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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

1 OKW 3X	For Other Than An Autl	norized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
American Academy	of Neurology BrainPAC	: <u> </u>	
ADDRESS (number and street)	201 Chicago Avenue		
Check if different than previously reported. (ACC)	Minneapolis		MN 55415
2. FEC IDENTIFICATION	NUMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00435933		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On: Mar	20 (M2) May 20 (M 20 (M3) Jun 20 (M6 20 (M4) Jul 20 (M7	Sep 20 (M9) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report	PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Runoff (12R) Special (12S) In the
January 31 Year-End Report July 31 Mid-Year Report (Non-elec Year Only) (MY)	(d) 30-Day	" " ' '	State of Runoff (30R) Special (30S)
Termination Rep (TER)	Report for the:	M = M / D = D	in the State of
5. Covering Period	03 01 2023	through 03	M / D D / Y Y Y Y Y 31 2023
I certify that I have examined Type or Print Name of Treaso	this Report and to the best of Myren, Kevin C., , Mr.,	my knowledge and belief it is	true, correct and complete.
Signature of Treasurer	yren, Kevin C., , Mr.,	[Electronically Filed]	Date 04 / 20 / 2023
NOTE: Submission of false, err	roneous, or incomplete information	n may subject the person signing	g this Report to the penalties of 52 U.S.C. § 3010
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name American Academy of Neurology BrainPAC 03 01 2023 03 31 2023 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 387231.86 January 1. 2023 (b) Cash on Hand at 450441.90 Beginning of Reporting Period..... 46894.66 110104.70 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 497336.56 497336.56 6(a) and 6(c) for Column B)..... 137500.00 137500.00 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 359836.56 359836.56 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

American Academy of Neurology BrainPAC

Report Covering the Period: From:	01 2023	To: 03 31 2023
I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	37747.66	83469.98
(i) Normzou (dou concude / i)		
(ii) Unitemized	9147.00	26634.72
(iii) TOTAL (add	 	
Lines 11(a)(i) and (ii)▶	46894.66	110104.70
		0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	7	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	46894.66	110104.70
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
,		
8. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	4 4	45 45
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(Ironi Scriedule H3)	0.00	0.00
#\\	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add Tota) and Tota)	0.00	0.00
Total Receipts (add Lines 11(d),	 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
12, 13, 14, 15, 16, 17, and 18(c))▶	46894.66	110104.70
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	46894.66	110104.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tills I ellou	Calcillai Teal-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		4 4 4
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 Committees	0.00	0.00
Contributions to Federal Candidates/Committees	4 4	
and Other Political Committees	137500.00	137500.00
Independent Expenditures (use Schedule E)	0.00	0.00
5. Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	4 4
(use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	4 4	
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	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity	20))	
(from Schedule H6) (i) Federal Share	0.00	0.00
(7) - 333.43 - 3.143	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	4 4 5	1 1 1 1 1 1 1 1
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	137500.00	137500.00
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
from Line 31)	137500.00	137500.00

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	46894.66	110104.70
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46894.66	110104.70
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s)

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for each category of the 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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Allison, Tyler, Jared, Dr., Date of Receipt Mailing Address 9220 Larsen Dr 2023 City Zip Code State Transaction ID: 48462982 KS Overland Park 66214-2125 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Children's Mercy Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clardy, Stacey, , Dr., Date of Receipt Mailing Address 7839 Boothill Dr 2023 City State Zip Code Transaction ID: 48462988 Park City UT 84098-5322 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Utah Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Beversdorf, David, Q., Dr., Date of Receipt Mailing Address 14120 Higway BB 01 2023 City Zip Code State Transaction ID: 48462995 MO Rocheport 65279-9518 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Missouri Associate Professor 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).....

Use separate schedule(s)

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for each category of the 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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guzik, Amy, K., Dr., Date of Receipt Mailing Address 681 Chester Rd 2023 City Zip Code State Transaction ID: 48463024 NC Winston Salem 27104-1703 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wake Forest University Baptist Medical Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chadehumbe, Madeline, A., Dr., Date of Receipt Mailing Address 12 Crest Fruit Ct 2023 City State Zip Code Transaction ID: 48463046 NJ Manalapan 07726-7933 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Children's Hospital of Philadelphia Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Reynolds, Wesley, D., Dr., Date of Receipt Mailing Address 3735 Yates St 02 2023 City Zip Code State Transaction ID: 48463054 CO Denver 80212-2040 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Centura Health Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Use separate schedule(s)

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for each category of the 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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Weathers, Allison, L., Dr., Date of Receipt Mailing Address 8220 Woodberry Blvd 2023 City Zip Code State Transaction ID: 48463055 OH Chagrin Falls 44023-4526 Amount of Each Receipt this Period FEC ID number of contributing C 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cleveland Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 418.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Greeley, David, R., Dr., Date of Receipt Mailing Address 1125 E 27th Avenue 2023 City State Zip Code Transaction ID: 48463056 WA Spokane 99203-3348 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Northwest Neurological, PLLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 252.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kinsella, Laurence, J., Dr., Date of Receipt Mailing Address 235 Rosemont Ave 03 2023 City Zip Code State Transaction ID: 48463836 MO St. Louis 63104-2412 Amount of Each Receipt this Period FEC ID number of contributing C 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) St Clare Neuroscience Institute Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 252.00 Other (specify) 377.00 SUBTOTAL of Receipts This Page (optional).....

Use separate schedule(s) for each category of the

FOR LINE NUMBER:						PAGE		9	OF		50
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		13		— ´ -		15		16			17

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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Austin, Sara, G., Dr., Date of Receipt Mailing Address 4909 Westview Dr. 2023 City Zip Code State Transaction ID: 48463855 TX Austin 78731-4735 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Ascension Medical Group Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Agarwal, Sonika, , Dr., Date of Receipt Mailing Address 3203 Greystone Drive 2023 City State Zip Code Transaction ID: 48463856 Garnet Valley PA 19060-1748 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Children'S Hospital of Philadelphia Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Riggins, Nina, Yakovlevna, Dr., Date of Receipt Mailing Address 3218 Via Alicante 01 2023 City State Zip Code Transaction ID: 48463858 CA La Jolla 92037-2741 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UCSF** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Zurasky, John, , Dr., Date of Receipt Mailing Address 1041 S Palatine Hill Road 2023 City Zip Code State Transaction ID: 48501169 OR Portland 97219-8380 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Providence Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Stevens, James, C., Dr., Date of Receipt Mailing Address 12112 Aboite Center Rd 2023 City State Zip Code Transaction ID: 48501177 Fort Wayne IN 46814-9528 Amount of Each Receipt this Period FEC ID number of contributing 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Allied Physicians, Inc. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 627.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kilgore, Shannon, M., Dr., Date of Receipt Mailing Address 11 Doud Dr 04 2023 City State Zip Code Transaction ID: 48501178 CA Los Altos 94022-2323 Amount of Each Receipt this Period FEC ID number of contributing C 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) VA Palo Alto HCS Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 252.00 Other (specify) 1293.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wu, Allan, Ding, Dr., Date of Receipt Mailing Address 1100 N. Lake Shore Dr. #27A 2023 City Zip Code State Transaction ID: 48501188 IL Chicago 60611-5202 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UCLA** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wu, Joyce, Y., Dr., Date of Receipt Mailing Address 1100 N. Lake Shore Drive 2023 Unit 27A City State Zip Code Transaction ID: 48501190 IL Chicago 60611-5202 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of California Los Angeles Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Garcia, Eduardo, , Dr., Date of Receipt Mailing Address 24 Douglas Rd 05 2023 City Zip Code State Transaction ID: 48501197 MA Needham 02492-4504 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Newton-Wellesley Neurological Associat Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF (check only one) **X** 11a 11b 11c 12

50 Use separate schedule(s) for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Fox-Rosellini, Susan, , Ms., Date of Receipt Mailing Address 1551 Ancona Ave 2023 City Zip Code State Transaction ID: 48501213 FL Miami 33146-1905 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UM Neurology** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ghiaseddin, Ashley, P., Dr., Date of Receipt Mailing Address 8511 SW 77th AVE 2023 City State Zip Code Transaction ID: 48501225 FL Gainesville 32608-8495 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Florida Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Jones, Elaine, C., Dr., Date of Receipt Mailing Address 7312 Biltmore Drive 05 2023 City State Zip Code Transaction ID: 48501227 FL Sarasota 34231-7907 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Specialists On Call Neurologist 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).....

