Image# 10931474792

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT ▼

Example:If typing, type over the lines

Political Action Committee of the American Association of Orthopaedic Surgeons

ADDRESS (number and street) ▼

317 Massachusetts Avenue, NE

1st Floor

Check if different than previously reported. (ACC)

Washington | DC | 20002 –

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲ STATE ▲ ZIPCODE ▲

C00343137

3. IS THIS REPORT [ ] NEW (N) **OR** [X] AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report(Q1)
- [ ] July 15 Quarterly Report(Q2)
- [X] October 15 Quarterly Report(Q3)
- [ ] January 31 Quarterly Report(YE)
- [ ] July 31 Mid-Year Report(Non-election Year Only) (MY)
- [ ] Termination Report (TER)

(b) Monthly Report Due On:

- [ ] Feb 20 (M2)
- [ ] Mar 20 (M3)
- [ ] Apr 20 (M4)
- [ ] May 20 (M5)
- [ ] Jun 20 (M6)
- [ ] Jul 20 (M7)
- [ ] Aug 20 (M8)
- [ ] Sep 20 (M9)
- [ ] Oct 20 (M10)
- [ ] Nov 20 (M11) (Non-Election Year Only)
- [ ] Dec 20 (M12) (Non-Election Year Only)
- [ ] Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the:

- [ ] Primary (12P)
- [ ] General (12G)
- [ ] Runoff (12R)
- [ ] Convention (12C)
- [ ] Special (12S)

Election on [ ] [ ] [ ] in the State of [ ]

(d) 30-Day **Post** -Election Report for the:

- [ ] General (30G)
- [ ] Runoff (30R)
- [ ] Special (30S)

Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 07 01 2010 through 09 30 2010

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

Type or Print Name of Treasurer: William J. Robb, III, MD

Signature of Treasurer: Electronically Filed by William J. Robb, III, MD Date 10 15 2010

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

Office Use Only

FEC FORM 3X
(Rev. 12/2004)

FE6AN026

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name
Political Action Committee of the American Association of Orthopaedic Surgeons

Report Covering the Period: From: 07 01 2010 To: 09 30 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2010		1244924.20
(b) Cash on Hand at Begining of Reporting Period	1570548.58	
(c) Total Receipts (from Line 19)	277776.28	1218756.29
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1848324.86	2463680.49
7. Total Disbursements (from Line 31)	501570.48	1116926.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1346754.38	1346754.38
9. Debts and Obligations owed **TO** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed **BY** the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons

Report Covering the Period: From: 07 01 2010 To: 09 30 2010

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	240760.00	1106308.00
(ii) Unitemized	22391.00	77510.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	263151.00	1183818.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	263151.00	1183818.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	2549.08	17781.76
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	12000.00	17000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	76.20	156.53
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	277776.28	1218756.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	277776.28	1218756.29

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	3095.48	18347.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	3095.48	18347.11
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	492500.00	1092604.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	975.00	975.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	975.00	975.00
29. Other Disbursements	5000.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	501570.48	1116926.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	501570.48	1116926.11

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	263151.00	1183818.00
34. Total Contribution Refunds (from Line 28(d))	975.00	975.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	262176.00	1182843.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3095.48	18347.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	2549.08	17781.76
38. Net Operating Expenditures (subtract Line 37 from Line 36)	546.40	565.35

Image# 10931474797

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Kevin F. Darr, MD
Mailing Address 71617 Riverside Dr
City: Covington | State: LA | Zip Code: 70433-9031
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: AEAADAEFBF3BD4E2D81D
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Robert J. De Troye, MD
Mailing Address 3610 Greenwood Dr
City: Johnson City | State: TN | Zip Code: 37604-2835
FEC ID number of contributing federal political committee. C
Name of Employer: Watauga Ortho
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A49E6DA691633490BA2C
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
John R. Denton, MD
Mailing Address 1333a North Ave Pmb 434
City: New Rochelle | State: NY | Zip Code: 10804-2120
FEC ID number of contributing federal political committee. C
Name of Employer: St Vincent Catholic Medical Ct
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: AF3D0E1F7EC4C4C76B51
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3000.00**

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

Image# 10931474798

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Shepard R. Hurwitz, MD
Mailing Address 400 Silver Cedar Ct
City: Chapel Hill | State: NC | Zip Code: 27514-1585
FEC ID number of contributing federal political committee. C
Name of Employer: ABOS
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2250.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: AE1317080220C4D75899
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Bryan Scott Kamps, MD
Mailing Address 621 Vandenbosch Pkwy
City: Gallup | State: NM | Zip Code: 87301-4537
FEC ID number of contributing federal political committee. C
Name of Employer: RMCHS
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A2A056032BC0F431AB5F
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Allen G. Lang, MD
Mailing Address 1100 British Columbia Ave
City: Ames | State: IA | Zip Code: 50014-3730
FEC ID number of contributing federal political committee. C
Name of Employer: Vmac
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A7B75ABF096184977BC9
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474799

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark J. Lemos, MD
Mailing Address 1164 Ocean Blvd
City: Rye | State: NH | Zip Code: 03870-2835
FEC ID number of contributing federal political committee. C
Name of Employer: Lahey Clinic
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A0A5904EEAC52413DB86
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Scott K. McClelland, MD
Mailing Address 135 East Shore Rd
City: Monroe | State: LA | Zip Code: 71203-8857
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Clinic Of Daytona
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: ABFC00FB2EEDB4732860
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
David R. Morawski, MD
Mailing Address 2525 Kaneville Rd
City: Geneva | State: IL | Zip Code: 60134-2578
FEC ID number of contributing federal political committee. C
Name of Employer: Fox Valley Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A530971A19FD3431BAC3
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 1250.00

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

Image# 10931474800

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Dennis P. Rivero, MD
Mailing Address 1457 Bluebell Dr
City: Albuquerque | State: NM | Zip Code: 87122-1105
FEC ID number of contributing federal political committee. C
Name of Employer: Unm Health Science Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: AB60F1DDD950A401DAAE
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
S. Robert Rozbruch, MD
Mailing Address 10 Horton Ct
City: West Harrison | State: NY | Zip Code: 10604-1120
FEC ID number of contributing federal political committee. C
Name of Employer: Hospital For Special Surg-ery
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A200A345F07F645F1A85
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Paul Strawn Sherbondy, MD
Mailing Address 507 Beaumont Dr
City: State College | State: PA | Zip Code: 16801-8311
FEC ID number of contributing federal political committee. C
Name of Employer: Penn State Hershey
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 16 / 2010
Transaction ID: A3E7D961E67584390925
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474801

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Faruk Said Abuzzahab, MD
Mailing Address 3902 Ashland Ave
City: Wausau | State: WI | Zip Code: 54403-8144
FEC ID number of contributing federal political committee: C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A2ADF6A5D611444A0B4A
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Afshin Aminian, MD
Mailing Address 5 Johnston Dr
City: Morristown | State: NJ | Zip Code: 07960-6042
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A9027035FFBB44329B2A
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Michael Champine, MD
Mailing Address 8210 Walnut Hill Ln
Ste 130, Lb 11
City: Dallas | State: TX | Zip Code: 75231-4405
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A87702E4C569B4548AD2
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2500.00**

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

Image# 10931474802

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Roger B. Collins, MD
Mailing Address 105 N. Greenleaf St
City: Gurnee | State: IL | Zip Code: 60031-3326
FEC ID number of contributing federal political committee. C
Name of Employer: Greenleaf Orthopaedic Ass-ociat
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AC5C8647DF06B4747A74
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
James W. Gallentine, MD
Mailing Address 3121 Sheridan Blvd
City: Lincoln | State: NE | Zip Code: 68502-5232
FEC ID number of contributing federal political committee. C
Name of Employer: Nebraska Ortho & Sports Med
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AD2A737D7993947709F7
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
James Ragan Gosey, Jr, MD
Mailing Address 1850 Gause Blvd Suite 300
City: Slidell | State: LA | Zip Code: 70461-5434
FEC ID number of contributing federal political committee. C
Name of Employer: Elite Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A8DD60B67435D4081B3A
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 10931474803

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Nicholas P. Grosso, MD
Mailing Address 10113 Lakeside Ct
City: Ellicott City | State: MD | Zip Code: 21042-6340
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates of Central MD
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A284B19A7C4774FB4807
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Blake Gammell Johnson, MD
Mailing Address 2733 Skyline Dr
City: Twin Falls | State: ID | Zip Code: 83301-8162
FEC ID number of contributing federal political committee. C
Name of Employer: Intermountain Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A0C169A719DD646BAB83
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Steven T. Kelley, MD
Mailing Address 40949 Winchester Rd
City: Temecula | State: CA | Zip Code: 92591-6031
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Surgery & Sports Medicine
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A07A270DD36904FDFBC8
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 10931474804

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Dominic James Kleinhenz, MD
Mailing Address Lighthouse Orthopedics
1821 Ne 25th St
City: Lighthouse Point | State: FL | Zip Code: 33064-7744
FEC ID number of contributing federal political committee. C
Name of Employer: Lighthouse Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A9926A3839C194F2498A
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Cyrus J. Lashgari, MD
Mailing Address 1568 Comanche Rd
City: Arnold | State: MD | Zip Code: 21012-2500
FEC ID number of contributing federal political committee. C
Name of Employer: Anne Arundel Medical Cent-er
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A6021F2DBBD8A4E5B981
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Robert C. Lehmer, MD
Mailing Address 2300 E. 30th St Bldg D-101
City: Farmington | State: NM | Zip Code: 87401-8991
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Associates, LLC
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AC54E34328A844FFBA77
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 10931474805

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Gregory P. Lynch, MD
Mailing Address 6425 Verona Rd
City: Mission Hills | State: KS | Zip Code: 66208-1834
FEC ID number of contributing federal political committee. C
Name of Employer: Johnson County Orthopaedi-cs
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AC5DCC2E196584E5D894
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
John J. McCrosson, MD
Mailing Address 1077 Groves Manor Ct
City: Mt Pleasant | State: SC | Zip Code: 29464-3576
FEC ID number of contributing federal political committee. C
Name of Employer: Roper St Francis Healthca-re
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A7DB3382333E64F9AABC
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Gregory S. McDowell, MD
Mailing Address 2900 12th Ave N. Suite 140W
City: Billings | State: MT | Zip Code: 59101-7507
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Montana
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A1C1DFCA3F5514E0C9F3
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2500.00**

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

Image# 10931474806

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
William C. McMaster, MD
Mailing Address 142 Calle De Andalucia
City: Redondo Beach | State: CA | Zip Code: 90277-6701
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2010
Transaction ID: ADC1E29CD7BA94D9FB31
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Jose Manuel Montanez-Huertas, MD
Mailing Address Villa Torrimar Reina Isabel 410
City: Guaynabo | State: PR | Zip Code: 00969
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2010
Transaction ID: AB30A80026CEE4E68A93
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
James V. Nepola, MD
Mailing Address 200 Hawkins Dr
Dept Of Ortho
City: Iowa City | State: IA | Zip Code: 52242-1007
FEC ID number of contributing federal political committee. C
Name of Employer: Univ of Iowa Hospitals & Clinics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: M M 07 / D D 22 / Y Y Y Y 2010
Transaction ID: A445F44A6DCDA4A3C85D
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474807

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
C. Daniel Smith, DO
Mailing Address 2501 Gene Field Rd
City: Saint Joseph | State: MO | Zip Code: 64506-1613
FEC ID number of contributing federal political committee. C
Name of Employer: The Ortho & Sports Medici-ne Ct
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AF5DC79DD06714F6A8A5
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Steven O. Smith, MD
Mailing Address PO Box 11230
City: Fort Smith | State: AR | Zip Code: 72917-1230
FEC ID number of contributing federal political committee. C
Name of Employer: River Valley Musculoskele-tal C
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A6AFCEFAF08E748B194C
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Joseph G. Thometz, MD
Mailing Address 10500 Capistrano
City: Orland Park | State: IL | Zip Code: 60467-8245
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AC485E01ECFF94727875
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3000.00**

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

Image# 10931474808

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Bruce Wolock, MD
Mailing Address 8564 Leisure Hill Dr
City: Baltimore | State: MD | Zip Code: 21208-1740
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: AC08ED85778FA4C7CBC6
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Robert Knox Yarbrough, MD
Mailing Address 4 Sterling Ct
City: Cartersville | State: GA | Zip Code: 30120-6469
FEC ID number of contributing federal political committee. C
Name of Employer: Resurgens Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: A548ED69638104CA5921
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Jeffrey L. Zilberfarb, MD
Mailing Address 1 Rollins Place
City: Boston | State: MA | Zip Code: 02114-3706
FEC ID number of contributing federal political committee. C
Name of Employer: Beth Israel Deaconess Medical
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 07 / 22 / 2010
Transaction ID: ACC90FC4DF45E4869BB1
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474809

