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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines Utah Medical Political Action Committee 310 East 4500 South ADDRESS (number and street) Suite 500 Check if different than previously Salt Lake City, UT 84107 4250 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A CITY A ZIPCODE A IS THIS NEW **AMENDED** C00003210 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2008 06 30 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Val J Bateman Type or Print Name of Treasurer Electronically Filed by Val J Bateman 08 06 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Utah Medical Political Action Committee D D ^UD 0 4 0 1 2008 0.6 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2008 74678.80 January 1 (b) Cash on Hand at 81706.30 Begining of Reporting Period 2855.00 11220.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 84561.30 85898.80 6(a) and 6(c) for Column B) 9109.28 10446.78 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 75452.02 75452.02 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
Utah Medical Political Action Committee

Report Covering the Period:

м м 0 4

From:

01

2008

. 0.6

^D 3 0

^Y 2008

I. Receipt	s	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other			
Than Political Commi (i) Itemized (use Sc		0.00	0.00
(ii) Unitemized		2855.00	11220.00
(iii) TOTAL (add Lines 11(a)(i) and	d (ii)	2855.00	11220.00
(b) Political Party Commi	ttees	0.00	0.00
(c) Other Political Comm(such as PACs)(d) Total Contributions (a		0.00	0.00
11(a)(iii),(b) and (c)) Totals to Line 33, pag		2855.00	11220.00
Transfers From Affiliated/ Party Committees		0.00	0.00
3. All Loans Received		0.00	0.00
Loan Repayments Receive Offsets To Operating Experience		0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, p 6. Refunds of Contributions I		0.00	0.00
to Federal candidates and Political Committees		0.00	0.00
 Other Federal Receipts (Dividends, Interest, etc.) 		0.00	0.00
8. Transfers from Non-Fede	ral and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .		0.00	0.00
(b) Levin Funds (from Scl	nedule H5)	0.00	0.00
(c) Total Transfer (add 18	(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 12, 13, 14, 15, 16, 17, and	1 1	2855.00	11220.00
20. Total Federal Receipts (subtract Line 18(c) from L	ine 19)	2855.00	11220.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal	I	
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
	Independent Expenditure (use Schedule E)	0.00	0.00
5.	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
	i i		
	Loans Made	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	Ī	0.00	0.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))		
9.	Other Disbursements	9109.28	10446.78
80.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) i ederal Stiale		
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
1.	Total Disbursements (add Lines 21(c), 22,	2422.22	10110 =0
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9109.28	10446.78
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9109.28	10446.78
	110111 EITHE 31)	3103.20	10440.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	2855.00	11220.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	2855.00	11220.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

S	CHEDULE B (FEC Form 3X)	Use separate schedule	(s)	-	NUMBER:	PAGE 6/11	ı
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag		(check onl	22 2	3 24 25 3b 28c X 29	2 3
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam						
	NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee	, , , , , , , , , , , , , , , , , , ,					
_	Full Name (Last, First, Middle Initial) D. Edgar Allen				Transaction Date of Disb	ID: SB29.5042 oursement	
	Mailing Address 4317 Fern Drive				04	17 2008	Y
	Ogden	State Zip Code UT 84403			Amount of E	ach Disbursement this F	
	Purpose of Disbursement Donation Candidate Name			Category/		500.00	,
	Ed Allen	ement For: Primary General Other (specify)		Туре			
	Full Name (Last, First, Middle Initial) American Medical Political Action Commit	tee			Date of Disb		V
	Mailing Address 1101 Vermont Ave., NW				04	11 2008	3
	City Chicago,	State Zip Code IL 20005			Amount of E	ach Disbursement this F	
	Purpose of Disbursement dues Candidate Name			Category/		170.00)
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	al	Туре			
	Full Name (Last, First, Middle Initial) American Medical Political Action Commit	tee			Date of Disb		
	Mailing Address 1101 Vermont Ave., NW				04	11 7 2008	S Y
	City Chicago,	State Zip Code IL 20005			Amount of E	ach Disbursement this F	-
	Purpose of Disbursement PAC DUES Candidate Name			Category/		250.00)
		annul Fac		Type			
	Senate President	ement For: Primary General Other (specify)	al				
	State: District: UBTOTAL of Disbursements This Page (optional)					920.00)
	OTAL This Period (last page this line number only)						
ட்	This i chou (last page this line number only)						_

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В.

C.