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

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Patton, Eddie, L., Dr., Date of Receipt Mailing Address 3762 Grennoch Lane 2023 City Zip Code State Transaction ID: 48501232 TX Houston 77025-2406 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **UT Health Neurosciences** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Post, Mary, , Ms., Date of Receipt Mailing Address 14 North Oaks Road 2023 City State Zip Code Transaction ID: 48501234 North Oaks MN 55127-6431 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Academy of Neurology CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Choudry, Rabia, , Dr., Date of Receipt Mailing Address 1906 Yorkshires Drive 06 2023 City State Zip Code Transaction ID: 48501259 PΑ Blue Bell 19422-3224 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Einstein Medical Center Neurologist 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).....

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

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Watson, David, B., Dr., Date of Receipt Mailing Address 3112 N. Greystone Drive 2023 City Zip Code State Transaction ID: 48501300 WV Morgantown 26508-8601 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) West Virginia University Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Parikh, Neal, S., Dr., Date of Receipt Mailing Address 404 E 79th St 2023 Apt 7H City State Zip Code Transaction ID: 48501352 NY New York 10075-1406 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CTNU - Weill Cornell Medicine Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Antonio, Aileen, , Dr., Date of Receipt Mailing Address 2295 New Town Dr NE 09 2023 City State Zip Code Transaction ID: 48502542 MI **Grand Rapids** 49525-3917 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mercy Health Saint Mary's Hauenstein N Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 950.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McCollum, David, N., Dr., Date of Receipt Mailing Address 737 Bent Creek Dr 09 2023 City Zip Code State Transaction ID: 48502544 PA Lititz 17543-8352 Amount of Each Receipt this Period FEC ID number of contributing C 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Penn Medicine LGH Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 418.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mittal, Shilpi, , Dr., Date of Receipt Mailing Address 375 Rose Glen Drive 2023 City State Zip Code Transaction ID: 48519707 PA Wayne 19087-4410 Amount of Each Receipt this Period FEC ID number of contributing 21.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Thomas Jefferson University Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 313.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Southerland, Andrew, Mebane, Dr., Date of Receipt Mailing Address 2627 Holkham Dr 12 2023 City Zip Code State Transaction ID: 48522856 VACharlottesville 22901-9527 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Virginia, Dept of Neurol Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 730.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

16 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Davis, Anthony, , Dr., Date of Receipt Mailing Address 8 Pine Forest Drive 13 2023 City Zip Code State Transaction ID: 48522928 AR Russellville 72801-4514 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Davis Neurology PLLC Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Bickel, Jennifer, , Dr., Date of Receipt Mailing Address 5003 W Evelyn Drive 2023 City State Zip Code Transaction ID: 48522930 FL Tampa 33609-3601 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Moffitt Cancer Center Magnolia Campus Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Janus, Todd, J., Dr., Date of Receipt Mailing Address 4008 Muskogee Avenue 13 2023 City State Zip Code Transaction ID: 48524341 IΑ Des Moines 50312-4627 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UP Health Physicians and Clinics Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 700.00 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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Riaz, Awais, , Dr., Date of Receipt Mailing Address 1381 E. Hickory Lane 2023 15 City Zip Code State Transaction ID: 48525277 UT Murray 84121-2502 Amount of Each Receipt this Period FEC ID number of contributing 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Utah Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 627.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Milstein, Mark, , Dr., Date of Receipt Mailing Address 535 West 110th Street Apt 6C 15 2023 City State Zip Code Transaction ID: 48525278 NY New York 10025-2025 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Montefiore Medical Center Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Flippen, Charles, C., Dr., II Date of Receipt Mailing Address 11319 Isleta Street 05 2023 City State Zip Code Transaction ID: 48525293 CA Los Angeles 90049-3022 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UCLA Goldberg Migraine Program Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1294.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

18 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC

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Α.	Full Name of Individual (Last, First, Middle Init Zieman, Glynnis, , Dr.,	tial) or Full Or	ganization Name	Date of Receipt					
	Mailing Address 6431 E Sheridan St			03					
	City	State	Zip Code	Transaction ID : 48525294					
	Scottsdale	AZ	85257-1133	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		500.00					
	Name of Employer (for Individual) Barrow Neurological Institute		pation (for Individual) ologist	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00						
В.	Full Name of Individual (Last, First, Middle Init Tilton, Ann, H., Dr.,	tial) or Full Or	ganization Name	Date of Receipt					
	Mailing Address 30 Pelham Dr		03 06 2023						
	City	State	Zip Code	Transaction ID: 48525345					
	Metairie	LA	70005-4454	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		84.00					
	Name of Employer (for Individual) LSUHSC and Childrens Hospital of New O	Memo Item							
	Receipt For:	Aggregate \	Year-to-Date ▼						
	Primary General Other (specify) ▼	33.73	, 252.00						
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Holtz, Steven, J., Dr.,	tial) or Full Or	ganization Name	Date of Receipt					
	Mailing Address 2009 Tampa Avenue			03 06 2023					
	City	State	Zip Code	Transaction ID: 48525356					
	Oakland	CA	94611-2620	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		100.00					
	Name of Employer (for Individual) Neurology Medical Group of Diablo Vall	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00						
5	SUBTOTAL of Receipts This Page (optional)		>	684.00					
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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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mittal, Shilpi, , Dr., Date of Receipt Mailing Address 375 Rose Glen Drive 2023 City Zip Code State Transaction ID: 48525367 PA Wayne 19087-4410 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Thomas Jefferson University Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 292.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Najib, Umer, , Dr., Date of Receipt Mailing Address 2022 White Oak Dr 2023 City State Zip Code Transaction ID: 48525368 WV Morgantown 26505-2465 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) West Virginia University Hospitals Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Patil, Kiran, A., Dr., Date of Receipt Mailing Address 1695 Scarlett Dr 06 2023 City State Zip Code Transaction ID: 48525370 PΑ Pittsburgh 15241-3161 Amount of Each Receipt this Period FEC ID number of contributing C 1001.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) St Clair Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1001.00 Other (specify) 1501.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Saad, Ali, , Dr., Date of Receipt Mailing Address 800 S Valentia St, Unit 436 2023 City Zip Code State Transaction ID: 48525371 CO Denver 80247-2509 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Centura Health Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coerver, Katherine, , Dr., Date of Receipt Mailing Address 740 Monroe Street 2023 City State Zip Code Transaction ID: 48525372 CO Denver 80206-4011 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rocky Mountain Neurology Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Alick-Lindstrom, Sasha, , Dr., Date of Receipt Mailing Address 3223 Denali Drive 06 2023 City State Zip Code Transaction ID: 48525387 TX Irving 75063-0142 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UT Southwestern Medical Center Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

50 FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sombutmai, Chut, , Dr., Date of Receipt Mailing Address 9618 Estridge Ln. 2023 City Zip Code State Transaction ID: 48525388 NC Concord 28027-7267 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) TeleSpecialists, LLC Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fellman, Melissa, Ann, Dr., Date of Receipt Mailing Address 950 Brickell Bay Dr 2023 **APT 2402** City State Zip Code Transaction ID: 48525390 FL Miami 33131-3953 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Miami Department of Neur Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Pierce, Jontel, M., Dr., Date of Receipt Mailing Address 472 Horizon Light Lane 06 2023 City State Zip Code Transaction ID: 48525394 TX Katy 77493-4633 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MIND Neurology Clinic Neurologist 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).....