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Joseph E. Alhadeff, MD
Mailing Address 710 Oakwood Dr
City: Red Lion | State: PA | Zip Code: 17356-8285
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic & Spine Speci-alist
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: ADE5CF08FE80047DBA50
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Joseph E. Broyles, MD
Mailing Address 1371 Elmcrest Dr
City: Baton Rouge | State: LA | Zip Code: 70808-8882
FEC ID number of contributing federal political committee. C
Name of Employer: Bone & Joint Ctr Of Baton Roug
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: A520127A3CF834D939B3
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
John T. Capo, MD
Mailing Address 58 Jefferson St Unit A
City: Hoboken | State: NJ | Zip Code: 07030-1804
FEC ID number of contributing federal political committee. C
Name of Employer: UMDNJ
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: A48568CDD2B3E4D089B3
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1800.00**

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

Image# 10931474810

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Harold J. Hebert, Jr, MD
Mailing Address 510 Jefferson Terrace Blvd
City: New Iberia | State: LA | Zip Code: 70560
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: AFC777B9E0E1D4390925
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Ajoy K. Jana, MD
Mailing Address 15902 Patrick Ave
City: Omaha | State: NE | Zip Code: 68116-2430
FEC ID number of contributing federal political committee. C
Name of Employer: Physicians Clinic Sports Med C
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: AC4A9385656EF4566AAB
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Michael E. Kiehn, MD
Mailing Address 3113 Canyon Rd
City: Oklahoma City | State: OK | Zip Code: 73120-5614
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: ADE89088FA3664DE79A2
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474811

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 229
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jeffrey C. King, MD
Mailing Address 7665 Finnagen Dr
City: Mattawan | State: MI | Zip Code: 49071-9541
FEC ID number of contributing federal political committee. C
Name of Employer: Healthcare Midwest
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 / 04 / 2010
Transaction ID: AD1399C4873D64F77AC0
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Brett T. Krepps, MD
Mailing Address 13309 Stagg Hill Dr
City: Carmel | State: IN | Zip Code: 46033-8286
FEC ID number of contributing federal political committee. C
Name of Employer: Reid Orthopaedic Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 08 / 04 / 2010
Transaction ID: A2631D477294F442EA1E
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Francois D. Lalonde, MD
Mailing Address 4103 Rivoli
City: Newport Beach | State: CA | Zip Code: 92660-9030
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 04 / 2010
Transaction ID: AD036783741F2499390A
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 1750.00

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

Image# 10931474812

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Craig G. Mohler, MD
Mailing Address Slocum Orthopedics
55 Coburg Rd
City: Eugene | State: OR | Zip Code: 97401-2433
FEC ID number of contributing federal political committee. C
Name of Employer: Slocum Ortho & Sports Medicine
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: AFD162D77E9EE4D38A34
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Rosemarie M. Morwessel, MD
Mailing Address 28 Country Club Rd
City: Mobile | State: AL | Zip Code: 36608-2357
FEC ID number of contributing federal political committee. C
Name of Employer: Azalea Orthopaedics & Sports M
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: A81463FBE31764980B44
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Jack Wayne Pennington, MD
Mailing Address 250 Summit Way
City: Blairsville | State: GA | Zip Code: 30512-4691
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: AE437C8C9C3134E68A40
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474813

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Karolyn M. Senica, MD
Mailing Address 2205 Palo Alto Dr
City: Springfield | State: IL | Zip Code: 62711-9672
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Center Of Illinois
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: A7DC12B06538745B9897
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Kipling P. Sharpe, MD
Mailing Address 2940 E. Banner Gateway Dr Suite 20
City: Gilbert | State: AZ | Zip Code: 85234-2171
FEC ID number of contributing federal political committee. C
Name of Employer: OSNA
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: A1B8C766C28C2426D874
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Gregory G. White, MD
Mailing Address 2052 Breckenridge Dr
City: Mount Juliet | State: TN | Zip Code: 37122-6305
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: AA94314CC690A4B2CB98
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474814

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Brian R. Wolf, MD
Mailing Address 66 Crabapple Ct
City: Iowa City | State: IA | Zip Code: 52246-9407
FEC ID number of contributing federal political committee: C
Name of Employer: University Of Iowa
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: A4CB5A50ED4B24FCC8E0
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
David J. Zehr, MD
Mailing Address 4029 Buena Vista
City: Dallas | State: TX | Zip Code: 75204-7803
FEC ID number of contributing federal political committee: C
Name of Employer: Lankford Hand Surgery
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1200.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: AEF2C4E31B81243F79DC
Amount of Each Receipt this Period: 1200.00

C.
Full Name (Last, First, Middle Initial)
Robert H. Falender, MD
Mailing Address 10419 Trewithen Ln
City: Carmel | State: IN | Zip Code: 46032-8247
FEC ID number of contributing federal political committee: C
Name of Employer: Ortho Indy
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 17 / 2010
Transaction ID: A496246E247D24ADF9B0
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1700.00**

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

Image# 10931474815

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
W. Benjamin Kibler, MD
Mailing Address 700 Bob-O-Link Dr
City: Lexington | State: KY | Zip Code: 40504
FEC ID number of contributing federal political committee. C
Name of Employer: Lexington Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 17 / 2010
Transaction ID: A82186AF5CEE94771BCC
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Leo K. Ludwig, MD
Mailing Address 2200 Wiggins Ave
City: Springfield | State: IL | Zip Code: 62704-4376
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Center Of Illinois
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 17 / 2010
Transaction ID: A460025FD5E5A4A3E95F
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
William Kemp Montgomery, MD
Mailing Address 6309 Whittier Dr
City: Plano | State: TX | Zip Code: 75093-6141
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 17 / 2010
Transaction ID: A55C6308B895846E1B84
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 10931474816

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James M. Retmier, MD
Mailing Address 714 N. College Rd Suite A
City: Twin Falls | State: ID | Zip Code: 83301-5812
FEC ID number of contributing federal political committee. C
Name of Employer: St Lukes Intermountain Ortho Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 17 / 2010
Transaction ID: AC5A8A489D7E3428FAD8
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Martin Shelton Tullus, MD
Mailing Address 4011 Talbot Rd S. Suite 300
City: Renton | State: WA | Zip Code: 98055-5791
FEC ID number of contributing federal political committee. C
Name of Employer: Proliance Surgeons
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 17 / 2010
Transaction ID: AA0A8E302D36441FEBC5
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Charles Engh, Jr., MD
Mailing Address 1401 Greenwood Pl
City: Alexandria | State: VA | Zip Code: 22304-1604
FEC ID number of contributing federal political committee. C
Name of Employer: Anderson Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 19 / 2010
Transaction ID: A819D02CB3DFE4E6791E
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) **3000.00**

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

Image# 10931474817

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
William Ritchie
Mailing Address POB 4252
City: Albuquerque | State: NM | Zip Code: 87196-4252
FEC ID number of contributing federal political committee. C
Name of Employer: New Mexico Orthopedic Associates
Occupation: Physician
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 20 / 2010
Transaction ID: AA19690103AC545998E1
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Joseph C. DiRaimondo, MD
Mailing Address 1636 Miriam Rd
City: Manitowoc | State: WI | Zip Code: 54220-1843
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: A4C6E5CC2352D41F9BC1
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Warren G. Kramer, III, MD
Mailing Address 1401 Avocado Ave Suite 307
City: Newport Beach | State: CA | Zip Code: 92660-8732
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: A2C8276F8E9DE4A0782F
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474818

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Craig Hunter Lovett, MD
Mailing Address 585 Stanislaus St Suite A
City: Angels Camp | State: CA | Zip Code: 95222-9355
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: A0DAE2A7545524348866
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
John H. Lyon, MD
Mailing Address 25393 W. Scott Rd
City: Barrington | State: IL | Zip Code: 60010-2422
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Surgery Specialists, Ltd
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: AFE4FDD87F0A244CD87C
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Marc I. Malberg, MD
Mailing Address 1527 State Hwy 27 Suite 1300
City: Somerset | State: NJ | Zip Code: 08873-3905
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: AF122CCBC42E9466BA35
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474819

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
J. Chris Osgood, MD
Mailing Address 1720 S. Karl Johan Ave
City: Tacoma | State: WA | Zip Code: 98465-1224
FEC ID number of contributing federal political committee: C
Name of Employer: Group Health
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: A9932EA03DDD64EE8827
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
K. Daniel Riew, MD
Mailing Address 660 S. Euclid Ave Cb 8233
City: Saint Louis | State: MO | Zip Code: 63110-1010
FEC ID number of contributing federal political committee: C
Name of Employer: Washington University
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 08 / 31 / 2010
Transaction ID: ACBA1E0503C1A4F7CAEA
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Brian J. Galinat, MD
Mailing Address 1941 Limestone Rd
City: Wilmington | State: DE | Zip Code: 19808-5408
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 04 / 2010
Transaction ID: A4D45E94C12DE4E1391C
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2250.00

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

Image# 10931474820

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Kenneth J. Edwards, MD
Mailing Address 368 Ridgeway St
City: Saint Joseph | State: MI | Zip Code: 49085-1051
FEC ID number of contributing federal political committee. C
Name of Employer: Southwest Michigan Center of Orthopaed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 08 / 2010
Transaction ID: AF335E19FFDA74E2D9C1
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Penny J. Lawin, MD
Mailing Address 131 Royal Lytham
City: Jackson | State: MS | Zip Code: 39211-2516
FEC ID number of contributing federal political committee. C
Name of Employer: Ms Sports Medicine
Occupation: Physician/Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 08 / 2010
Transaction ID: A85685459D8854034B01
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
James R. Leonard
Mailing Address 547 Kickapoo Circle
City: Loveland | State: OH | Zip Code: 45140-9143
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopeadic Consultants of Cincinnati
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 09 / 2010
Transaction ID: AA365366F6D8B4930B80
Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4000.00**

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

Image# 10931474821

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Dr. Cassim Igram, MD
Mailing Address 1755 NW 130th Street
City: Clive | State: IA | Zip Code: 50325-7435
FEC ID number of contributing federal political committee: C
Name of Employer: Iowa Orthopaedic Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 11 / 2010
Transaction ID: A376F0E7837F345098D1
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Lawrence Berson, MD
Mailing Address 71 Arlen Way
City: West Hartford | State: CT | Zip Code: 06117-1104
FEC ID number of contributing federal political committee: C
Name of Employer: MOS,PC
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 875.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: A8EA376BA3EA94DD8AF5
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
Julius Stephen Brecht, MD
Mailing Address 25 Chatham Rd
City: Longmeadow | State: MA | Zip Code: 01106-1203
FEC ID number of contributing federal political committee: C
Name of Employer: New England Ortho Surgeons
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: A88CBD4452F48471D837
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1125.00**

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

Image# 10931474822

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David Reese Hicks, MD
Mailing Address 6585 S. Yale Suite 200
City: Tulsa | State: OK | Zip Code: 74136-8315
FEC ID number of contributing federal political committee: C
Name of Employer: CSOS, Inc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: A9656D623026E431BA15
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Joshua J. Jacobs, MD
Mailing Address 2407 Pomona Ln
City: Wilmette | State: IL | Zip Code: 60091-2277
FEC ID number of contributing federal political committee: C
Name of Employer: Midwest Orthopaedics At Rush
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: AE8649FBB7FB44792A31
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Peter A. Looby, MD
Mailing Address 810 E. 23rd St
City: Sioux Falls | State: SD | Zip Code: 57105-2135
FEC ID number of contributing federal political committee: C
Name of Employer: Orthopedic Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: AF1F5A1F6BDE747DD9C2
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2500.00**

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

Image# 10931474823

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Steven S. Louis, MD
Mailing Address 222 E. 6th St
City: Hinsdale | State: IL | Zip Code: 60521-4611
FEC ID number of contributing federal political committee. C
Name of Employer: Hinsdale Orthopaedic Associate
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: A87338EF4833E47DCBDE
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
James W. Maxey, MD
Mailing Address 13004 N. Georgetown Rd
City: Dunlap | State: IL | Zip Code: 61525-9470
FEC ID number of contributing federal political committee. C
Name of Employer: Great Plains Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: ABCD90E4C742743C08F1
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Daniel J. Nagle, MD
Mailing Address 737 N. Michigan Ave Suite 700
City: Chicago | State: IL | Zip Code: 60611-6662
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: AF799EF0436CE4220A31
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474824

