2013 24 City Zip Code State Transaction ID: C1911776 Long Branch NJ 07740-6303 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Monmouth Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jason C. Tratechaud D.O. Date of Receipt Mailing Address 3653 Lake Vista Court 01 02 2013 City State Zip Code Transaction ID: C1890775 MI Milford 48327 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kenneth J. Tuman M.D. Date of Receipt Mailing Address 1325 Hackberry Ln 01 31 2013 City State Zip Code Transaction ID: C1919531 IL Winnetka 60093-1607 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Rush University Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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 Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Tamim A. Wafa M.D. Date of Receipt Mailing Address 2700 Acapulco Way 2013 26 City State Zip Code Transaction ID: C1913515 CA Modesto 95355 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Sutter Gould Foundation Dept of Anesth Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Harper R. Ward M.D. Date of Receipt Mailing Address 2300 Belleview Ter 01 16 2013 City State Zip Code Transaction ID: C1899763 OK Oklahoma City 73112-7741 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Harper R Ward MD PLLC Attending Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brian J. West M.D. Date of Receipt Mailing Address 407 W. Springs Meadows Lane 02 2013 01 City State Zip Code Transaction ID: C1890774 MI Dewitt 48820 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional).....

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Full Name (Last, First, Middle Initial) James K. Whitaker M.D. Mailing Address 1791 Kerr Gulch Road	Date of Receipt	
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Evergreen	State Zip Code CO 80439	Transaction ID : C1890769 Amount of Each Receipt this Period
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Full Name (Last, First, Middle Initial) A. BERA 2012 VICTORY FUND			Date of Receipt
Mailing Address 5429 MADISON AVENUE			0,1 23 2013
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 42 OF 43
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only	one) 22 🗙 23 🔲 24 📗 25 📗 26
Any information copied from such Deposits and Obstantia	conto mou not be cald as a	27	28a 28b 28c 29 3
Any information copied from such Reports and States or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	ists Political Action	Committee	•
Full Name (Last, First, Middle Initial)			
A. SCHOCK FOR CONGRESS			Date of Disbursement
Mailing Address PO Box 10555			01 23 2013
•	State Zip Code		Transaction ID : D140174
Peoria	IL 61612		Transaction 12 1 2 1 10 11 1
Purpose of Disbursement 2014 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Aaron Schock Office Sought: House Disburser	nent For: 2014	Туре	1000000
	Primary General		
State: IL District: 18	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
3. MCCOLLUM FOR CONGRESS			Date of Disbursement
Mailing Address P.O. Box 14131			01 23 2013
City St. Paul	State Zip Code MN 55114		Transaction ID : D140175
Purpose of Disbursement	33114		
2014 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Betty McCollum Office Sought: House Disburser	nent For: 2014	Туре	1
	Primary General		
President	Other (specify) ▼		
State: MN District: 04			
Full Name (Last, First, Middle Initial) - BLICSHON FOR CONGRESS			Date of Disbursement
BUCSHON FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address PO Box 250			01 30 2013
City	State Zip Code		Transaction ID - D440057
Newburgh	IN 47629		Transaction ID : D140257
Purpose of Disbursement 2014 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Larry Bucshon		Type	5000.00
Senate	nent For: 2014 Primary General		
State: IN District: 08	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)			8500.00
CODITION OF DISDUISEMENTS THIS Page (OPHONAI)		·····	
TOTAL This Period (last page this line number only)			34500.00

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 43 OF 43					
TEMIZED DISBURSEMENTS	Use separate schedule(s) (check		NE NUMBER: PAGE 43 OF 43 only one)					
	for each category of the Detailed Summary Page	21b	22 23 24 25 26					
	Detailed Sulfillially Fage	27	28a 28b 28c X 29 30					
Any information copied from such Reports and Statem								
or for commercial purposes, other than using the nam	e and address of any politica	I committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
angle American Society of Anesthesiologi	ists Political Action C	Committee						
Full Name (Lock First Middle Initial)								
Full Name (Last, First, Middle Initial)	D.C		Date of Disbursement					
- Texas State Society of Washington	, D.C.		M M / D D / Y Y Y Y					
Mailing Address 5185 MacArthur Blvd NW			01 02 2013					
Ste 250								
	tate Zip Code		Transaction ID : D140521					
	DC 20016-3350		Transaction 15 : 5140321					
Purpose of Disbursement Non-Federal Disbursement		012	Amount of Each Disbursement this Period					
Candidate Name			Amount of Lacif DispulseHieff this Feffod					
Carragato Harris		Category/ Type	25000.00					
Office Sought: House Disbursem	nent For: 2012	.,,,,						
	Primary General							
President	Other (specify)							
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5.7	—р							
Purpose of Disbursement								
			Amount of Each Disbursement this Period					
Candidate Name		Category/						
Office Sought: House Disbursem	and Fam.	Туре						
	Primary General							
	Other (specify)							
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Full Name (Last, First, Middle Initial)								
			Date of Disbursement					
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City	tate Zip Code							
Purpose of Disbursement								
			Amount of Each Disbursement this Period					
Candidate Name		Category/						
		Type						
Office Sought: House Disbursem								
	Primary General							
State: District:	Other (specify) ▼							
olato. District.								
SUBTOTAL of Disbursements This Page (optional)			25000.00					
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TOTAL This Period (last page this line number only).			25000.00					