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vaou, Okeanis, , Dr., Date of Receipt Mailing Address 12 Mayborough Ln 2023 City Zip Code State Transaction ID: 48525396 TX San Antonio 78257-1242 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Boston University School of Medicine Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Scarberry, Susan, L., Dr., Date of Receipt Mailing Address 4893 Bluebell Loop So 2023 City State Zip Code Transaction ID: 48525488 ND Fargo 58104-5411 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Sanford Health Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Van Fossen, Wendy, , Ms., Date of Receipt Mailing Address 2121 Walpole Street 06 2023 City Zip Code State Transaction ID: 48525495 VAVirginia Beach 23456-1276 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Neurology Center Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

50 FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Danielson, Laura, , Dr., Date of Receipt Mailing Address 7411 N 167th Ave 2023 City Zip Code State Transaction ID: 48525500 NE Bennington 68007-2830 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) University Hospitals Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hameed, Bilal, , Dr., Date of Receipt Mailing Address 62 Denison Drive 2023 City State Zip Code Transaction ID: 48525520 CT Guilford 06437-2344 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Yale University School of Medicine Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Longo, Michele, , Dr., Date of Receipt Mailing Address 4901 Wills St 06 2023 City Zip Code State Transaction ID: 48525523 Metairie LA 70006-1132 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Tulane Medical Center** Neurologist 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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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Milone, Margherita, , Dr., Date of Receipt Mailing Address 3105 Tremont Ln SW 2023 City Zip Code State Transaction ID: 48525525 MN Rochester 55902-3477 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mavo Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nievera, Conrad, C., Dr., Jr. Date of Receipt Mailing Address 1330 E Minnesota St 2023 Unit 108 City State Zip Code Transaction ID: 48525595 SD Rapid City 57701-2171 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Monument Health and Rehabilitation Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Haq, Ihtsham, , Dr., Date of Receipt Mailing Address 11395 Four Fillies Rd 10 2023 City State Zip Code Transaction ID: 48525605 FL Pinecrest 33156-4241 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wake Forest Health Sciences Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 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 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Anderson, Wayne, E., Dr., Date of Receipt Mailing Address 401 Harrison St 2023 Apt 42A City Zip Code State Transaction ID: 48525644 CA San Francisco 94105-2797 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kazamel, Mohamed, , Dr., Date of Receipt Mailing Address 2613 Manchester Ct 2023 City State Zip Code Transaction ID: 48525646 AL Vestavia 35226-3573 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) UAB Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Benameur, Karima, , Dr., Date of Receipt Mailing Address 340 N Peachtree Parkway 06 2023 City State Zip Code Transaction ID: 48525647 GΑ Peachtree City 30269-1360 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Emory Healthcare** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1400.00 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 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Markowski, Michael, E., Dr., Date of Receipt Mailing Address 47 Redwood Circle 2023 City Zip Code State Transaction ID: 48525649 MA Mashpee 02649-2041 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Neurologists of Cape Cod Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Haq, Ihtsham, , Dr., Date of Receipt Mailing Address 11395 Four Fillies Rd 2023 City State Zip Code Transaction ID: 48525650 FL **Pinecrest** 33156-4241 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Wake Forest Health Sciences Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Vidic, Thomas, R., Dr., Date of Receipt Mailing Address 69805 Hilltop Rd 06 2023 City State Zip Code Transaction ID: 48525653 MI Union 49130-9771 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Elkhart Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional).....

50 FOR LINE NUMBER: PAGE 27 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jackson, Carlayne, E., Dr., Date of Receipt Mailing Address 503 Talmadge 2023 City Zip Code State Transaction ID: 48525658 TX San Antonio 78249-2998 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Texas Health Science Cen Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Shapiro, Robert, E., Dr., Date of Receipt Mailing Address 1256 Whalley Road 2023 City State Zip Code Transaction ID: 48525659 VT Charlotte 05445-9074 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Vermont College of Medic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hohler, Anna, D., Dr., Date of Receipt Mailing Address 58 Morton Street 06 2023 City State Zip Code Transaction ID: 48525660 MA Needham Heights 02494-1204 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Steward SEMC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 2400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

50 FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Karin, G., Dr., Date of Receipt Mailing Address 35 Mattoon St 2023 City Zip Code State Transaction ID: 48525661 MA Springfield 01105-1715 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **Baystate Medical Center** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Frere, Robert, C., Dr., Date of Receipt Mailing Address 405 Raintree Drive 2023 City State Zip Code Transaction ID: 48525662 NC Greenville 27834-0537 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) ECU Neurology Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Sico, Jason, J., Dr., Date of Receipt Mailing Address 82 Redcoat Lane 06 2023 City State Zip Code Transaction ID: 48525666 CT Guilford 06437-1905 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) West Haven VAMC/Yale School of Medicin Clinical Reasearch Fellow Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

50 FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Riggins, Nina, Yakovlevna, Dr., Date of Receipt Mailing Address 3218 Via Alicante 2023 City Zip Code State Transaction ID: 48525672 CA La Jolla 92037-2741 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **UCSF** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gregory, M, Gabriela, Dr., Date of Receipt Mailing Address 3392 Westwind Rd 2023 City State Zip Code Transaction ID: 48527293 NV Las Vegas 89146-6753 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Nevada Neurosciences Institute Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Smith, Marsha, , Dr., Date of Receipt Mailing Address 5988 Capeview PI 16 2023 City State Zip Code Transaction ID: 48528360 OH Mason 45040-7505 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Riverhills Neuroscience Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 1200.00 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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tanner, Caroline, M., Dr., Date of Receipt Mailing Address 3011 Acton St 16 2023 City Zip Code State Transaction ID: 48528361 CA Berkeley 94702-2706 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PADRECC, San Francisco VAMC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Avitzur, Orly, , Dr., Date of Receipt Mailing Address 815 Old Sleepy Hollow Rd Extension 2023 City State Zip Code Transaction ID: 48530304 Briarcliff NY 10510-2543 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Orly Avitzur, MD, PC Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 2500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Stavros, Kara, , Dr., Date of Receipt Mailing Address 140 Pitman Street 18 2023 Apt 105 City State Zip Code Transaction ID: 48532022 RΙ Providence 02906-5120 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Rhode Island Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 226.00 Other (specify) 2627.00 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 Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Anderson, Eric, , Dr., Date of Receipt Mailing Address 5921 Bayview Circle South 2023 City Zip Code State Transaction ID: 48532044 FL Gulfport 33707-3929 Amount of Each Receipt this Period FEC ID number of contributing 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Intensive Neuro Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 627.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schwartzbard, Julie, B., Dr., Date of Receipt Mailing Address 1007 South NorthLake Dr 2023 City State Zip Code Transaction ID: 48532893 FL Hollywood 33019-1314 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Aventura Neurologic and Assoc. Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 252.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Al-Khalili, Yasir, , Dr., Date of Receipt Mailing Address 114 Glenwood Cir 2023 City Zip Code State Transaction ID: 48532894 VASouth Hill 23970-7000 Amount of Each Receipt this Period FEC ID number of contributing C 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Virginia Commonwealth University Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 252.00 Other (specify) 377.00 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 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Khan, Jaffar, , Dr., Date of Receipt Mailing Address 1185 Pine Ridge Rd NE 2023 City Zip Code State Transaction ID: 48538434 GA Atlanta 30324-2526 Amount of Each Receipt this Period FEC ID number of contributing C 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Emory Healthcare** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 252.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Holtz, Steven, J., Dr., Date of Receipt Mailing Address 2009 Tampa Avenue 2023 City State Zip Code Transaction ID: 48540869 CA Oakland 94611-2620 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Neurology Medical Group of Diablo Vall Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Busis, Neil, A., Dr., Date of Receipt Mailing Address 1065 2nd Ave, 7J 25 2023 City Zip Code State Transaction ID: 48542274 NY New York 10022-2887 Amount of Each Receipt this Period FEC ID number of contributing C 416.66 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NYU Langone Health Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1249.98 Other (specify) 600.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