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Gerald J. Ortiz, MD
Mailing Address 5010 State Hwy 30 Suite 205
City: Amsterdam | State: NY | Zip Code: 12010-7532
FEC ID number of contributing federal political committee. C
Name of Employer: Mohawk Valley Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 450.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: AA3429C3C8B784ADBA08
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial)
Brereton B Strafford, MD
Mailing Address 17 Lummi Key
City: Bellevue | State: WA | Zip Code: 98006-1015
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: AD99E494972A84159AA5
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Arthur L. Valadie, III, MD
Mailing Address 526 56th St
City: Holmes Beach | State: FL | Zip Code: 34217-1528
FEC ID number of contributing federal political committee. C
Name of Employer: Coastal Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: A4902177C89504865A31
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474825

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Donald J. Zoltan, MD
Mailing Address 3033 W. Layton Ave #102
City: Greenfield | State: WI | Zip Code: 53221-2628
FEC ID number of contributing federal political committee. C
Name of Employer: Sports Med & Ortho Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 13 / 2010
Transaction ID: AD8FC402ED80C439CB35
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
David M. Ashkenaze, MD
Mailing Address 5 Via Las Rosas
City: Laguna Niguel | State: CA | Zip Code: 92677-5500
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: ABB587FD6F6D3422E80C
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
Robert J. Benz, MD
Mailing Address 2107 Linden Lake Road
City: Fort Collins | State: CO | Zip Code: 80524-5016
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho & Spine Ctr of Rock-ies
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A5AF01322B055453982A
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474826

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Oren G. Blam, MD
Mailing Address 7654 Midtown Rd
City: Fulton | State: MD | Zip Code: 20759-2513
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates of Central Mary
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A27DC9D1AD3604F9B997
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Harold S. Boyd, MD
Mailing Address 4800 Hh Rd NW
City: Salem | State: OR | Zip Code: 97304
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A07DB8EDCB4F6437F96D
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Bradd Burkhart, MD
Mailing Address 1117 Burnside Dr
City: Asheville | State: NC | Zip Code: 28803-3234
FEC ID number of contributing federal political committee. C
Name of Employer: Blue Ridge Bone & Joint
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A74E2487DB94C4840A14
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ▶ **1400.00**

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

Image# 10931474827

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Earl Victor Carlson, MD
Mailing Address 2747 A Colonial St
City: Hays | State: KS | Zip Code: 67601-1805
FEC ID number of contributing federal political committee. C
Name of Employer: Retired
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: ABF1E51D8145A42DE85F
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
Abhinav Bobby Chhabra, MD
Mailing Address 2108 Piper Way
City: Keswick | State: VA | Zip Code: 22947-9164
FEC ID number of contributing federal political committee. C
Name of Employer: University of Virginia
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A948B729ABA6A4EFAB82
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Bryan T. Edwards, MD
Mailing Address 13518 Robert Walker Drive
City: Davidson | State: NC | Zip Code: 28036-6008
FEC ID number of contributing federal political committee. C
Name of Employer: Novant Health
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A00A4304C205A48B09D2
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

Image# 10931474828

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark E. Fahey, MD
Mailing Address 3017 O'Brien Dr
City: Tallahassee | State: FL | Zip Code: 32309-2752
FEC ID number of contributing federal political committee. C
Name of Employer: Tallahassee Orthopedic Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AACB50625EAE84BBC82D
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Bruce S. Fletcher, MD
Mailing Address 5901 Colonial Dr Suite 201
City: Margate | State: FL | Zip Code: 33063-5683
FEC ID number of contributing federal political committee. C
Name of Employer: Northwest Broward Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A6B69CB152F404F2A9D9
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
William D. Fritz, MD
Mailing Address 357 Camp Wilbea Rd
City: Franklin | State: PA | Zip Code: 16323-7417
FEC ID number of contributing federal political committee. C
Name of Employer: Center for Bone & Joint Surgery
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A1FD4EF83275E494EAC1
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474829

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Vincent P. Genovese, MD
Mailing Address 400 Burkley Dr
City: Greenville | State: KY | Zip Code: 42345-2106
FEC ID number of contributing federal political committee. C
Name of Employer: Myhlenbeurg Community Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A6082E364DC3B4F49A09
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Dennis H. Gordon, MD
Mailing Address PO Box 17290
City: Salt Lake City | State: UT | Zip Code: 84117-0290
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AC79EFAF260A4402C884
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
James J. Hamilton, MD
Mailing Address 8736 Cherokee Ct
City: Leawood | State: KS | Zip Code: 66206-1104
FEC ID number of contributing federal political committee. C
Name of Employer: University Physician Associate
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A794E48B5D8C44C70B52
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474830

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David M. Henneghan, MD
Mailing Address 2111 Shadow View Circle
City: Plover | State: WI | Zip Code: 54467-2943
FEC ID number of contributing federal political committee. C
Name of Employer: Klasinski Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AAA20D7250E9A46F29FF
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Robert K. Henrichsen, MD
Mailing Address 13000 Big Sky Place
City: Auburn | State: CA | Zip Code: 95602-9151
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A4949CA04DE0D4F24863
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Harry N. Herkowitz, MD
Mailing Address Medical Office Bldg
3535 W 13 Mile Rd Ste 744
City: Royal Oak | State: MI | Zip Code: 48073-6770
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: ACD67BA6F65014A77882
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474831

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
William A. Herndon, MD
Mailing Address 2109 Worthington Ln
City: Edmond | State: OK | Zip Code: 73013-6517
FEC ID number of contributing federal political committee. C
Name of Employer: University of Oklahoma
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A09BFA1C3A1D94D41B5A
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial)
Regina O. Hillsman, MD
Mailing Address 1183 New Haven Rd
City: Naugatuck | State: CT | Zip Code: 06770-5033
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AA3C5E843AC9D41D99D9
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Raymond L. Horwood, MD
Mailing Address 24723 Detroit Rd
City: Westlake | State: OH | Zip Code: 44145-2526
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AF02A11A4F54B4400BBF
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

Image# 10931474832

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John Paul Houde, MD
Mailing Address 241 Elm St
City: Claremont | State: NH | Zip Code: 03743
FEC ID number of contributing federal political committee. C
Name of Employer: Valley Regional Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AAE1CA6A5C7DC40A7A4D
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
David J. Howe, MD
Mailing Address 5473 Summer Hill Ln
City: Winston Salem | State: NC | Zip Code: 27106-4497
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AB0A04AEBE31F4341B7C
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
William John Jason, MD
Mailing Address 120 Medical Blvd Suite 109
City: Spring Hill | State: FL | Zip Code: 34609-0221
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AC22F3FD1685E4E9B8CC
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474833

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
George S. Kappakas, MD
Mailing Address 328 Shalimar Ct
City: Monroeville | State: PA | Zip Code: 15146-4358
FEC ID number of contributing federal political committee. C
Name of Employer: Pittsburgh Bone & Joint Clinic
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A8FB8B67C098D45B7B87
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Douglas W. Kiburz, MD
Mailing Address 5075 Hwy Y
City: Sedalia | State: MO | Zip Code: 65301-8994
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: ABAB93819F267454B9F6
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Scott G. Kleiman, MD
Mailing Address 1216 Timberland Dr
City: Marietta | State: GA | Zip Code: 30067-5123
FEC ID number of contributing federal political committee. C
Name of Employer: Resurgens Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AC1825AF992C94EB7BCF
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474834

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Don A. Kovalsky, MD
Mailing Address 4121 Veterans Memorial Dr
City: Mount Vernon | State: IL | Zip Code: 62864-6262
FEC ID number of contributing federal political committee. C
Name of Employer: James C Chow, MD, Ltd
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A705232A71B2A40D091F
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial)
Michael Lastihenos, MD
Mailing Address 10 Norman Ct
City: Dix Hills | State: NY | Zip Code: 11746-5812
FEC ID number of contributing federal political committee. C
Name of Employer: Suffolk Orthopaedic Assoc-iates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 450.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A49774357DB6B466F895
Amount of Each Receipt this Period: 150.00

C.
Full Name (Last, First, Middle Initial)
Alan G. Lewis, MD
Mailing Address 11510 S. Granite Ave
City: Tulsa | State: OK | Zip Code: 74137-7763
FEC ID number of contributing federal political committee. C
Name of Employer: Eastern Oklahoma Orthopae-dic C
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AD149F6B828A94786A92
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1400.00**

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

Image# 10931474835

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Donald M. Lewis, MD
Mailing Address 216 Harrington Ct
City: Alamo | State: CA | Zip Code: 94507-1491
FEC ID number of contributing federal political committee. C
Name of Employer: Muir Orthopaedic Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A83B3F4D35DF34922AD3
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Joel W. Lubin, MD
Mailing Address 2007 Arena Dr
City: Davis | State: CA | Zip Code: 95618-6754
FEC ID number of contributing federal political committee. C
Name of Employer: Sutter West Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AC43393A8D52344B68C2
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Michael Alan MacKay, MD
Mailing Address Orthopaedic Surgeons of Oak Ridge
90 Vermont Ave Ste 300
City: Oak Ridge | State: TN | Zip Code: 37830-6478
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Tennessee
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A24779727C88A43A9BC2
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474836

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John H. Mahon, MD
Mailing Address 8602 N. Cardinal Dr
City: Phoenix | State: AZ | Zip Code: 85028-6102
FEC ID number of contributing federal political committee. C
Name of Employer: Retired
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A01CB33710AF04D51A21
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Thomas Wendell Marshall, MD
Mailing Address 940 N. Marr Suite C
City: Columbus | State: IN | Zip Code: 47201-2610
FEC ID number of contributing federal political committee. C
Name of Employer: Southern Indiana Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AD0679C1C38544BDAB80
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Robert Scott Meyer, MD
Mailing Address 4336 Hill St
City: San Diego | State: CA | Zip Code: 92107-4117
FEC ID number of contributing federal political committee. C
Name of Employer: Veterans Administration
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A00D2216168864F8B9C5
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474837

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Michael G. Miller, MD
Mailing Address 913 Mimosa Dr
City: Vacaville | State: CA | Zip Code: 95687-7700
FEC ID number of contributing federal political committee: C
Name of Employer: Us Military
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A645601617AAF42C285F
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Lawrence S. Miller, MD
Mailing Address 50 Indian Spring Rd
City: Media | State: PA | Zip Code: 19063-1818
FEC ID number of contributing federal political committee: C
Name of Employer: Cooper University Physicians
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AC53A806DC6F5487BB0E
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
James A. Moore, MD
Mailing Address 425 E. 63rd St W2d
City: New York | State: NY | Zip Code: 10065-7821
FEC ID number of contributing federal political committee: C
Name of Employer: Lincoln Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A8D20DE36DC4C47E8821
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1500.00

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

Image# 10931474838

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Joseph E. Mumford, MD
Mailing Address 3110 Briarwood Ct
City: Topeka | State: KS | Zip Code: 66611-1810
FEC ID number of contributing federal political committee. C
Name of Employer: Kansas Ortho & Sports Med
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: ABCAC4B81EE4C45D3977
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Fred C. Redfern, MD
Mailing Address 600 Whitney Ranch Dr Suite D22
City: Henderson | State: NV | Zip Code: 89014-2632
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A16F22AEC07CD4C14AF7
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Leland Edgar Rogge, MD
Mailing Address 3042 E. Laurelhurst Dr NE
City: Seattle | State: WA | Zip Code: 98105-5331
FEC ID number of contributing federal political committee. C
Name of Employer: Medical Evaluation Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A85704558FD6D4285BD9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474839

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David W. Shenton, Jr, MD
Mailing Address 3134 Sycamore Ln
City: Billings | State: MT | Zip Code: 59102-0524
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AFDF7365B965944D6A76
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Daniel E. Sullivan, DO
Mailing Address 7447 W. Talcott Ave Suite 500
City: Chicago | State: IL | Zip Code: 60631-3716
FEC ID number of contributing federal political committee. C
Name of Employer: NW Ortho & Sports Medicine
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A532933710FCE4EB1ABD
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Brian A. Torre, MD
Mailing Address 5876 Elena Vista Dr
City: Roanoke | State: VA | Zip Code: 24018-7886
FEC ID number of contributing federal political committee. C
Name of Employer: Lewis Gale Physicians
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A72A334BC36EF4165BA1
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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