SCHEDULE B (FEC Form 3X)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one)	26 30
Any Information copied from such Reports and Statemen				
or for commercial purposes, other than using the name	and address of any political	committee to sol	icit contributions from such committee	
NAME OF COMMITTEE (In Full)				
/ Utah Medical Political Action Committee				
Full Name (Last, First, Middle Initial)			Transaction ID: SB29.5052	
American Medical Political Action Committee	ee		Date of Disbursement	
Mailing Address 1101 Vermont Ave., NW			05	
	State Zip Code L 20005		Amount of Each Disbursement this Perio	od
Purpose of Disbursement		• •	50.00	
Corporate dues				
Candidate Name		Category/ Type		
Office Sought: House Disburser	ment For:			
Senate	Primary General			
President District:	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) American Medical Political Action Committee	20		Transaction ID: SB29.5053 Date of Disbursement	
Mailing Address 1101 Vermont Ave., NW			05 09 7 2008	
•	State Zip Code L 20005		Amount of Each Disbursement this Period	od
Purpose of Disbursement PAC Dues		· ·	27.50	
Candidate Name		Category/ Type		
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Transaction ID: SB29.5054	
American Medical Political Action Committee	ee		Date of Disbursement	
Mailing Address 1101 Vermont Ave., NW			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & S \end{smallmatrix} \end{bmatrix}$	
	State Zip Code		Amount of Each Disbursement this Period	iod
	L 20005		400.00	
Purpose of Disbursement PAC dues			400.00	
Candidate Name		Category/ Type		
Office Sought: House Senate President State: Disburser	ment For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)			477.50	
				닉
TOTAL This Period (last page this line number only) .				

SCHEDULE B (FEC Form 3X)

SCHEDOLL B (I LOT OHII 5X)	Use separate schedule(s) (cho	R LINE NUMBER: PAGE 8/11 eck only one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page	21b 22 23 24 25 2 27 28a 28b 28c X 29 3
Any Information copied from such Reports and State or for commercial purposes, other than using the normal NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee	ame and address of any political committed	
Full Name (Last, First, Middle Initial) American Medical Political Action Community Mailing Address 1101 Vermont Ave., N		Transaction ID: SB29.5055 Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago, Purpose of Disbursement Corporate Dues Candidate Name	State Zip Code IL 20005	Amount of Each Disbursement this Period 300.00
	Type rsement For: Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) American Medical Political Action Comm Mailing Address 1101 Vermont Ave., N		Transaction ID: SB29.5056 Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago, Purpose of Disbursement Dues Candidate Name	State Zip Code IL 20005 Categor Type	Amount of Each Disbursement this Period 1510.00
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	rsement For: Primary General Other (specify) ▼	Transaction ID: SB29.5057
American Medical Political Action Community Mailing Address 1101 Vermont Ave., N		Date of Disbursement M 6 M / D 3 D / Y Y Y O Y 8 Y
City Chicago, Purpose of Disbursement Dues Candidate Name	State Zip Code IL 20005	Amount of Each Disbursement this Period 1550.00
Office Sought: House Disbuse Senate President State: District:	Type rsement For: Primary General Other (specify) ▼	
	al)	3360.00