50 FOR LINE NUMBER: PAGE 33 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mueller, Nancy, L., Dr., Date of Receipt Mailing Address 34 Stonybrook Road 2023 City Zip Code State Transaction ID: 48542276 NJ Tenafly 07670-1118 Amount of Each Receipt this Period FEC ID number of contributing C 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Institute of Neurological Care Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 627.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sico, Jason, J., Dr., Date of Receipt Mailing Address 82 Redcoat Lane 2023 City State Zip Code Transaction ID: 48542279 CT Guilford 06437-1905 Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) West Haven VAMC/Yale School of Medicin Clinical Reasearch Fellow Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 355.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gilmer, William, S., Dr., Date of Receipt Mailing Address 2323 Dunstan 2023 City Zip Code State Transaction ID: 48542301 TX Houston 77005-2613 Amount of Each Receipt this Period FEC ID number of contributing C 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Willam S Gilmer MD PA Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 252.00 Other (specify) 378.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

50 FOR LINE NUMBER: PAGE 34 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Nicholas, Elwood, Dr., Date of Receipt Mailing Address 11535 GREY OAKS ESTATES RUN 2023 City Zip Code State Transaction ID: 48542645 VA Glen Allen 23059-5924 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Virginia Commonwealth University Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Finney, Glen, R., Dr., Date of Receipt Mailing Address 828 Homestead Dr 2023 City State Zip Code Transaction ID: 48542647 PA **Dallas** 18612-7227 Amount of Each Receipt this Period FEC ID number of contributing 417.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Geisinger Health Behavioral Neurology Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1251.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kissela, Brett, M., Dr., Date of Receipt Mailing Address 9878 Zig Zag Drive 28 2023 City Zip Code State Transaction ID: 48542649 OH Montgomery 45242-6311 Amount of Each Receipt this Period FEC ID number of contributing C 209.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) University of Cincinnati Hospital Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 627.00 Other (specify) 751.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Belagaje, Samir, , Dr., Date of Receipt Mailing Address 1710 Buckhead Ct NE 20 2023 City Zip Code State Transaction ID: 48563761 GA Atlanta 30324-6100 Amount of Each Receipt this Period FEC ID number of contributing C 501.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Dept of Neurology Emory University Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 501.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cutsforth-Gregory, Jeremy, K., Dr., Date of Receipt Mailing Address 331 Wimbledon Hills Dr SW 2023 City State Zip Code Transaction ID: 48582061 MN Rochester 55902-4134 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mayo Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 420.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 585.00 SUBTOTAL of Receipts This Page (optional)..... 37747.66 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X) FOR LINE NUMBER:						PAGE 36 OF 50			
ITEMIZED DISBURSEMENTS		te schedule(s) tegory of the	(check only		20 -	26 27			
		mmary Page	21b 28a	22 28b	x 23 28c	26 27 29 30b			
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or for commercial purposes, other than using the nam	e and address	s of any politica	al committee to	solicit con	tributions from	m such committee.			
NAME OF COMMITTEE (In Full)									
American Academy of Neurology B	rainPAC								
Full Name (Last, First, Middle Initial)				.	D: 1				
A. Democratic Senatorial Campaign C	committee)		Date of Disbursement					
Mailing Address 120 Maryland Ave. NE				03	20	2023			
Washington		Zip Code 20002		FEC Identification Number					
Purpose of Disbursement Political Contribution			011	C					
Candidate Name			Category/		nsaction ID: of Each Disk	48532348 pursement this Period			
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Office Sought: House Disbursem	nent For: Primary	General				7 7			
President	Other (specify			Mer	Polit no Item	ical Contribution			
State: District:				<u> </u>	-				
Full Name (Last, First, Middle Initial) B. National Republican Senatorial Cor	mmittaa			Date of	Disbursemer	nt			
B. National Republican Senatorial Cor	mmuee				M M / D D / Y Y Y Y				
Mailing Address Ronald Reagan Republican Center 425 2nd Street NE				03 20 2023					
,		Zip Code 20002		FEC Ide	entification Nu	ımber			
Purpose of Disbursement	011			C					
Political Contribution					48532356				
Candidate Name			Category/	Amount of Each Disbursement this Period 15000.00 Political Contribution					
Office Sought: House Disbursem	nent For:		Туре						
Senate	Primary	General							
President State: District:	Other (specify	")		Memo Item					
Full Name (Last, First, Middle Initial)									
C. Democratic Congressional Campai	gn Comm	ittee		Date of	Disbursemer	nt			
Mailing Address 430 South Capitol St. SE 2nd Floor	1			03	20	2023			
,		Zip Code 20003		FEC Ide	entification Nu	ımber			
Purpose of Disbursement		2000		C					
Political Contribution Candidate Name			011 Category/	Transaction ID : 48532359 Amount of Each Disbursement this Period					
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	nent For: Primary	General		5000.00					
	Other (specify)			Political Contribution Memo Item					
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	Detailed Summary Page	28a	28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Academy of Neurology B			SOURCE CONTRIBUTIONS WITH COUNTRIBUTE.
Full Name (Last, First, Middle Initial) A. National Republican Congressiona	al Committee		Date of Disbursement
Mailing Address 320 First Street SE			03 20 2023
Washington	State Zip Code DC 20002		FEC Identification Number
Purpose of Disbursement Political Contribution Candidate Name		011 Category/	Transaction ID : 48532361 Amount of Each Disbursement this Period
	ment For: Primary General Other (specify)	Type	Folitical Contribution Memo Item
Full Name (Last, First, Middle Initial) B. CHC BOLD PAC Mailing Address PO Box 15096			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code DC 20003	011	FEC Identification Number C Transaction ID: 48532364
	ment For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 5000.00 Political Contribution Memo Item
Full Name (Last, First, Middle Initial) C. New Democrat Coalition Action Full Mailing Address 5304 McKinley Street	ınd		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bethesda Purpose of Disbursement Political Contribution Candidate Name Office Sought: House Senate	Primary General	011 Category/ Type	FEC Identification Number C C00409730 Transaction ID: 48532371 Amount of Each Disbursement this Period 5000.00 Political Contribution
State: President State:	Other (specify) ▼		Memo Item
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NAME OF COMMITTEE (In Full) American Academy of Neurology E Full Name (Last, First, Middle Initial) Future Forum				
Future Forum				
				Date of Disbursement
Mailing Address 412 First Street SE Suite 100				03 20 2023
City Washington Purpose of Disbursement	State DC	Zip Code 20003		FEC Identification Number
Political Contribution Candidate Name			011 Category/	C C00625988 Transaction ID: 48532381 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spe	General cify) ▼	Type	5000.00 Political Contribution Memo Item
Full Name (Last, First, Middle Initial) - Elect Democratic Women PAC Mailing Address PO Box 15096				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington Purpose of Disbursement Political Contribution	State DC	Zip Code 20003	011	FEC Identification Number C C00685297
Candidate Name			Category/ Type	Transaction ID: 48532388 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General cify)		5000.00 Political Contribution Memo Item
Full Name (Last, First, Middle Initial) VIEWPAC				Date of Disbursement
Mailing Address 3106 Russell Road				03 20 2023
City Alexandria Purpose of Disbursement Political Contribution	State VA	Zip Code 22305	011	FEC Identification Number
Candidate Name			Category/ Type	Transaction ID: 48532389 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General cify) ▼		Political Contribution Memo Item
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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 Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) A. Tuesday Group/ RG2 PAC Mailing Address P.O. Box 11586 City Washington Purpose of Disbursement Political Contribution Candidate Name Office Sought: House Senate Primary General Political Contribution City Washington State: Disbursement For: Full Name (Last, First, Middle Initial) B. Republican Main Street PAC Mailing Address 325 7th Street, NW Suite E10 City Washington Candidate Name Office Sought: House Primary General Political Contribution Cardidate Name Office Sought: House Primary General									×			L		
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 Path) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) A. Tuesday Group/ RG2 PAC Mailing Address P.O. Box 11586 City Washington	Δ	by information conied from such Reports and Statem	l nente may n	ot he sold or us	ed by	any			nur					ione
American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) A. Tuesday Group/ RG2 PAC Mailing Address P.O. Box 11586 City Washington														
A Tuesday Group/ RG2 PAC Mailing Address P.O. Box 11586 City State Disbursement Political Contribution Candidate Name Office Sought: House Prissident District: Pull Name (Last, First, Middle Initial) B. Republican Main Street PAC Mailing Address 225 7th Street, NW Suite 610 City Senate Prissident Disbursement For: Sought: Prissident District: Prill Name (Last, First, Middle Initial) B. Republican Main Street PAC Mailing Address 325 7th Street, NW Suite 610 City Senate President Disbursement For: Sought: Prissident Disbursement For: Sought: President Disbursement For: Sought: Prissident District: Prill Name (Last, First, Middle Initial) Candidate Name City Senate President Disbursement For: Sought: Prissident District: Prill Name (Last, First, Middle Initial) Candidate Name City State: District: District: Prill Name (Last, First, Middle Initial) Chealthcare Freedom Fund Mailing Address PO Box 2485 City Springfield Springfield VA 22152 City Springfield Springfield Springfield Springfield Purpose of Disbursement Political Contribution Candidate Name City State Disbursement Political Contribution Memo Item Date of Disbursement Contribution Memo Item Date of Disbursement Contribution District: Prill Name (Last, First, Middle Initial) Candidate Name City Code Springfield Sp	\setminus	NAME OF COMMITTEE (In Full)												
A. Tuesday Group/ RG2 PAC Mailing Address P.O. Box 11586 City Washington Purpose of Disbursement Political Contribution Candidate Name City Springfield Washington Disbursement For: Senate President City Springfield President Candidate Name City Springfield President Candidate Name City Springfield President Candidate Name City Category: Full Name (Last, First, Middle Initial) Category: Full Name (Last, First, Middle Initial) Categor		American Academy of Neurology B	rainPAC	;										