Image# 10931474840

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Joseph E. Trader, MD
Mailing Address 1021 Memorial Dr
City: Manitowoc | State: WI | Zip Code: 54220-2242
FEC ID number of contributing federal political committee: C
Name of Employer: Orthopaedic Assoc of Manitowoc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AEFD08357F37A44D6B0C
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Steven Tradonsky, MD
Mailing Address 7485 Mission Valley Rd #104
City: San Diego | State: CA | Zip Code: 92108-4422
FEC ID number of contributing federal political committee: C
Name of Employer: California Orthopaedic Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A0B1A033EB607483AB2D
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Scott W. Trenhaile, MD
Mailing Address 12235 Bellingham Rd
City: Caledonia | State: IL | Zip Code: 61011-9116
FEC ID number of contributing federal political committee: C
Name of Employer: Rockford Orthopaedic Associate
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AFF4DDB6611AB41B1AE9
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474841

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Norman Verhoog, MD
Mailing Address 3389 Harlan Dr
City: Redding | State: CA | Zip Code: 96003-3318
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 450.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A28805ED51E824FDFBBC
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial)
James John Verner, MD
Mailing Address 23075 Nottingham
City: Beverly Hills | State: MI | Zip Code: 48025-3416
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A27D80CA3664D48938D5
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Gregory A. Vrabec, MD
Mailing Address 579 White Tail Ridge Dr
City: Fairlawn | State: OH | Zip Code: 44333-3285
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AB76517DA64A64133A36
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1400.00**

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

Image# 10931474842

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stephen C. Weber, MD
Mailing Address 2801 K St Suite 310
City: Sacramento | State: CA | Zip Code: 95816-5119
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A5C8D9C502C16427EB60
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Galen Andre Weiss, MD
Mailing Address 9 Dunbridge Ct
City: Glen Carbon | State: IL | Zip Code: 62034-1564
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A906B246C27F0476891B
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
David A. Wolff, MD
Mailing Address 5663 Ashbourne Ln
City: Fitchburg | State: WI | Zip Code: 53711-6966
FEC ID number of contributing federal political committee. C
Name of Employer: Dean Health Systems
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: A253BD0144A8C4B4FBA9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474843

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Henry A. Backe, Jr, MD
Mailing Address 75 Kings Hwy Cutoff Suite 100
City: Fairfield | State: CT | Zip Code: 06824-5340
FEC ID number of contributing federal political committee: C
Name of Employer: OSG
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A2C76C8A382D64462AA5
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Frank L. Barnes, MD
Mailing Address 3117 Avalon Place
City: Houston | State: TX | Zip Code: 77019-5905
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A7E3CD04D00BC42EB90B
Amount of Each Receipt this Period: 150.00

C.
Full Name (Last, First, Middle Initial)
Brian Jeffrey Bear, MD
Mailing Address 324 Roxbury Rd
City: Rockford | State: IL | Zip Code: 61107-5090
FEC ID number of contributing federal political committee: C
Name of Employer: Rockford Orthopedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A609488B77A7A4F268EB
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **900.00**

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

Image# 10931474844

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Carl E. Becker, MD
Mailing Address 9 Southview Ln
City: Lititz | State: PA | Zip Code: 17543-8206
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A7A5566C7E69A4AB487A
Amount of Each Receipt this Period: 2000.00

B.
Full Name (Last, First, Middle Initial)
Robert J. Bercik, MD
Mailing Address 1445 Raritan Rd
City: Clark | State: NJ | Zip Code: 07066-1230
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A8EFDA9B81E5B4488B18
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Joseph I. Bernstein, MD
Mailing Address 17 San Andreas Way
City: San Francisco | State: CA | Zip Code: 94127-2027
FEC ID number of contributing federal political committee. C
Name of Employer: Retired
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A057E765B42A940B1A70
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ▶ **2400.00**

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

Image# 10931474845

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Benjamin E. Bierbaum, MD
Mailing Address 54 Fernwood Rd
City: Chestnut Hill | State: MA | Zip Code: 02467-2907
FEC ID number of contributing federal political committee. C
Name of Employer: Longwood Orthopaedic Associate
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A724BF278EE8B4C2D9D1
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Dr. Christopher P. Chiodo
Mailing Address 7 Bramel Circle
City: Walpole | State: MA | Zip Code: 02081-2043
FEC ID number of contributing federal political committee. C
Name of Employer: Brigham and Women's Hospital
Occupation: Orthopedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AB7E95BF93F1D42A4A63
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Thomas G. Craven, MD
Mailing Address 7395 S. 26th West Ave
City: Tulsa | State: OK | Zip Code: 74132-2219
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A8AE06D0DE6AE44A1A86
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

Image# 10931474846

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Robert L. Dickey, MD
Mailing Address 1166 Elmwood Dr
City: Abilene | State: TX | Zip Code: 79605-3935
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A7BA7FE8D2AFA4F049EB
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial)
Anthony J. DiStasio, II, MD
Mailing Address 2944 Bruce Station
City: Chesapeake | State: VA | Zip Code: 23321-4256
FEC ID number of contributing federal political committee. C
Name of Employer: Sentara Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A0A65C0AF4C5C4833840
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
J. Wendell Duncan, MD
Mailing Address 3650 J Dewey Gray Cir
City: Augusta | State: GA | Zip Code: 30909-1867
FEC ID number of contributing federal political committee. C
Name of Employer: Augusta Ortho & Sports Med Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A0E0DC7C91725413DA62
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **900.00**

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

Image# 10931474847

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John Z. Edwards, MD
Mailing Address 1777 Lambs Rd
City: Charlottesville | State: VA | Zip Code: 22901-8911
FEC ID number of contributing federal political committee. C
Name of Employer: Martha Jefferson Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AE49271949A754A31978
Amount of Each Receipt this Period: 400.00

B.
Full Name (Last, First, Middle Initial)
Mark A. Frankle, MD
Mailing Address 13020 Telecom Pkwy N.
City: Temple Terrace | State: FL | Zip Code: 33637-0925
FEC ID number of contributing federal political committee. C
Name of Employer: Florida Ortho Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A1AD4FC6E980B480980F
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Gary K. Frykman, MD
Mailing Address 30523 Los Altos Dr
City: Redlands | State: CA | Zip Code: 92373-7423
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A3355441C186C40B0AC6
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1525.00**

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

Image# 10931474848

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David M. Gonzalez, MD
Mailing Address 11 Bridgenorth Ln
City: San Antonio | State: TX | Zip Code: 78218-6056
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A846EFC80956B42B4995
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Robert A. Gurtler, MD
Mailing Address 2192 Wagon Trail Rd
City: White Heath | State: IL | Zip Code: 61884-9314
FEC ID number of contributing federal political committee: C
Name of Employer: Carle Clinic Assoc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AEFC86B4C2F474811BC0
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Andrew P. Gutow, MD
Mailing Address 795 El Camino Real
City: Palo Alto | State: CA | Zip Code: 94301-2302
FEC ID number of contributing federal political committee: C
Name of Employer: Palo Alto Orthopaedics Medical
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A1D9228EBEFD340AB89D
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474849

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John H. Healey, MD, FACS
Mailing Address 1275 York Ave
City: New York | State: NY | Zip Code: 10065-6007
FEC ID number of contributing federal political committee: C
Name of Employer: Memorial Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A778B775856734EC0B0C
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
Mark C. Hermann, MD
Mailing Address 428 Maple Ln
City: Danville | State: VA | Zip Code: 24541-3532
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AC4CAF55D9B0E408A9A8
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Regina O. Hillsman, MD
Mailing Address 1183 New Haven Rd
City: Naugatuck | State: CT | Zip Code: 06770-5033
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AFF6D6B2FC1E64F99BCF
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

Image# 10931474850

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stanley G. Hopp, MD
Mailing Address 2018 Fransworth Dr
City: Nashville | State: TN | Zip Code: 37205-2700
FEC ID number of contributing federal political committee. C
Name of Employer: Tennessee Ortho Alliance
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A842C0ABE3D98432889C
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Stephen S. Hurst, MD
Mailing Address 618 Gloucester Ln
City: Foster City | State: CA | Zip Code: 94404-3615
FEC ID number of contributing federal political committee. C
Name of Employer: San Mateo Orthopaedic Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A254311BECD5D45008C6
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Vincent Iacono, MD
Mailing Address PO Box 30
City: Stoughton | State: MA | Zip Code: 02072-0030
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Care Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AF278F37C9C6A4E65ABC
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474851

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Ramon L. Jimenez, MD
Mailing Address 71 Corral De Tierra Rd
City: Salinas | State: CA | Zip Code: 93908-9474
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AA57DE331C2004A81BB2
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial)
Thomas J. Kane, III, MD
Mailing Address 550 S Beretania St Suite 402
City: Honolulu | State: HI | Zip Code: 96813-2496
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A63C15FA800C84163955
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
John O. Krause, MD
Mailing Address 14 Roclare Ln
City: Saint Louis | State: MO | Zip Code: 63131-1129
FEC ID number of contributing federal political committee. C
Name of Employer: The Ortho Ctr of St Louis
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A8458E7A55ED84901B4D
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1650.00**

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

Image# 10931474852

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stefan Kreuzer, MD
Mailing Address 431 Pinehaven Dr
City: Houston | State: TX | Zip Code: 77024-3724
FEC ID number of contributing federal political committee: C
Name of Employer: Memorial Bone & Joint
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AF8CDEAFC5E584083B19
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Edward B. Krisiloff, MD
Mailing Address 103 Carriage Trl
City: Belle Mead | State: NJ | Zip Code: 08502-4910
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A8DC21593E8424F95849
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
John S. Kristoferson, MD
Mailing Address 912 Chiquita
City: Denton | State: TX | Zip Code: 76205-8316
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AE50B5744A41344EAA7F
Amount of Each Receipt this Period: 1000.00

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

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

Image# 10931474853

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Frederick R. Lemley, MD
Mailing Address 7783 Rolling Ridge Dr
City: Manlius | State: NY | Zip Code: 13104-9657
FEC ID number of contributing federal political committee. C
Name of Employer: Syracuse Orthopedic Specialist
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A429B6D20B4704801A94
Amount of Each Receipt this Period: 200.00

B.
Full Name (Last, First, Middle Initial)
Isador H. Lieberman, MD, MBA, F
Mailing Address 6020 W. Parker Rd Suite 200
City: Plano | State: TX | Zip Code: 75093-8172
FEC ID number of contributing federal political committee. C
Name of Employer: Texas Back Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A5FDC89FA61044D76998
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
Norman B. Livermore, III, MD
Mailing Address 120 La Casa Via Suite 206
City: Walnut Creek | State: CA | Zip Code: 94598-3007
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1225.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AB5656A27A8DD43BE881
Amount of Each Receipt this Period: 975.00

SUBTOTAL of Receipts This Page (optional) ▶ **1550.00**

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

Image# 10931474854

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Paul A. Manner, MD
Mailing Address 2222 78th Ave SE
City: Mercer Island | State: WA | Zip Code: 98040-2125
FEC ID number of contributing federal political committee. C
Name of Employer: University of Washington
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A5D5AFF14D14246F6856
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Gregory A. Mencio, MD
Mailing Address 906 Riverbend Rd
City: Nashville | State: TN | Zip Code: 37221-4370
FEC ID number of contributing federal political committee. C
Name of Employer: Vanderbilt University
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A626CA6F0C00046B8921
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
Clifford D. Merkel, MD
Mailing Address 1524 Elizabeth St
City: Redlands | State: CA | Zip Code: 92373-7019
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A7D816BC771484D5B9C3
Amount of Each Receipt this Period: 125.00

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

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

Image# 10931474855

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Robert Allen Mileski, MD
Mailing Address 8555 E. Voltaire
City: Scottsdale State: AZ Zip Code: 85260-4143
FEC ID number of contributing federal political committee. C
Name of Employer: Phoenix Orthopedic Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A69CF74E59C9A4D33B8F
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Richard Leverne Nutt, MD
Mailing Address 501 Hunters Run
City: Demorest State: GA Zip Code: 30535-4624
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AE1EE59A3C5CC4346914
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
David M. Oster, MD
Mailing Address 5290 S. Geneva Way
City: Englewood State: CO Zip Code: 80111-6203
FEC ID number of contributing federal political committee. C
Name of Employer: Denver-Vail Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 525.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A5F70325CB8B848B2AE5
Amount of Each Receipt this Period: 150.00

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

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

Image# 10931474856

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Richard Lee Parker, MD
Mailing Address 6 Dowling Ct
City: Old Westbury | State: NY | Zip Code: 11568-1220
FEC ID number of contributing federal political committee. C
Name of Employer: South Nassau Ortho Surgeo-ns
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AEE62BDB84ED7441C96C
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Brian S. Parsley, MD
Mailing Address 6620 Main St Suite 1325
City: Houston | State: TX | Zip Code: 77030-2332
FEC ID number of contributing federal political committee. C
Name of Employer: Baylor College of Medicine
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A0E34DBF204454F248A4
Amount of Each Receipt this Period: 750.00