West Valley City Purpose of Disbursement Donation Candidate Name Office Sought: House Primary General President Primary General Disbursement For: Full Name (Last, First, Middle Initial) Maureen Booth Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East Transaction ID: SB29.5043 Date of Disbursement		Use separate schedule	(S) (check on	E NUMBER: PAGE 9/11
NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Vitah Medical Political Action Committee Full Name (Last, First, Middle Initial) Ron Bigelow Mailing Address 4658 Water Wood Dr. City West Valley City State Purpose of Disbursement Donation Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Vige Category/ Type Transaction ID: SB29,5041 Date of Disbursement this Peric Category/ Type Transaction ID: SB29,5041 Date of Disbursement this Peric Category/ Type Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Category/ Type Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Category/ Type Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Tipe Perical Primary Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5037 Date of Disbursement Tipe Perical Primary Date of Disbursement Tipe Perical Primary Date of Disbursement Other (specify) ▼ Transaction ID: SB29,5043 Date of Disbursement Tipe Perical Primary Date of Dis		Detailed Summary Pag	21b 27	22 23 24 25 28 28a 28b 28c X 29
Vitah Medical Political Action Committee	or for commercial purposes, other than using the na			
Ron Bigelow Mailing Address 4658 Water Wood Dr. City City State UT 84120 Purpose of Disbursement Donation Candidate Name Office Sought: House President Disbursement For: Senate Primary General Other (specify) Purpose of Disbursement Category' Type Transaction ID: SB29.5037 Date of Disbursement this Peric Amount of Each Disbursement this Peric Sol. 00 Transaction ID: SB29.5037 Date of Disbursement this Peric Type Transaction ID: SB29.5037 Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Mailing Address City State Disbursement For: Primary General Other (specify) Transaction ID: SB29.5037 Date of Disbursement Office Sought: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address City President City State Disbursement For: Primary General Other (specify) Transaction ID: SB29.5043 Date of Disbursement Office Sught: Office Sought: City Provo UT 84604 Purpose of Disbursement Other (specify) Transaction ID: SB29.5043 Date of Disbursement O)		
City State Zip Code West Valley City UT 84120 Purpose of Disbursement Donation Candidate Name Office Sought: House Senate President District: Full Name (Last, First, Middle Initial) Maureen Booth City State Zip Code Purpose of Disbursement Category' Type Office Sought: House Senate President District: Full Name (Last, First, Middle Initial) Maureen Booth City State Zip Code Purpose of Disbursement Category' Type Office Sought: House Senate President Disbursement For: Senate President Other (specify) ▼ Transaction ID: SB29.5037 Date of Disbursement this Peric Senate President Other (specify) ▼ Amount of Each Disbursement this Peric Senate Disbursement For: Senate President Other (specify) ▼ Transaction ID: SB29.5037 Date of Disbursement this Peric Senate Disbursement For: Senate President Other (specify) ▼ Transaction ID: SB29.5048 Date of Disbursement this Peric Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement For: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5037 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5037 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5048 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5048 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5048 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.5037 Date of Disbursement Tor: Senate Other (specify) ▼ Transaction ID: SB29.				Date of Disbursement
West Valley City Purpose of Disbursement Donation Candidate Name Office Sought: House Senate Primary General District: Full Name (Last, First, Middle Initial) Mailing Address City State: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: House Senate Primary General Disbursement Category/ Type Office Sought: House Senate Primary General Disbursement Candidate Name Office Sought: House Senate Primary General District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address Amount of Each Disbursement this Peric Category/ Type Transaction ID: SB29.5037 Date of Disbursement Category/ Type Transaction ID: SB29.5043 Date of Disbursement State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address Gity Provo State UT 84604 Purpose of Disbursement Donation Candidate Name Office Sought: House UT 84604 Purpose of Disbursement Donation Category/ Type Office Sought: House UT 84604 Purpose of Disbursement Donation Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼	Mailing Address 4658 Water Wood Dr.			$\begin{bmatrix} 0 & 4 & M & 1 & D & D & 1 & 7 & 1 & 2 & 0 & 0 & 8 & 1 \end{bmatrix}$
Donation Candidate Name Office Sought:	West Valley City			Amount of Each Disbursement this Perio
Office Sought:	Donation		Category/	500.00
State: District: Full Name (Last, First, Middle Initial) Maureen Booth Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Outher (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City State Zip Code Mailing Address 3663 North 870 East City State Zip Code Purpose of Disbursement Donation Candidate Name Category/ Type Transaction ID: SB29.5043 Date of Disbursement Donation Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Peric Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Category/ Type	Office Sought: House Disbu		Туре	
Maureen Booth Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President President State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City State Zip Code Mailing Address 3663 North 870 East City Provo UT 84604 Purpose of Disbursement Donation Candidate Name Office Sought: House State Zip Code UT 84604 Purpose of Disbursement Donation Candidate Name Disbursement For: Category/ Type Amount of Each Disbursement Init Sequence Se	President State: District:			
City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City State Zip Code UT 84604 Purpose of Disbursement Donation Candidate Name Office Sought: House Senate Primary General Other (specify) State Zip Code UT 84604 Purpose of Disbursement House Disbursement For: Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) Office Sought: President Other (specify) Other (specify				Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City Provo UT 84604 Purpose of Disbursement Donation Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Period Disbursement For: Senate Primary General Other (specify) ▼ Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼	Mailing Address			04 17 2008
Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City State Zip Code Provo UT 84604 Purpose of Disbursement Donation Candidate Name Office Sought: House Senate Primary General Disbursement For: Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Peric Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼	City	State Zip Code		Amount of Each Disbursement this Perio
Office Sought: House				500.00
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City State Zip Code UT 84604 Purpose of Disbursement Donation Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Transaction ID: SB29.5043 Date of Disbursement Mailing Address 3663 North 870 East Transaction ID: SB29.5043 Date of Disbursement Amount of Each Disbursement this Perion Category/ Type Office Sought: House Senate Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) Curtis S. Bramble Mailing Address 3663 North 870 East City Provo UT State UT 84604 Purpose of Disbursement Donation Candidate Name Disbursement For: Senate President Disbursement For: Senate President Disbursement For: Senate Primary General Other (specify) Transaction ID: SB29.5043 Date of Disbursement Amount of Each Disbursement this Period 1000.00 Amount of Each Disbursement For: Category/ Type Office Sought: Other (specify) Transaction ID: SB29.5043 Date of Disbursement Amount of Each Disbursement this Period 1000.00	Senate President	Primary Genera	al	
City State Zip Code Provo UT 84604 Purpose of Disbursement Donation Candidate Name Category/ Type Office Sought:	Full Name (Last, First, Middle Initial)			Date of Disbursement
Provo UT 84604 Purpose of Disbursement Donation Candidate Name Category/ Type Office Sought: Disbursement For: Senate Primary General Other (specify) ▼	Mailing Address 3663 North 870 East			04 18 / 2008
Donation Candidate Name Category/ Type Office Sought: House Senate Primary President Disbursement For: Primary General Other (specify) ▼	Provo			Amount of Each Disbursement this Perio
Office Sought: Disbursement For: Senate Primary Other (specify)	Donation			1000.00
Senate Primary General President Other (specify) ▼		vo amont Fe::-		
State: District:	Senate President	Primary Genera	al	
	State: District:			