Mailing Address P.O. Box 11586 City Washington Disbursement Political Contribution Disbursement Primary General Gener	_	•						Б.	, D.					
City Washington Purpose of Disbursement Political Contribution Candidate Name Office Sought:	Α.	Tuesday Group/ RG2 PAC						Date o	of Di				YIY	Y
Washington Purpose of Disbursement Political Contribution Candidate Name Office Sought:		Mailing Address P.O. Box 11586						03	_	20)	L	2023	
Political Contribution Candidate Name Category/ Office Sought: House Disbursement For: Senate President Other (specify) ▼ State: District: President Other (specify) ▼ State Other (specify)		Washington	1	•				FEC I	denti	fication	Nur	nber		
Cardidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) B. Republican Main Street PAC Mailing Address 325 7th Street, NW Suite 610 City Washington DC 20004 Purpose of Disbursement Pottical Contribution Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: Senate President State: District: District: Primary General President Primary General Office Sought: President Senate President Primary General Primary General Primary General Primary General President Senate President Primary General Primary G			'			011	╗				15	105000	24	
Office Sought:		Candidate Name					//						_	Period
Political Contribution State: District:		Office Sought: House Disbursen	nent For:			урс							5000.0	0
State: District: Full Name (Last, First, Middle Initial) B. Republican Main Street PAC Mailing Address 325 7th Street, NW Suite 610 City Washington Durpose of Disbursement Political Contribution Candidate Name Office Sought: House President Primary General Purpose of Disbursement President Other (specify) Mailing Address PO Box 2485 City Springfield VA 22152 City Springfield Purpose of Disbursement Political Contribution Candidate Name Other (specify) State Zip Code Category/ Type Other (specify) Date of Disbursement FEC Identification Number Category/ Type Date of Disbursement this Period FEC Identification Number Category/ Type Date of Disbursement this Period FEC Identification Number Category/ Type Date of Disbursement Political Contribution Memo Item FEC Identification Number Full Name (Last, First, Middle Initial) C. Healthcare Freedom Fund Mailing Address PO Box 2485 City Springfield VA 22152 Purpose of Disbursement Political Contribution Candidate Name Office Sought: House Primary General Other (specify) Vanual of Each Disbursement this Period FEC Identification Number City Transaction ID: 48532397 Amount of Each Disbursement this Period Political Contribution President VA 22152 FEC Identification Number City Transaction ID: 48532397 Amount of Each Disbursement this Period Political Contribution Political Contribution Memo Item			•							F	olitic	al Cor	ntribution	
B. Republican Main Street PAC Mailing Address 325 7th Street, NW Suite 610 City Washington Purpose of Disbursement Political Contribution Candidate Name Office Sought: House President State: District: District: District: District: District: District: District: Date of Disbursement Date of Dis			Other (speci	ify) ▼				M	emo	Item				
B. Republican Main Street PAC Mailing Address 325 7th Street, NW Suite 610 City Washington Purpose of Disbursement Political Contribution Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) C. Healthcare Freedom Fund Mailing Address PO Box 2485 City Springfield Purpose of Disbursement Political Contribution City Springfield Purpose of Disbursement Political Contribution Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) C. Healthcare Freedom Fund Mailing Address PO Box 2485 City Springfield Purpose of Disbursement Political Contribution Transaction ID: 48532396 Amount of Each Disbursement Memo Item FEC Identification Number Political Contribution Date of Disbursement Mailing Address PO Box 2485 City Springfield Purpose of Disbursement Political Contribution Transaction ID: 48532397 Amount of Each Disbursement this Period Political Contribution Transaction ID: 48532397 Amount of Each Disbursement this Period Political Contribution Political Contribution Political Contribution Memo Item Substortal of Disbursement This Page (optional)	_													
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Washington Purpose of Disbursement Political Contribution Candidate Name Category/ Type Office Sought: House Senate Primary General Disbursement For: Full Name (Last, First, Middle Initial) C. Healthcare Freedom Fund Mailing Address PO Box 2485 City Springfield Purpose of Disbursement Political Contribution Candidate Name Office Sought: House Primary General Primary General Primary General Other (specify) Type Office Sought: House Primary General Other (specify) ▼ Subtrotal of Disbursement For: Senate Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)								03		1 -	- 1	L		
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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 40 OF 50
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NAME OF COMMITTEE (In Full)			
American Academy of Neurology B	rainPAC		
/		-	
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. McCollum For Congress			M M / D D / Y Y Y Y
Mailing Address P.O. Box 14131			03 20 2023
,	State Zip Code MN 55114		FEC Identification Number
St. Paul Purpose of Disbursement	MN 55114		C C00354688
Political Contribution		011	
Candidate Name		Category/	Transaction ID: 48532408 Amount of Each Disbursement this Period
McCollum, Betty, , Rep.,		Type	
	nent For: 2024		1000.00
	Primary General Other (specify) ▼		Political Contribution
State: MN District: 04	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
B. Van Drew For Congress			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO Box 671			03 20 2023
City	State Zip Code		
	NJ 08210		FEC Identification Number
Purpose of Disbursement			C C00661868
Political Contribution		011	Transaction ID : 48532417
Candidate Name Van Drew, Jeff, , Rep.,		Category/	Amount of Each Disbursement this Period
· · · · · · · · · · · · · · · · · · ·	nent For: 2024	Туре	1000.00
	Primary General		Political Contribution
	Other (specify)		Memo Item
State: NJ District: 02			Wienio item
Full Name (Last, First, Middle Initial)			
^{C.} Vern Buchanan For Congress			Date of Disbursement
Mailing Address P. O. Box 48928			03 20 2023
ag / tau. eee 1 . C. Box 40020			
,	State Zip Code		FEC Identification Number
Sarasota Purpose of Disbursement	FL 34230		0 000000000
Political Contribution		011	C C00412759
Candidate Name		Category/	Transaction ID: 48532419 Amount of Each Disbursement this Period
Buchanan, Vern, , Rep.,		Type	Amount of Each Disbursement this Feriod
	nent For: 2024		1000.00
	Primary General		Political Contribution
	Other (specify) ▼		Memo Item
State: FL District: 16			
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NAME OF COMMITTEE (In Full) American Academy of Neurology B	, ,		
/ Full Name (Last, First, Middle Initial)			
A. Delbene For Congress			Date of Disbursement
Mailing Address PO Box 477			03 20 2023
Kirkland	State Zip Code WA 98083		FEC Identification Number
Purpose of Disbursement Political Contribution Candidate Name		011	C C00459099 Transaction ID: 48532420
DelBene, Suzan, , Rep.,		Category/ Type	Amount of Each Disbursement this Period
Office Sought: Water House Disbursem Senate Water Water Disbursem Water Water Water Disbursem Water Water Disbursem Water Water Water Disbursem Water Water Disbursem Water Water Disbursem Water Water Disbursem Water Disbursem	nent For: 2024 Primary General		1000.00 Political Contribution
State: WA District: 01	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial) B. Friends Of John Barrasso			Date of Disbursement
Mailing Address PO Box 52008			03 20 7 2023
,	State Zip Code WY 82605		FEC Identification Number
Purpose of Disbursement Political Contribution	'	011	C C00436386
Candidate Name Barrasso, John, A., Sen., MD		Category/ Type	Transaction ID: 48532421 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For: 2024 Primary General Other (specify)	311-1	2000.00 Political Contribution
State: WY District:			Memo Item
Full Name (Last, First, Middle Initial) C. Cathy McMorris Rodgers For Cong	ıress		Date of Disbursement
Mailing Address Box 137			03 20 2023
City Spokane Purpose of Disbursement	State Zip Code WA 99210		FEC Identification Number
Political Contribution Candidate Name		011 Category/	C C00390476 Transaction ID: 48532423 Amount of Each Disbursement this Period
McMorris Rodgers, Cathy, , Rep.,		Type	
Senate President	nent For: 2024 Primary General Other (specify)		Folitical Contribution Memo Item
State: WA District: 05			
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SCHEDULE B (FEC Form 3X)			FOR LINE N	NUMBER:	PAGE 42 OF 50
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NAME OF COMMITTEE (In Full)					
American Academy of Neurology B	rainPAC				
Full Name (Last, First, Middle Initial)					
A. Brian Higgins For Congress				Date of Dis	sbursement
Mailing Address DO Doy 20				03	20 2023
Mailing Address PO Box 28				03	20 2023
,		Zip Code		FEC Identif	fication Number
Buffalo Purpose of Disbursement	NY	14220			
Political Contribution			011		0401034
Candidate Name			Category/		action ID: 48532424 Each Disbursement this Period
Higgins, Brian, M., Rep.,			Type		
	nent For: 20				1000.00
	Primary	General			Political Contribution
State: NY District: 26	Other (specify	y) \		Memo	Item
Full Name (Last, First, Middle Initial)					
3. Larson For Congress				Date of Dis	sbursement
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Mailing Address PO Box 261172				03	20 2023
,		Zip Code		FEC Identif	fication Number
Hartford Purpose of Disbursement	СТ	06126		0 000	2000440
Political Contribution			011		330142
Candidate Name			Category/		ction ID: 48532425 Each Disbursement this Period
Larson, John, B., Rep.,			Type	7 tillodille of	Zadii Biobardoment tino i diloa
	nent For: 20				1500.00
	Primary	General			Political Contribution
State: CT District: 01	Other (specify	у)		Memo	Item
Full Name (Last, First, Middle Initial)					
C. Morgan Griffith For Congress				Date of Dis	sbursement
Mailing Address PO Box 361				M M /	20 2023
Mailing Address PO Box 361				03	2023
City	State	Zip Code		FEC Identif	fication Number
Christiansburg Purpose of Disbursement	VA	24068			
Political Contribution			011		0477240
Candidate Name		L	Category/		action ID: 48532426 Each Disbursement this Period
Griffith, Morgan, H., Rep.,			Type	7 tillodilt of	Edon Biobardoment tino i chod
<u> </u>	nent For: 20				5000.00
	Primary	General			Political Contribution