C.
Full Name (Last, First, Middle Initial)
John H. Peloza, MD
Mailing Address 3112 Kennison Ct
City: Plano | State: TX | Zip Code: 75093-3451
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AD2B99F86CFDE4A57AC7
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1375.00**

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

Image# 10931474857

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Steve A. Petersen, MD
Mailing Address 110 Croydon Rd
City: Baltimore | State: MD | Zip Code: 21212-3301
FEC ID number of contributing federal political committee. C
Name of Employer: Johns Hopkins Medical Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A4D466E1B3ADB4ED9AAF
Amount of Each Receipt this Period: 375.00

B.
Full Name (Last, First, Middle Initial)
Michael Edward Pollack, MD
Mailing Address 6 Sand Hill Rd Suite 102
City: Flemington | State: NJ | Zip Code: 08822-4946
FEC ID number of contributing federal political committee. C
Name of Employer: Hunterdon Ortho Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AB4993055FCCC456CAC6
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Anca Popa, MD
Mailing Address 115 River Rd Suite 825
City: Edgewater | State: NJ | Zip Code: 07020-1000
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A025241815BA447BD9C2
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1525.00**

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

Image# 10931474858

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stefan Alexander Prada, MD
Mailing Address 12326 Tarpon Springs Rd
City: Odessa | State: FL | Zip Code: 33556-5654
FEC ID number of contributing federal political committee: C
Name of Employer: Laser Spine Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AE9D793BF3A854417BBA
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
James J. Purtill, MD
Mailing Address 651 Darby Paoli Rd
City: Villanova | State: PA | Zip Code: 19085-1007
FEC ID number of contributing federal political committee: C
Name of Employer: Rothman Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AB12FAE6C36484779BC0
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Karl E. Rathjen, MD
Mailing Address Dept Of Orthopaedics
2222 Welborn St
City: Dallas | State: TX | Zip Code: 75219-3924
FEC ID number of contributing federal political committee: C
Name of Employer: Texas Scottish Rite Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A0E30D89BDE84400F93D
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

Image# 10931474859

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Eric R. Ritchie, MD
Mailing Address 7314 Steeple Course
City: San Antonio | State: TX | Zip Code: 78256-1607
FEC ID number of contributing federal political committee: C
Name of Employer: U.S. Air Force
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A202DDD2B65E34A01AF8
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial)
William P. Rix, MD
Mailing Address 55 Audubon Way
City: Auburn | State: NH | Zip Code: 03032-3109
FEC ID number of contributing federal political committee: C
Name of Employer: NH Orthopaedic Surgery
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A0DCF6565D64B40F18F3
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Richard A. Rosa, MD
Mailing Address 16 Fairfield Dr
City: Short Hills | State: NJ | Zip Code: 07078-1703
FEC ID number of contributing federal political committee: C
Name of Employer: Advanced Orthopaedic Centers
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AEBDC3C4B5C744E479A9
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **900.00**

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

Image# 10931474860

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Craig H. Rosen, MD
Mailing Address 1802 Champlain Dr
City: Voorhees | State: NJ | Zip Code: 08043
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AF62AF6D9CEAD4823AE4
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Scott P. Schemmel, MD
Mailing Address 1160 Pamela Ct
City: Dubuque | State: IA | Zip Code: 52003-8728
FEC ID number of contributing federal political committee. C
Name of Employer: Medical Associates Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AFA5A2B065EB846588C3
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Gary M. Schniegenberg, MD
Mailing Address 1982 Rd P1
City: Bluffton | State: OH | Zip Code: 45817-9304
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Institute of Ohio
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A34AE5BB3E85E48659C3
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474861

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Thomas Griffin Taylor, MD
Mailing Address 3824 Holly Ridge Dr
City: Longview | State: TX | Zip Code: 75605-2500
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AB4C2E02F9BFE496B9B7
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Edward A. Toriello, MD
Mailing Address 84-21 Midland Pkwy
City: Jamaica | State: NY | Zip Code: 11432-2218
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A413D2FBC259A4057A19
Amount of Each Receipt this Period: 150.00

C.
Full Name (Last, First, Middle Initial)
Steven J. Triantafyllou, MD
Mailing Address 1855 Powder Mill Rd
City: York | State: PA | Zip Code: 17402-4723
FEC ID number of contributing federal political committee. C
Name of Employer: OSS Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A225846231A7A4482972
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1650.00**

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

Image# 10931474862

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Hans Robert Tuten, MD
Mailing Address 2806 Rams Crossings
City: Richmond | State: VA | Zip Code: 23236
FEC ID number of contributing federal political committee. C
Name of Employer: Tuckahoe Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1050.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A67FEC25517124C1DA72
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
George B. Verghese, MD
Mailing Address 1385 E. 3130 N. Rd
City: Chebanse | State: IL | Zip Code: 60922-8111
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: A796CC3DE5865446DB42
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
Alan H. Wilde, MD
Mailing Address 8542 Windsor Way
City: Broadview Heights | State: OH | Zip Code: 44147-1790
FEC ID number of contributing federal political committee. C
Name of Employer: Lutheran Hospital
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AA4701CC0D0254322B42
Amount of Each Receipt this Period: 450.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1075.00**

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

Image# 10931474863

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Eugene Michael Wolf, MD
Mailing Address 3000 California St 3rd Fl
City: San Francisco | State: CA | Zip Code: 94115-2411
FEC ID number of contributing federal political committee. C
Name of Employer: Sportsmed Ortho Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AE967FB7931874895BD4
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
John W. Xerogeanes, MD
Mailing Address 265 Trimble Crst NE
City: Atlanta | State: GA | Zip Code: 30342-2489
FEC ID number of contributing federal political committee. C
Name of Employer: Emory University
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: AF18F60CAA9D647598EF
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Jeffrey D. Yoder, MD
Mailing Address 3978 Glen Moor Way
City: Kokomo | State: IN | Zip Code: 46902-9400
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: ABA91198C93AB49DE9BE
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

Image# 10931474864

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David Matthew Beard, MD
Mailing Address 3000 32nd Ave South
City: Fargo | State: ND | Zip Code: 58103-6132
FEC ID number of contributing federal political committee. C
Name of Employer: Multispecialty Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A6F84CC98A6BD4A8B8C8
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Robert William Bucholz, MD
Mailing Address 4005 Wingren
City: Irving | State: TX | Zip Code: 75062-3825
FEC ID number of contributing federal political committee. C
Name of Employer: UT Southwestern
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A85A2C2279DED4EAABD0
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Ryan Cassidy, MD
Mailing Address 4890 Faulkirk Ln
City: Lexington | State: KY | Zip Code: 40515-1177
FEC ID number of contributing federal political committee. C
Name of Employer: Univ of Kentucky Healthcare
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A137479C21C6D4D89B5F
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474865

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Thomas W. Currey, MD
Mailing Address 3707 Kings Rd
City: Chattanooga State: TN Zip Code: 37416-2014
FEC ID number of contributing federal political committee. C
Name of Employer: Univ Of Tennessee
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AB5D923C52F86431094B
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Jeffrey H. DeClaire, MD
Mailing Address 555 Gray Woods Ln
City: Lake Angelus State: MI Zip Code: 48326-1244
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AC44CF57EE4DA4DA788A
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Kyle F. Dickson, MD
Mailing Address 5116 Pocahontas St
City: Bellaire State: TX Zip Code: 77401-4912
FEC ID number of contributing federal political committee. C
Name of Employer: Univ Of Texas At Houston
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A18C549742DC2451FBC0
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2500.00**

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

Image# 10931474866

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Terrence J. Endres, MD
Mailing Address 1655 Flowers Mill Dr
City: Grand Rapids | State: MI | Zip Code: 49525-9694
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 450.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A0ECABAEFDA1343338CA
Amount of Each Receipt this Period: 200.00

B.
Full Name (Last, First, Middle Initial)
Jay Herman Eppinga, MD
Mailing Address 613 Lakewood Ln
City: Marquette | State: MI | Zip Code: 49855-9517
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A4F24BE05A3F8462AAD6
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial)
John R. Frankeny, II, MD
Mailing Address 616 Bethelem Rd
City: Millerstown | State: PA | Zip Code: 17062
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Institute of PA
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AFCC2D081028B440084F
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1300.00**

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

Image# 10931474867

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
J. Randy Gipple, MD
Mailing Address 2195 N. Hill Rd
City: Muscatine | State: IA | Zip Code: 52761-9399
FEC ID number of contributing federal political committee. C
Name of Employer: Trinity Muscatine
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 550.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A878E6C33BAC14B3FAC1
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
Andrew H. Glassman, MD
Mailing Address 4882 E. Main St Suite 120
City: Columbus | State: OH | Zip Code: 43213-3189
FEC ID number of contributing federal political committee. C
Name of Employer: Ohio State University
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AFC69C54AE8624707A8A
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial)
David W. Gray, MD
Mailing Address 3450 Park Hollow
City: Fort Worth | State: TX | Zip Code: 76109-2549
FEC ID number of contributing federal political committee. C
Name of Employer: Cook Childrens Physicians Net
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A9D26D17197D44252A62
Amount of Each Receipt this Period: 750.00

SUBTOTAL of Receipts This Page (optional) ▶ **1350.00**

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

Image# 10931474868

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Larry D. Herron, MD
Mailing Address 219 Indio
City: Shell Beach | State: CA | Zip Code: 93449-1513
FEC ID number of contributing federal political committee. C
Name of Employer: Central Coast Orthopaedic Medi
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A1B793615512F48AE94E
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Timothy R. Heyne, MD
Mailing Address 13695 Tierra Spur
City: Salinas | State: CA | Zip Code: 93908-9416
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A3DD96E06123D45DEABE
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
G. Brian Holloway, MD
Mailing Address 8956 Hemingway Grove Circle
City: Knoxville | State: TN | Zip Code: 37922-8087
FEC ID number of contributing federal political committee. C
Name of Employer: Knoxville Orthopaedic Cli-nic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A5D479C6CA10140BD950
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474869

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Antoine I. Jabbour, MD
Mailing Address 5304 E. 79th St.
City: Tulsa | State: OK | Zip Code: 74136-8464
FEC ID number of contributing federal political committee: C
Name of Employer: Tulsa Bone & Joint Associ-ates
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A47DF701D51E049E7ADD
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Kamala H. Littleton, MD
Mailing Address 10941 Falls Rd
City: Lutherville Timoni | State: MD | Zip Code: 21093-4507
FEC ID number of contributing federal political committee: C
Name of Employer: Mercy Medical Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AA11D346278F04CC48D2
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
David E. Nonweiler, MD
Mailing Address 3129 S. Columbia Circle
City: Tulsa | State: OK | Zip Code: 74105-2329
FEC ID number of contributing federal political committee: C
Name of Employer: Central States Orthopaedic Spe
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AADAC6D944A2F42B5896
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474870

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Daryl O'Connor, MD
Mailing Address 166 E. Lake St Unit A
City: Elmhurst | State: IL | Zip Code: 60126-5509
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Specialist Inc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AEEE7F120BABF4A829D8
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Sean J. O'Donnell, MD
Mailing Address 6 Crest Rd
City: Old Saybrook | State: CT | Zip Code: 06475-1310
FEC ID number of contributing federal political committee. C
Name of Employer: Middlesex Ortho Surg, Pc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A79A322BBB5D94B9D83B
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Thomas G. Padanilam, MD
Mailing Address 528 Forest Lake Dr
City: Holland | State: OH | Zip Code: 43528-9028
FEC ID number of contributing federal political committee. C
Name of Employer: Toledo Orthopaedic Surgeo-ns
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 900.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A727C68B7471144BBB4A
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ **1425.00**

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

Image# 10931474871

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Richard H. Rothman, MD
Mailing Address Dept Of Ortho Surg
925 Chestnut St 5th Fl
City: Philadelphia State: PA Zip Code: 19107-4216
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A45AF530937A44E86A4C
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Patrick M. Sullivan, MD
Mailing Address 6001 Westown Pkwy
City: West Des Moines State: IA Zip Code: 50266-7702
FEC ID number of contributing federal political committee. C
Name of Employer: DMOS
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A88178BACA8A1449BAE7
Amount of Each Receipt this Period: 750.00