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	s)	FOR (chec	k only o		٦.		_ P/	AGE	10 / 11	<u> </u>
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		2 2	1b	22 28a	23	3b	24 28c	Х	25 29	<u>;</u>
	y Information copied from such Reports and State for commercial purposes, other than using the nan											
\rangle	NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee											
<u> </u>	Full Name (Last, First, Middle Initial) David Clark					Transa Date o		ursem	ent			Y
	Mailing Address 1831 Red Mountain					0 4		21]	2 () ģ 8 Č	
	City Santa Clara	State Zip Code UT 84765				Amour	nt of E	ach D	sburse	-		erio
	Purpose of Disbursement Donation								•	100	00.00	
	Candidate Name			ategory Type	/							
	Senate President	ement For: Primary General Other (specify)										
	State: District: Full Name (Last, First, Middle Initial)					Transa	action	ID.	SR29	5040	<u> </u>	
	Ben C. Ferry					Date o	f Disb	ursem	ent			V
	Mailing Address 905 North 6800 West					0 4		17	J'L	20	o ŏ 8 `	
	City Corinne	State Zip Code UT 84307				Amour	nt of E	ach D	sburse			erio
	Purpose of Disbursement Donation								•	30	00.00	_
	Candidate Name Utah Medical Political Action Committee			ategory Type	7/							
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)	-1									
	Full Name (Last, First, Middle Initial) Joseph Q Jarvis					Transa Date o	f Disb	ursem	ent	.5039	l	
	Mailing Address 51 North Wolcott Street					0 4	/	17		ž	o ŏ e`	Y
	City Salt Lake City	State Zip Code UT 84103				Amour	nt of E	ach D	sburse			erio
	Purpose of Disbursement Contribution						•	•		50	00.00	-
	Candidate Name			ategory Type	/							
	Senate President	ement For: Primary General Other (specify) ▼										
	State: District:											

i	Any Information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Utah Medical Political Action Committee		(check onl 21b 27 d by any person	22 23 24 25 26 28a 28b 28c X 29 30b for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Sheldon Killpack Mailing Address 3406 South 875 West			Transaction ID: SB29.5044 Date of Disbursement O 4 D 1 B Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Syracuse Purpose of Disbursement Donation Candidate Name	State Zip Code UT 84075	Category/ Type	Amount of Each Disbursement this Period 500.00
В.	Full Name (Last, First, Middle Initial) Utah Medical Association Mailing Address 310 E. 4500 So. Ste 500 City SLC Purpose of Disbursement Candidate Name	State Zip Code UT 84107	Category	Transaction ID: SB29.5058 Date of Disbursement M M M D D D Y Y Y Y O Y 8 Amount of Each Disbursement this Period 51.78
		ement For: Primary General Other (specify) ▼	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	•	551.78
TOTAL This Period (last page this line number only)	•	9109.28