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or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) American Academy of Neurology BrainP. Full Name (Last, First, Middle Initial) A. Dr. Raul Ruiz For Congress Mailing Address PO Box 3433 City Palm Desert Purpose of Disbursement Political Contribution Candidate Name Ruiz, Raul, , Rep., MD Office Sought: X House President State: CA District: 36 Full Name (Last, First, Middle Initial) B. Bucshon For Congress Mailing Address PO Box 250 City Newburgh Purpose of Disbursement Political Contribution Candidate Name Bucshon, Larry, , Rep., MD Office Sought: X House Senate Primary Purpose of Disbursement Political Contribution Candidate Name Bucshon, Larry, , Rep., MD Office Sought: X House Senate President Senate Primary Other (s	Zip Code 92261 Zip Code 92261 Zip Code	011 Category/	Date of Disbursement M M J 20 / 2023 FEC Identification Number C C00502575 Transaction ID: 48532427 Amount of Each Disbursement this Period Political Contribution Memo Item Date of Disbursement Date of Disbursement Date of Disbursement
American Academy of Neurology BrainP. Full Name (Last, First, Middle Initial) A. Dr. Raul Ruiz For Congress Mailing Address PO Box 3433 City Palm Desert Purpose of Disbursement Political Contribution Candidate Name Ruiz, Raul, , Rep., MD Office Sought: X House President State: CA District: 36 Full Name (Last, First, Middle Initial) B. Bucshon For Congress Mailing Address PO Box 250 City Newburgh Purpose of Disbursement Political Contribution Candidate Name Bucshon, Larry, , Rep., MD Office Sought: X House Senate President Senate President State: IN District: 08	Zip Code 92261 2024 General pecify) Zip Code	Category/	FEC Identification Number C C00502575 Transaction ID: 48532427 Amount of Each Disbursement this Period 5000.00 Political Contribution Memo Item Date of Disbursement 03 / 20 / 2023
Mailing Address PO Box 3433 City Palm Desert CA Purpose of Disbursement Political Contribution Candidate Name Ruiz, Raul, , Rep., MD Office Sought:	92261 2024 General pecify) Zip Code	Category/	FEC Identification Number C C00502575 Transaction ID: 48532427 Amount of Each Disbursement this Period 5000.00 Political Contribution Memo Item Date of Disbursement 03 / 20 / 2023
City Palm Desert Purpose of Disbursement Political Contribution Candidate Name Ruiz, Raul, , Rep., MD Office Sought: Senate President State: CA District: 36 Full Name (Last, First, Middle Initial) B. Bucshon For Congress Mailing Address PO Box 250 City Newburgh Purpose of Disbursement Political Contribution Candidate Name Bucshon, Larry, , Rep., MD Office Sought: A House Senate Primary Disbursement For: Senate President State: IN District: 08	92261 2024 General pecify) Zip Code	Category/	FEC Identification Number C C00502575 Transaction ID: 48532427 Amount of Each Disbursement this Period Political Contribution Memo Item Date of Disbursement Date of Disbursement
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Office Sought:	General pecify) ▼		Political Contribution Memo Item Date of Disbursement 03
B. Bucshon For Congress Mailing Address PO Box 250 City State IN Purpose of Disbursement Political Contribution Candidate Name Bucshon, Larry, , Rep., MD Office Sought:			03 / 20 / 2023
Newburgh Purpose of Disbursement Political Contribution Candidate Name Bucshon, Larry, , Rep., MD Office Sought:			FEC Identification Number
Candidate Name Bucshon, Larry, , Rep., MD Office Sought: X House Disbursement Formany		244	C C00468256
Senate President Other (s		011 Category/ Type	Transaction ID: 48532428 Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial)	General		Political Contribution Memo Item
Doggett For Congress			Date of Disbursement
Mailing Address PO Box 5843			03 20 2023
City State Austin TX Purpose of Disbursement Political Contribution	Zip Code 78763	011	FEC Identification Number C C00286500 Transaction ID : 48532430
Candidate Name Doggett, Lloyd, , Rep.,	0004	Category/ Type	Amount of Each Disbursement this Period
Office Sought: March House Disbursement For	General pecify)		Political Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional)			8500.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)			
American Academy of Neurology I	BrainPAC		
Full Name (Last, First, Middle Initial)			Date of Dielevraneur
A. Friends Of Dan Kildee			Date of Disbursement
Mailing Address P.O. Box 248			03 20 2023
City Flint	State Zip Code MI 48501		FEC Identification Number
Purpose of Disbursement Political Contribution	10001	011	C C00499947
Candidate Name		011	Transaction ID: 48532431
Kildee, Dan, , Rep.,		Category/ Type	Amount of Each Disbursement this Period
	ment For: 2024	туре	1000.00
Senate x	Primary General		Political Contribution
State: MI District: 05	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. Armstrong For Congress			Date of Disbursement
Mailing Address 1515 Burnt Boat Drive Box 112			03 20 2023
City Bismarck	State Zip Code ND 58503		FEC Identification Number
Purpose of Disbursement Political Contribution		011	C C00670547
Candidate Name		Category/	Transaction ID: 48532488 Amount of Each Disbursement this Period
Armstrong, Kelly, , Rep.,		Type	
	ment For: 2024		1000.00
Senate x President	Primary General Other (specify)		Political Contribution
State: ND District: 00	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) C. Dr John Joyce For Congress			Date of Disbursement
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Mailing Address 1002 Logan Blvd Ste 114 #237			03 20 2023
City	State Zip Code		FEC Identification Number
Altoona Purpose of Disbursement	PA 16602		C C00674259
Political Contribution		011	C C00674259 Transaction ID: 48532499
Candidate Name		Category/	Amount of Each Disbursement this Period
Joyce, John, , Rep., Office Sought: W House Disburse	ment For: 2024	Туре	1000.00
Office Sought: House Disburse Senate	Primary General		
President	Other (specify) ▼		Political Contribution Memo Item
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	7 one) 22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar	ments may not be sold or use ne and address of any politic	ed by any personal committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Academy of Neurology E	BrainPAC		
Full Name (Last, First, Middle Initial)			Date of Dishurasment
A. Marsha For Senate			Date of Disbursement
Mailing Address PO Box 3750			03 20 2023
City Brentwood	State Zip Code TN 37024		FEC Identification Number
Purpose of Disbursement Political Contribution		011	C C00376939
Candidate Name			Transaction ID: 48532510
Blackburn, Marsha, , Sen.,		Category/ Type	Amount of Each Disbursement this Period
	ment For: 2024	1,700	2000.00
Senate X	Primary General		Political Contribution
State: TN District: 02	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. Kathy Manning For Congress			Date of Disbursement
Mailing Address PO Box 41197			03 20 2023
City Greensboro	State Zip Code NC 27404		FEC Identification Number
Purpose of Disbursement	27404		C C00662577
Political Contribution		011	Transaction ID : 48532511
Candidate Name		Category/	Amount of Each Disbursement this Period
Manning, Kathy, , Rep.,		Туре	1000.00
	ment For: 2024 Primary General		1000.00
Senate x	Other (specify) General		Political Contribution
State: NC District: 06			Memo Item
Full Name (Last, First, Middle Initial) C. Joe Morelle For Congress			Date of Disbursement
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Mailing Address P.O. Box 90914			03 20 2023
,	State Zip Code		FEC Identification Number
Rochester Purpose of Disbursement	NY 14609		
Political Contributions		011	C C00675108 Transaction ID: 48532589
Candidate Name		Category/	Amount of Each Disbursement this Period
Morelle, Joseph, , Rep., Office Sought: House Disburser	ment For: 2024	Туре	1000.00
Senate Sought.	Primary General		
President	Other (specify) ▼		Political Contributions Memo Item
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 46 OF 50	5
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	Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b	
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NAME OF COMMITTEE (In Full)				
American Academy of Neurology B	rainPAC			
Full Name (Lock First Middle Initial)		<u> </u>		
Full Name (Last, First, Middle Initial) A. Richard E Neal For Congress Com	mittoo		Date of Disbursement	
" Nichard L Near For Congress Com	millee		M M / D D / Y Y Y	
Mailing Address 76 Magnolia Terrace			03 20 2023	
	T T			
,	State Zip Code MA 01108		FEC Identification Number	
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Political Contribution		011		
Candidate Name		Category/	Transaction ID: 48532590 Amount of Each Disbursement this Period	
Neal, Richard, E., Rep.,		Type		
	nent For: 2024		2500.00	
	Primary General		Political Contribution	
State: MA District: 01	Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)				_
B. Miller-Meeks For Congress			Date of Disbursement	
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Mailing Address PO Box 33			03 20 2023	
City	State Zip Code			
Ottumwa	IA 52501		FEC Identification Number	
Purpose of Disbursement			C C00558825	
Political Contribution		011	Transaction ID : 48532591	
Candidate Name		Category/	Amount of Each Disbursement this Period	
Miller-Meeks, Mariannette, , Rep., Office Sought: House Disbursen	nent For: 2024	Туре	1000.00	
	Primary General		Political Contribution	
	Other (specify)			
State: IA District: 02			Memo Item	
Full Name (Last, First, Middle Initial)				
C. Lahood For Congress			Date of Disbursement	
Mailing Address D.O. Day 40735			03 20 2023	
Mailing Address P.O. Box 10735			03 20 2023	
City	State Zip Code		FEC Identification Number	
Peoria	IL 61612			
Purpose of Disbursement Political Contribution		011	C C00575050	
Candidate Name			Transaction ID: 48532593 Amount of Each Disbursement this Period	
LaHood, Darin, , Rep.,		Category/ Type	Amount of Each disbursement this Period	
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	l (olicoit olii)	one)
	Detailed Summary Pag		22 X 23 26 27 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Academy of Neurology B	rainPAC		
Full Name (Last, First, Middle Initial)			Data of Dishara and
Wenstrup For Congress			Date of Disbursement
Mailing Address PO Box 9551			03 20 2023
Cincinnati	State Zip Code OH 45209		FEC Identification Number
Purpose of Disbursement Political Contribution	-	011	C C00497818 Transaction ID : 48532594
Candidate Name Wenstrup, Brad, , Rep.,		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For: 2024 Primary Genera		2500.00
	Other (specify) ▼		Political Contribution Memo Item
Full Name (Last, First, Middle Initial)			
B. Bera For Congress			Date of Disbursement
Mailing Address PO Box 582496			03 20 2023
,	State Zip Code CA 95758		FEC Identification Number
Purpose of Disbursement Political Contribution		011	C C00461061
Candidate Name		Category/	Transaction ID: 48532645 Amount of Each Disbursement this Period
Bera, Ami, , Rep., MD		Type	0500.00
	nent For: 2024		2500.00
President	Primary General Other (specify)	11	Political Contribution Memo Item
State: CA District: 07 Full Name (Last, First, Middle Initial)			_
C. Clarke For Congress			Date of Disbursement
Mailing Address 111-36 200th. Street			03 20 2023
,	State Zip Code NY 11412		FEC Identification Number
Purpose of Disbursement Political Contribution	1	011	C C00415331
Candidate Name Clarke, Yvette, D., Rep.,		Category/	Transaction ID: 48532656 Amount of Each Disbursement this Period
· · · · · · · · · · · · · · · · · · ·	nent For: 2024	Туре	1500.00
Senate	Primary General Other (specify) ▼	al	Political Contribution
State: NY District: 09	. , , , ,		Memo Item
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TOTAL This Period (last page this line number only).		· · · · · · · · · · · · · · · · · · ·	