C.
Full Name (Last, First, Middle Initial)
Jonathan William Surdam, MD
Mailing Address 1423 W. Eagleview Dr
City: Bloomington State: IN Zip Code: 47403-9049
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedics of Southern Indiana
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A26969A4C5AFA4BE6A0F
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 10931474872

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
William A. Tyndall, MD
Mailing Address 123 Brittany Ln
City: Hollidaysburg | State: PA | Zip Code: 16648-9269
FEC ID number of contributing federal political committee. C
Name of Employer: University Orthopedic Speciali
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: AAEB4B971999B4061BCD
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Veronica A. Vasicek, MD
Mailing Address 3641 Winding Wood Ln
City: Lexington | State: KY | Zip Code: 40515-1284
FEC ID number of contributing federal political committee. C
Name of Employer: Blue Grass Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 16 / 2010
Transaction ID: A721241A45943493AB3A
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
James M. Banovetz, Jr, MD
Mailing Address 3009 Pkwy Dr
City: Stevens Point | State: WI | Zip Code: 54481-5082
FEC ID number of contributing federal political committee. C
Name of Employer: Klasinski Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: A3D0E3BC7CD7F478EBDC
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474873

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Andrew Joseph Collier, Jr, MD
Mailing Address 550 Bartram Rd
City: Moorestown | State: NJ | Zip Code: 08057-1871
FEC ID number of contributing federal political committee. C
Name of Employer: Philadelphia Ortho Assoc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: A1A267909C68C470BBEE
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Mark Creighton, MD
Mailing Address 61 Channing Cross
City: Hampton Bays | State: NY | Zip Code: 11946-1431
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: ABB7EE2EFDB2F4BF29D9
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Stephen C. McNeil, MD
Mailing Address 10 Hunter Ln
City: Canton | State: MA | Zip Code: 02021-1731
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Care Specialis-ts
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: A33E44815FB5042B6B6A
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474874

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Scott A. McPherson, MD
Mailing Address 7088 Cahill Rd
City: Minneapolis | State: MN | Zip Code: 55439-2035
FEC ID number of contributing federal political committee. C
Name of Employer: Park Nicollet Clinic
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 09 / 17 / 2010
Transaction ID: A0EEE43CEAA0A4EF4950
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
R. William Petty, MD
Mailing Address 2320 NW 66th Ct
City: Gainesville | State: FL | Zip Code: 32653-1630
FEC ID number of contributing federal political committee. C
Name of Employer: Exactech, Inc
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 09 / 17 / 2010
Transaction ID: A2C0A11E2936D493E975
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Peter C. Rink, DO
Mailing Address 2805 E. 43rd
City: Davenport | State: IA | Zip Code: 52807-1580
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho & Rheumatology Associate
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 / 17 / 2010
Transaction ID: A88D3947E62D746A8AED
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1450.00**

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

Image# 10931474875

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jordan Simon, MD
Mailing Address Orangetown Orthopedic Associates
99 Dutch Hill Rd
City: Orangeburg State: NY Zip Code: 10962-2185
FEC ID number of contributing federal political committee. C
Name of Employer: Orangetown Orthopedic Ass-ociat
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: A517F20E3F85A42D59EF
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
Nikhil N. Verma, MD
Mailing Address 1756 N. Wilmot
City: Chicago State: IL Zip Code: 60647-5524
FEC ID number of contributing federal political committee. C
Name of Employer: Midwest Orthopaedics At Rush
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: A6683FD4C370A4263A3D
Amount of Each Receipt this Period: 750.00

C.
Full Name (Last, First, Middle Initial)
Lynn A. Voss, MD
Mailing Address 6626 Apache Ct
City: Longmont State: CO Zip Code: 80503-8654
FEC ID number of contributing federal political committee. C
Name of Employer: Boulder Orthopedics, PC
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: AB8D73FAC14C74CE7977
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2050.00**

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

Image# 10931474876

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David J. Yasgur, MD
Mailing Address 11 Katonah Crossing Ct
City: Katonah | State: NY | Zip Code: 10536-3735
FEC ID number of contributing federal political committee. C
Name of Employer: Mount Kisco Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: AFA45ED24DC274A1784F
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Dr. Ira Singer, MD
Mailing Address 22 Intervale Road
City: Providence | State: RI | Zip Code: 02906-3734
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Assosciates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 18 / 2010
Transaction ID: AD21A253F8B744193924
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Charles H. Alexander, MD
Mailing Address 5549 Green Oak Dr
City: Los Angeles | State: CA | Zip Code: 90068-2501
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A5DCCB1DE912E4BBB801
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474877

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John W. Anderson, MD
Mailing Address 1737 Kingsbury Ln
City: Nichols Hills | State: OK | Zip Code: 73116-5313
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Associates, LLC
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AFFDF506E5C23401EB99
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
David E. Attarian, MD
Mailing Address 3 Jupiter Hills Ct
City: Durham | State: NC | Zip Code: 27712-9455
FEC ID number of contributing federal political committee. C
Name of Employer: Duke University
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AAE9B33ABD9F24B18822
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Gregory J. Austin, MD
Mailing Address 26 Narragansett Bay Ave
City: Warwick | State: RI | Zip Code: 02889-6608
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Assoc Inc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A053708FC0EAE450E82A
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474878

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jeffrey A. Baum, MD
Mailing Address 119 Eton Dr
City: Pittsburgh | State: PA | Zip Code: 15215-1701
FEC ID number of contributing federal political committee. C
Name of Employer: UPMC
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: ADB726EC4CE614A4881D
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Kent R. Biddinger, MD
Mailing Address The Ortho Center 420 W Wackerly St
City: Midland | State: MI | Zip Code: 48642
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A54F729CC89C2496E9DF
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
William F. Binder, MD
Mailing Address 2421 Lema Dr
City: Lake Havasu City | State: AZ | Zip Code: 86406-8235
FEC ID number of contributing federal political committee. C
Name of Employer: Lakeside Orthopedic Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A74D58A7F3C2B4FBCABF
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

Image# 10931474879

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David Blum, MD
Mailing Address 107 Dockside Circle
City: Weston | State: FL | Zip Code: 33327-1113
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A4476CDA31A584F949D5
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Steven J. Bruce, MD
Mailing Address 1533 Lakeway Place
City: Bellingham | State: WA | Zip Code: 98229-5133
FEC ID number of contributing federal political committee. C
Name of Employer: Peace Health
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A92B97060F4C0421A969
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial)
Steven L. Buckley, MD
Mailing Address 6007 Macon Ct
City: Huntsville | State: AL | Zip Code: 35802-1931
FEC ID number of contributing federal political committee. C
Name of Employer: TOC
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A94FAC47A399C4CC4951
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **500.00**

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

Image# 10931474880

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Joseph J. Calandra, MD
Mailing Address 2514 Harriet's Island Ct
City: Mt Pleasant | State: SC | Zip Code: 29466
FEC ID number of contributing federal political committee. C
Name of Employer: Performance Consultants
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A02A16BCDF3A2406196D
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Daniel A. Caligiuri, MD
Mailing Address 16 Hickory Rd
City: New Hyde Park | State: NY | Zip Code: 11040-2326
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A709D844D81914DC1A24
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial)
Constantine Charoglu, MD
Mailing Address 318 40th Place
City: Hattiesburg | State: MS | Zip Code: 39401-6620
FEC ID number of contributing federal political committee. C
Name of Employer: Southern Bone & Joint Cen-ter
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: ACC5290F3684946E8845
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

Image# 10931474881

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Patrick E. Clare, MD
Mailing Address 575 S. 70th St Suite 200
City: Lincoln | State: NE | Zip Code: 68510-2471
FEC ID number of contributing federal political committee. C
Name of Employer: Nebraska Orthopaedic & Sports
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 09 / 20 / 2010
Transaction ID: A12652AAEA94644F9B43
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Jerry D. Clark, MD
Mailing Address 1495 Futura
City: Beaumont | State: TX | Zip Code: 77706-3411
FEC ID number of contributing federal political committee. C
Name of Employer: Beaumont Bone And Joint
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 20 / 2010
Transaction ID: A5E2DA3CD06FD4D9F9F7
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Jeffrey W. Cook, MD
Mailing Address 3310 Aspen Grove Dr Suite 102
City: Franklin | State: TN | Zip Code: 37067-2841
FEC ID number of contributing federal political committee. C
Name of Employer: Franklin Ortho & Sports Medici
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 09 / 20 / 2010
Transaction ID: A81DD77CA0C4C47AA80B
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474882

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stephen P. Cowley, MD
Mailing Address 3425 Brookwood Trace
City: Birmingham | State: AL | Zip Code: 35223-2879
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Specialists of Alabama
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD11D46A41B1C40E08B0
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Eugene D. DellaMaggiore, MD
Mailing Address 1214 Sierra Ave
City: San Jose | State: CA | Zip Code: 95126-2642
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A16B75A7017404B55A9C
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Henry L. Eiserloh, MD
Mailing Address 828 Woodleigh Dr
City: Baton Rouge | State: LA | Zip Code: 70810-5332
FEC ID number of contributing federal political committee. C
Name of Employer: Baton Rouge Ortho Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A4D3DFBC5B5FF40B8AD2
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474883

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stephen Paul Falatyn, MD
Mailing Address 362 Little Creek Dr
City: Nazareth | State: PA | Zip Code: 18064-8575
FEC ID number of contributing federal political committee. C
Name of Employer: OAA Orthopedic Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A5FF598B1EC6C47AB8C0
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
John P K. Featheringill, MD
Mailing Address 3608 Grand Rock Ln
City: Birmingham | State: AL | Zip Code: 35223-1676
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Specialists of Alabama
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AAF0CBB308E294824986
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial)
Douglas Bentley Freedberg, MD
Mailing Address 6818 E. Valley Vista Ln
City: Paradise Valley | State: AZ | Zip Code: 85253-5349
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A16ED97CF1BF3434092A
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **800.00**

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

Image# 10931474884

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Craig W. Goodhart, MD
Mailing Address 2708 Creek View Dr
City: Lewisville | State: TX | Zip Code: 75022-5675
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A6C1C46CE3F78429A9F2
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
John Joseph Greco, MD
Mailing Address 4509 Colewood Circle
City: Huntsville | State: AL | Zip Code: 35802-1887
FEC ID number of contributing federal political committee: C
Name of Employer: The Orthopaedic Centers
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A5057FB350BFC403C99F
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
R. Bryan Griffith, Jr, MD
Mailing Address 8080 Bluebonnet Blvd Suite 1000
City: Baton Rouge | State: LA | Zip Code: 70810-7827
FEC ID number of contributing federal political committee: C
Name of Employer: Baton Rouge Orthopaedic Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD00ED1FCC4F94938BEA
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474885

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Sigvard T. Hansen, Jr, MD
Mailing Address 2563 Magnolia Blvd West
City: Seattle | State: WA | Zip Code: 98199-3631
FEC ID number of contributing federal political committee. C
Name of Employer: University of Washington
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD7EAFAFB701B4AB4BD9
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Mary Haus, MD
Mailing Address 4050 Briarwood Dr
City: Jeannette | State: PA | Zip Code: 15644-4054
FEC ID number of contributing federal political committee. C
Name of Employer: Ohio Valley Medical Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A242983579F2C4C17BA0
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Thomas John Haverbush, MD
Mailing Address 315 E. Warwick Rd Suite A
City: Alma | State: MI | Zip Code: 48801-1083
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 575.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A572067EF8C794F4492F
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1125.00**

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

Image# 10931474886

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Gregory Lane Hummel, MD
Mailing Address 15900 Ess Rd
City: Kansas City | State: MO | Zip Code: 64136-1259
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A116AA4B16EF54AE2BD8
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Dolf R. Ichtertz, MD
Mailing Address 1803 W. Charles St
City: Grand Island | State: NE | Zip Code: 68803-5904
FEC ID number of contributing federal political committee. C
Name of Employer: Nebraska Hand & Shoulder Insti
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A6E1043F3613843028E8
Amount of Each Receipt this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
William A. Jiranek, MD
Mailing Address 4066 Old River Tr
City: Powhatan | State: VA | Zip Code: 23139-4111
FEC ID number of contributing federal political committee. C
Name of Employer: Virginia Commonwealth Universi
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A3504B4CA38464C56AEF
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **4000.00**

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

Image# 10931474887

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Eric T. Johnson, MD
Mailing Address 2 Nest Ct
City: Wilmington | State: DE | Zip Code: 19807-1147
FEC ID number of contributing federal political committee: C
Name of Employer: 1st State Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AE173B05566184113BFB
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
William A. Junglas, MD
Mailing Address 820 Los Molinos Way
City: Sacramento | State: CA | Zip Code: 95864-5252
FEC ID number of contributing federal political committee: C
Name of Employer: Mercy Medical Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A0E19FB5A3182459F8DC
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial)
Bertrand Paul Kaper, MD
Mailing Address 21 Yakashba Dr
City: Prescott | State: AZ | Zip Code: 86305-5259
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A42C7C4552DF445AAA8C
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1600.00**

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

Image# 10931474888

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Danielle Katz, MD
Mailing Address 3736 W. Seneca Tpke
City: Syracuse | State: NY | Zip Code: 13215-9606
FEC ID number of contributing federal political committee: C
Name of Employer: Suny Upstate
Occupation: Orthopaedic Surgeons
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A8A35C0C52801425192D
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
J. Michael Kelbel, MD
Mailing Address 2425 Topswood
City: South Bend | State: IN | Zip Code: 46614-2465
FEC ID number of contributing federal political committee: C
Name of Employer: South Bend Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AB0C5EA9A96F143AFAC9
Amount of Each Receipt this Period: 750.00

C.
Full Name (Last, First, Middle Initial)
Matthew J. Kirsch, MD
Mailing Address 801 36th St NW
City: Austin | State: MN | Zip Code: 55912-6662
FEC ID number of contributing federal political committee: C
Name of Employer: Mayo Health System
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AA5152345356C4F8BB34
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474889

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Scott R. Luallin, MD
Mailing Address 12509 Pembroke Ln
City: Leawood | State: KS | Zip Code: 66209-1386
FEC ID number of contributing federal political committee. C
Name of Employer: Carondelet Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: ADF47482773384A98962
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Thomas R. Lyons, MD
Mailing Address 1429 7th St
City: New Orleans | State: LA | Zip Code: 70115-3320
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Center for Sports Medicine
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A9C481D3E31934E0595F
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Kenneth A. Martin, MD
Mailing Address # 5 Platt Ct
City: Maumelle | State: AR | Zip Code: 72113-6553
FEC ID number of contributing federal political committee. C
Name of Employer: Martin Knee & Sports Med Ctr
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A18F6273ED32A4E58BB8
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 1000.00

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

Image# 10931474890

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Robert Ball McGinley, MD
Mailing Address The Orthopaedic Group
P.O Box 86144
City: Mobile | State: AL | Zip Code: 36689-6144
FEC ID number of contributing federal political committee. C
Name of Employer: The Orthopaedic Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A1654D1669C4740A687E
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Steven M. Mulawka, MD
Mailing Address 1555 Northway Dr
City: Saint Cloud | State: MN | Zip Code: 56303-4555
FEC ID number of contributing federal political committee. C
Name of Employer: St Cloud Orthopaedic Associate
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A0CF4242FC38847ED914
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Matthew C. Nadaud, MD
Mailing Address 904 Beckworth Ct
City: Knoxville | State: TN | Zip Code: 37919-7217
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Tennessee
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A2F074E7F575F4506831
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474891

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 100 / 229

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James Albert Nunley, II, MD
Mailing Address Box 2923
Orthopaedic Division
City: Durham State: NC Zip Code: 27715-2923
FEC ID number of contributing federal political committee. C
Name of Employer: Duke University Medical Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AA0EC5B3EC5D24F809CB
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial)
Christopher W. Olcott, MD
Mailing Address 104 Dairy Glen Rd
City: Chapel Hill State: NC Zip Code: 27516-4349
FEC ID number of contributing federal political committee. C
Name of Employer: University of North Carol-ina
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: ABD3F99E613894D07A58
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
William L. Oppenheim, MD
Mailing Address 124 Outrigger Mall
City: Marina Del Rey State: CA Zip Code: 90292-6795
FEC ID number of contributing federal political committee. C
Name of Employer: Ucla Medical Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD85BEB39D6FC46A5A53
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) 1125.00

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

Image# 10931474892

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Anthony F. Pachelli, MD
Mailing Address 11200 San Rafael Ave NE
City: Albuquerque | State: NM | Zip Code: 87122-2432
FEC ID number of contributing federal political committee. C
Name of Employer: New Mexico Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD6C1301C22B44A0E8AC
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
David N. Palmer, MD
Mailing Address 18 W. Taylor St
City: Savannah | State: GA | Zip Code: 31401-4913
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD1F2D9402B4E4977AAC
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Peter D. Pizzutillo, MD
Mailing Address 926 Bowman Ave
City: Wynnewood | State: PA | Zip Code: 19096-1658
FEC ID number of contributing federal political committee. C
Name of Employer: Tenet Healthcare
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AE6CA0B6D232F4D96ACB
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474893

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James N. Rentz, Jr, MD
Mailing Address 978 Hummingbird Ln
City: Rock Hill | State: SC | Zip Code: 29732-7728
FEC ID number of contributing federal political committee. C
Name of Employer: Carolina Orthopaedic Surgery Assoc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AEAA6CAD6FF854FE1B57
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Alan M. Reznik, MD
Mailing Address 35 Overhill Rd
City: Woodbridge | State: CT | Zip Code: 06525-2519
FEC ID number of contributing federal political committee. C
Name of Employer: The Orthopaedic Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A7D83001959894BB7AC3
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
James W. Roach, MD
Mailing Address 1 Trimont Ln Unit 1800
City: Pittsburgh | State: PA | Zip Code: 15211-1252
FEC ID number of contributing federal political committee. C
Name of Employer: University of Pittsburgh
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AC25D2EBBF655478891A
Amount of Each Receipt this Period: 750.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1375.00**

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

Image# 10931474894

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Alan S. Routman, MD
Mailing Address 1717 SE 9th St
City: Fort Lauderdale | State: FL | Zip Code: 33316-1415
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AB048D504CC1248E2B66
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Guy Leslie Rutledge, III, MD
Mailing Address PO Box 86144
City: Mobile | State: AL | Zip Code: 36689-6144
FEC ID number of contributing federal political committee. C
Name of Employer: The Orthopaedic Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A3D4B648EA4D94BED9B2
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Paul Dominic Saadi, MD
Mailing Address 8126 Tory Sound Dr
City: Dallas | State: TX | Zip Code: 75231-1519
FEC ID number of contributing federal political committee. C
Name of Employer: Dallas Bone & Joint Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: ADB320D09A661447B937
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474895

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Howard L. Schuele, MD
Mailing Address 32 Winston Dr
City: Belleair | State: FL | Zip Code: 33756-1646
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Specialty Gro-up
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A2A72D62A3559476C8AD
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial)
Franklin H. Sim, MD
Mailing Address 1303 Woodland Dr SW
City: Rochester | State: MN | Zip Code: 55902-4226
FEC ID number of contributing federal political committee. C
Name of Employer: Mayo Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AA082504051F842A2AC8
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Daniel I. Singer, MD
Mailing Address 1380 Lusitana St Suite 615
City: Honolulu | State: HI | Zip Code: 96813-2442
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Assoc of Hawaii
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A11842C841387479493E
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **900.00**

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

Image# 10931474896

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Peter J. Stern, MD
Mailing Address Dept Of Orthopaedic Surgery
231 Albert Sabin Way, Msb-5508
City: Cincinnati State: OH Zip Code: 45267-0001
FEC ID number of contributing federal political committee. C
Name of Employer: Univ of Cincinnati College of Med
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AAFD55E6480EC41ACAD3
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial)
Dr. Alexandra J. Strong
Mailing Address 15600 Dempsey Road
City: Leavenworth State: KS Zip Code: 66048-6373
FEC ID number of contributing federal political committee. C
Name of Employer: Drisko Fee and Parkins
Occupation: Orthopedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: ABCD7F62F5E394237A62
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
James H. Van Olst, MD
Mailing Address 136 SW Washington Ave #605
City: Corvallis State: OR Zip Code: 97333-4879
FEC ID number of contributing federal political committee. C
Name of Employer: Retired
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AD3346E02BFAE4CFFB38
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1125.00**

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

Image# 10931474897

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark D. Visk, MD
Mailing Address Attn: Karen Barnes
303 E Wood St
City: Spartanburg State: SC Zip Code: 29303-3020
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Specialties of Spartanburg
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A4278B0AD87984F19804
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Peter White Whitfield, MD
Mailing Address 7 Hillwind Ct
City: Greensboro State: NC Zip Code: 27408-3866
FEC ID number of contributing federal political committee. C
Name of Employer: Southeastern Orthopaedic Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A0C7650DDF3E9433E879
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial)
Howard L. Wilcox, Jr, MD
Mailing Address 26351 W. Cedar Niles Circle
City: Olathe State: KS Zip Code: 66061-7478
FEC ID number of contributing federal political committee. C
Name of Employer: Kansas Ortho & Sports Med
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: A964F7565CE5D40499E6
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1625.00**

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

Image# 10931474898

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Robert Michael Williams, MD
Mailing Address 1935 Oakleigh Place
City: Ann Arbor | State: MI | Zip Code: 48103-8925
FEC ID number of contributing federal political committee. C
Name of Employer: St Joseph Mercy Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: AAB8D21F1CF844074904
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Manuel Tablan Banzon, MD
Mailing Address 141 Deer Path Ln
City: Freehold | State: NJ | Zip Code: 07728-8588
FEC ID number of contributing federal political committee. C
Name of Employer: AOSMI
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A341F309C75F94867B71
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial)
Neil Jay Barkin, MD
Mailing Address 8612 Nutmeg Ct
City: Potomac | State: MD | Zip Code: 20854-1635
FEC ID number of contributing federal political committee. C
Name of Employer: Capitol Orthopaedics & Re-habil
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A019BFB804FD0418AAAD
Amount of Each Receipt this Period: 200.00

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

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

Image# 10931474899

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Richard Blanks, MD
Mailing Address 6684 N. St Catherine Ct
City: Fresno | State: CA | Zip Code: 93711-1294
FEC ID number of contributing federal political committee. C
Name of Employer: Spine & Orthopaedic Ctr
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AE4ED6FCA3B574FE0ADE
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial)
Jaren Douglas Bombach, MD
Mailing Address 2587 Newark-Granville Rd
City: Granville | State: OH | Zip Code: 43023-9149
FEC ID number of contributing federal political committee. C
Name of Employer: Cardinal Orthopaedic Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AA04CE8EE48204B799ED
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Clayton B. Brandes, MD
Mailing Address 9536 NE 31st St
City: Clyde Hill | State: WA | Zip Code: 98004-1736
FEC ID number of contributing federal political committee. C
Name of Employer: Proliance Surgeons
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A935A44F97DBD4632AE1
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 600.00

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

Image# 10931474900

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 229
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jeffrey B. Burnette, MD
Mailing Address 116 N. Haven Dr
City: Macon | State: GA | Zip Code: 31210-1219
FEC ID number of contributing federal political committee. C
Name of Employer: Piedmont Ortho & Sports Medici
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A46385FE0FCCC4084ABA
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Michael T. Busch, MD
Mailing Address 5445 Meridian Mark Rd Ste 250
City: Atlanta | State: GA | Zip Code: 30342-4767
FEC ID number of contributing federal political committee. C
Name of Employer: Childrens Ortho Surgical
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A7971D14D83C84C2A87E
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial)
Wayne Anthony Colizza, MD
Mailing Address 3 Hillside Ct East
City: Morris Plains | State: NJ | Zip Code: 07950-2007
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AD16540CE91A14AC191C
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1625.00**

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

Image# 10931474901

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 110 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Ralph H. Congdon, MD
Mailing Address 2300 53rd Ave Suite 100
City: Bettendorf | State: IA | Zip Code: 52722-7565
FEC ID number of contributing federal political committee. C
Name of Employer: ORA Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A9C87EB2B03E740B3B7C
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
David B. Coward, MD
Mailing Address 2801 K St Suite 310
City: Sacramento | State: CA | Zip Code: 95816-5119
FEC ID number of contributing federal political committee. C
Name of Employer: Sacramento Knee And Sports Med
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A296D20145D5F4F05B9A
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Mark W. Diehl, MD
Mailing Address 1110 Hazeltine Ln
City: Kennesaw | State: GA | Zip Code: 30152-4742
FEC ID number of contributing federal political committee. C
Name of Employer: Pinnacle Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AEA7684B9B71A470F8EF
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474902

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Steven L. Drayer, MD
Mailing Address 1515 Lake Lansing Rd Suite B-1
City: Lansing | State: MI | Zip Code: 48912-3752
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AFA886846E82B4685AEB
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Cornelis M. Elmes, MD
Mailing Address PO Box 6807
City: Vacaville | State: CA | Zip Code: 95696-6807
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AEFF502CEE4B149679BB
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Jeff Aaron Fox, MD
Mailing Address 11555 S. 68th East Ave
City: Bixby | State: OK | Zip Code: 74008-8250
FEC ID number of contributing federal political committee. C
Name of Employer: Csos
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A945D0E54417B496485D
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474903