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or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American Academy of Neurology Br	e and addres			
American Academy of Neurology Br	rainPAC			SOURCE CONTINUED IS ITOM SUCH COMMITTEE.
Oddtor i or Congress				Date of Disbursement
Mailing Address 301 W Platt Street, #385				03 20 2023
Tampa	tate Z	Zip Code 33606		FEC Identification Number
Purpose of Disbursement Political Contribution Candidate Name			011 Category/	C C00410761 Transaction ID: 48532657 Amount of Each Disbursement this Period
Senate x F	ent For: 202 Primary Other (specify	General	Type	1000.00 Political Contribution Memo Item
State: FL District: 14 Full Name (Last, First, Middle Initial) B. Jason Smith For Congress Mailing Address PO Box 1324				Date of Disbursement M M M / D D / Y Y Y Y Y 03 29 2023
Cape Girardeau Purpose of Disbursement Political Contribution	tate Z MO	Zip Code 63702	011	FEC Identification Number C C00541862 Transaction ID: 48545662
Senate X P	ent For: 20; Primary Other (specify	General	Category/ Type	Amount of Each Disbursement this Period 2500.00 Political Contribution Memo Item
Full Name (Last, First, Middle Initial) C. Emmer For Congress				Date of Disbursement
Mailing Address PO Box 998				03 29 2023
Anoka Purpose of Disbursement Political Contribution	tate 2 MN	Zip Code 55303	011	FEC Identification Number C C00545749 Transaction ID : 48545663
Candidate Name Emmer, Tom, Earl, Rep., Jr. Office Sought: House Disburseme	ent For: 202	24	Category/ Type	Amount of Each Disbursement this Period
Senate F	Primary Other (specify	General		Political Contribution Memo Item

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s		FOR LINE NUMBER: PAGE 49 OF 50 (check only one)		
	for each category of the Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b		
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NAME OF COMMITTEE (In Full) American Academy of Neurology E	, , , , , , , , , , , , , , , , , , ,		22 2222		
Full Name (Last, First, Middle Initial)					
A. Blumenauer For Congress	Date of Disbursement				
Mailing Address 901 Se Oak Street Suite 105			03 29 2023		
Portland	State Zip Code 97214		FEC Identification Number		
Purpose of Disbursement Political Contribution	·	011	C C00307314 Transaction ID : 48545664		
Candidate Name Blumenauer, Earl, , Rep.,		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburser	ment For: 2024 Primary General Other (specify) ▼	7	5000.00 Political Contribution Memo Item		
State: OR District: 03 Full Name (Last, First, Middle Initial)					
B. Hudson For Congress			Date of Disbursement		
Mailing Address PO Box 5053	03 29 2023				
City Sconcord	State Zip Code NC 28027		FEC Identification Number		
Purpose of Disbursement Political Contribution	C C00504522				
Candidate Name Hudson, Richard, L., Rep., Jr.	Transaction ID: 48545665 Amount of Each Disbursement this Period				
Office Sought: House Disbursen	ment For: 2024 Primary General Other (specify)	Туре	Political Contribution Memo Item		
Full Name (Last, First, Middle Initial) C. Mike Kelly For Congress			Date of Disbursement		
Mailing Address PO Box 476			03 29 2023		
City Lyndora Purpose of Disbursement	State Zip Code PA 16045		FEC Identification Number		
Political Contribution Candidate Name	Transaction ID : 48545671 Amount of Each Disbursement this Period				
	ment For: 2024 Primary General Other (specify)	Туре	1000.00 Political Contribution Memo Item		
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TOTAL This Period (last page this line number only))				

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Full Name (Last, First, Middle Initial) A. Bilirakis For Congress Mailing Address PO Box 606	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Tarpon Springs Purpose of Disbursement Political Contribution Candidate Name Bilirakis, Gus, M., Rep., Office Sought: X House Disbursement Rep. Disbursement Rep. Disbursement Rep. Rep		General	011 Category/ Type	FEC Identification Number C C00408534 Transaction ID: 48545672 Amount of Each Disbursement this Period 1000.00 Political Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Mailing Address	Date of Disbursement			
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District:				FEC Identification Number C Amount of Each Disbursement this Period Memo Item
Full Name (Last, First, Middle Initial) C. Mailing Address	Date of Disbursement			
City S Purpose of Disbursement Candidate Name	FEC Identification Number C Amount of Each Disbursement this Period			
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