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David Harrison Gilbert, MD
Mailing Address 5301 N. Dixie Hwy Suite 203
City: Oakland Park | State: FL | Zip Code: 33334-3447
FEC ID number of contributing federal political committee. C
Name of Employer: Broward Orthopaedic Specialist
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A8C3890E06D474923AC9
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Christopher R. Goll, MD
Mailing Address 7758 Chipwood Ln
City: Jacksonville | State: FL | Zip Code: 32256-2350
FEC ID number of contributing federal political committee. C
Name of Employer: Heekin Ortho Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A05E937B821A24F84B0B
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Gregory D. Gramstad, MD
Mailing Address 6702 SW Canyon Crest Dr
City: Portland | State: OR | Zip Code: 97225-3617
FEC ID number of contributing federal political committee. C
Name of Employer: Northwest Surgical Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AF85E1454A37348949AD
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474904

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Frank R. Joseph, MD
Mailing Address 1605 Brandon Hall Dr
City: Atlanta | State: GA | Zip Code: 30350-3704
FEC ID number of contributing federal political committee. C
Name of Employer: Resurgens Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A942CAD2D26E9447EAB8
Amount of Each Receipt this Period: 375.00

B.
Full Name (Last, First, Middle Initial)
John Charles Kofoed, MD
Mailing Address 2619 Seminole Ct
City: Fairfield | State: CA | Zip Code: 94534-7871
FEC ID number of contributing federal political committee. C
Name of Employer: Solano Regional Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A2BC158804A4643E48CF
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Christopher John Lang, MD
Mailing Address 1215 W. Chaucer
City: Spokane | State: WA | Zip Code: 99208-8675
FEC ID number of contributing federal political committee. C
Name of Employer: Spokane Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AC80CB1320EAB41088B1
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1875.00**

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

Image# 10931474905

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Richard P. Lewallen, MD
Mailing Address 2900 12th Ave N. Suite 100e
City: Billings | State: MT | Zip Code: 59101-7504
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Montana
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2625.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A3F636D86A422432F961
Amount of Each Receipt this Period: 1125.00

B.
Full Name (Last, First, Middle Initial)
Herbert J. Louis, MD
Mailing Address 5070 N. 40th St Suite 130
City: Phoenix | State: AZ | Zip Code: 85018-2193
FEC ID number of contributing federal political committee. C
Name of Employer: Retired
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A23A2A679686841F59D9
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Paul G. Melaragno, MD
Mailing Address 3288 Scioto Run Blvd
City: Hilliard | State: OH | Zip Code: 43026-3001
FEC ID number of contributing federal political committee. C
Name of Employer: Ohio Orthopedc Center Of Excel
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A8B9520417B664CB1B1D
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2325.00**

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

Image# 10931474906

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Thomas E. Menke, MD
Mailing Address 3001 Merideth Cir
City: Lexington | State: KY | Zip Code: 40513-1725
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A91879AFA6527488987C
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Brian Mullis, MD
Mailing Address Dept Of Ortho Surgery
541 Clininal Dr Ste 600
City: Indianapolis | State: IN | Zip Code: 46202-5233
FEC ID number of contributing federal political committee. C
Name of Employer: Indiana University School Of M
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A5B2289ED15894329BB9
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Peter O. Newton, MD
Mailing Address 3030 Children's Way Suite 410
City: San Diego | State: CA | Zip Code: 92123-4228
FEC ID number of contributing federal political committee. C
Name of Employer: CSSD
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A1AB7EAAD57BC472DB9E
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474907

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Robert Riederman, MD
Mailing Address 15 Merry Hill Ct
City: Baltimore | State: MD | Zip Code: 21208-1746
FEC ID number of contributing federal political committee: C
Name of Employer: Orthopaedic Specialty Gro-up
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A66FEB42B372748EE950
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Ricardo J. Rodriguez, MD
Mailing Address 1735 Woodchase Blvd
City: Baton Rouge | State: LA | Zip Code: 70808-5219
FEC ID number of contributing federal political committee: C
Name of Employer: Baton Rouge Orthopaedic Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A4235E4D1D75546559A8
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Larry J. Sanders, MD
Mailing Address 1520 S. Dobson Rd Suite 312
City: Mesa | State: AZ | Zip Code: 85202-4700
FEC ID number of contributing federal political committee: C
Name of Employer: Self Empolyed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A7FAE9924ABB9448F8C9
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **675.00**

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

Image# 10931474908

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Anthony J. Shaia
Mailing Address 11413 Barrington Bridge Ct
City: Henrico | State: VA | Zip Code: 23233-1753
FEC ID number of contributing federal political committee. C
Name of Employer: WEOC
Occupation: Physician
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A40149C60D0E648E195D
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Stephen J. Snyder, MD
Mailing Address 6815 Noble Ave
City: Van Nuys | State: CA | Zip Code: 91405-3796
FEC ID number of contributing federal political committee. C
Name of Employer: S.c.o.i.
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 650.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: A9BAC06AC7DF543C2AF3
Amount of Each Receipt this Period: 150.00

C.
Full Name (Last, First, Middle Initial)
Carey E. Winder, MD
Mailing Address 866 Woodgate Blvd
City: Baton Rouge | State: LA | Zip Code: 70808-5444
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AFDAC01D8035648F980F
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1650.00**

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

Image# 10931474909

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Edward W. Younger, III, MD
Mailing Address 8515 Kenneth Creek Ln
City: Fair Oaks | State: CA | Zip Code: 95628-5361
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 21 / 2010
Transaction ID: AA4C479D4693E495D805
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
John L. Andary, MD
Mailing Address 2035 E. 17th St
City: Idaho Falls | State: ID | Zip Code: 83404-6430
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A3B656043A0614468B60
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Allen F. Anderson, MD
Mailing Address 4230 Harding Rd Suite 1000
St Thomas Medical Bldg
City: Nashville | State: TN | Zip Code: 37205-2098
FEC ID number of contributing federal political committee. C
Name of Employer: Toa
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A80F38455190E4636BD1
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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

Image# 10931474910

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James H. Armstrong, MD
Mailing Address 2107 Allendale Rd
City: Montgomery | State: AL | Zip Code: 36111-1017
FEC ID number of contributing federal political committee. C
Name of Employer: Southern Orthopedic Surgeons
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A5AAE81DBF1794121A86
Amount of Each Receipt this Period: 375.00

B.
Full Name (Last, First, Middle Initial)
Joseph Assenmacher, MD
Mailing Address 7024 White Tail Ct
City: Toledo | State: OH | Zip Code: 43617-1391
FEC ID number of contributing federal political committee. C
Name of Employer: Promedica Physician Group
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A82EFBC82CE62437AB17
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Matthew Austin, MD
Mailing Address 840 Harriton Rd
City: Bryn Mawr | State: PA | Zip Code: 19010-1813
FEC ID number of contributing federal political committee. C
Name of Employer: Reconstruction Orthopaedic Ass
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A24BFA6489ADF4D27A7E
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) 1625.00

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

Image# 10931474911

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Dirk A. Bakker, MD
Mailing Address 13833 Lake Sedge
City: Grand Haven | State: MI | Zip Code: 49417-8984
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: ACF3694A49D2F447F962
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
J. Christopher Banwart, MD
Mailing Address 3130 Skelley Ct
City: Joplin | State: MO | Zip Code: 64804-1393
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Specialists of the Four St
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AC4E8E37436A34F6F854
Amount of Each Receipt this Period: 2000.00

C.
Full Name (Last, First, Middle Initial)
Charles Rodney Barnhart, MD
Mailing Address 1105 Parkview Ave
City: Pasadena | State: CA | Zip Code: 91103-2357
FEC ID number of contributing federal political committee. C
Name of Employer: San Gabriel Orthopedic Medical
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A31EFA335D85B4AC8A03
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2750.00**

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

Image# 10931474912

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 121 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Avi J. Bernstein, MD
Mailing Address 1055 Pawnee Rd
City: Wilmette | State: IL | Zip Code: 60091-1346
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AEAE30036E23F4AE1B0C
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Paul D. Burton, DO
Mailing Address 250 Campbell Ave
City: Redlands | State: CA | Zip Code: 92373-6832
FEC ID number of contributing federal political committee. C
Name of Employer: Arrowhead Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A22168EBFF2F84739919
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Andrew Roger Curran, MD
Mailing Address 4262 S. Rustler Ln
City: Meridian | State: ID | Zip Code: 83642-6883
FEC ID number of contributing federal political committee. C
Name of Employer: Saltzer Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AE8A85E84B21F456DBF0
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474913

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stephen W. Dailey, MD
Mailing Address 2740 Allen Glen Dr
City: Mechanicsburg State: PA Zip Code: 17055-5995
FEC ID number of contributing federal political committee. C
Name of Employer: OIP
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A4DC8D898E23D4F38AD3
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Robert A. Eppley, MD
Mailing Address 26 Cedar Ln
City: Orinda State: CA Zip Code: 94563-3629
FEC ID number of contributing federal political committee. C
Name of Employer: Cal Sports & Ortho Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A093D52B0500047A5AB7
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Dennis H. Gordon, MD
Mailing Address PO Box 17290
City: Salt Lake City State: UT Zip Code: 84117-0290
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A5FE6B4B3C52F4A4BA6B
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474914

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
William A. Grana, MD, MPH
Mailing Address 7137 N. Finger Rock Place
City: Tucson | State: AZ | Zip Code: 85718-1405
FEC ID number of contributing federal political committee: C
Name of Employer: University of Arizona
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A9F7C8D323E8447C0859
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
William G. Hamilton, MD
Mailing Address 8299 Glen Cove Ct
City: Alexandria | State: VA | Zip Code: 22308-1657
FEC ID number of contributing federal political committee: C
Name of Employer: Anderson Orthopaedic Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AE9C48031AAE648EBB9F
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Robert H. Harrington, MD
Mailing Address 7 Marsh Brook Dr Suite 205
City: Somersworth | State: NH | Zip Code: 03878-6523
FEC ID number of contributing federal political committee: C
Name of Employer: Seacoast Orthopedics And Sport
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AF54146F9172C4C09ABF
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474915

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Edward J. Hellman, MD
Mailing Address 12715 Norfolk Ln
City: Carmel | State: IN | Zip Code: 46032-8657
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Indy
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A6252523A458B492C9E8
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Paul Alan Kammerlocher, MD
Mailing Address 2907 NW 40th Place
City: Newcastle | State: OK | Zip Code: 73065-6568
FEC ID number of contributing federal political committee. C
Name of Employer: Mcbride Clinic Inc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A7155B9DE7D54433682C
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Dr. e jeff kennedy, MD
Mailing Address 290 E Layfair Drive Suite A
City: Flowood | State: MS | Zip Code: 39232-9526
FEC ID number of contributing federal political committee. C
Name of Employer: capital orthopaedic clinic
Occupation: ortho surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AFA3AED46732F4303A6B
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

Image# 10931474916

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 125 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Thomas Vaill King, MD
Mailing Address 333 Borthwick Ave Suite 301
City: Portsmouth | State: NH | Zip Code: 03801-7128
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A317F02DE7D13442DA3D
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Hans C. Kioschos, MD
Mailing Address 622 Par Dr
City: Gillette | State: WY | Zip Code: 82718-7622
FEC ID number of contributing federal political committee. C
Name of Employer: Powder River Orthopaedic Surge
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A338B6706018A4A8E915
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Roger A. Klein, MD
Mailing Address 1111 Sonoma Ave Suite 106
City: Santa Rosa | State: CA | Zip Code: 95405-4813
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A7A30EDC9F34E4C0B99E
Amount of Each Receipt this Period: 1000.00

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

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

Image# 10931474917

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 229
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Thomas R. Knutson, MD
Mailing Address 161 N. Date St
City: Escondido | State: CA | Zip Code: 92025-3405
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A0E80676F1E7B417E8B5
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
David J. Kuester, MD
Mailing Address 4011 Seneca Ct
City: Manitowoc | State: WI | Zip Code: 54220-3077
FEC ID number of contributing federal political committee: C
Name of Employer: Orthopaedic Associates of Manitowoc
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A51961FFBFDCA41558B8
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Louis M. Kwong, MD
Mailing Address Los Angeles County Harbor 1000 W Carson St Box 422
City: Torrance | State: CA | Zip Code: 90502-2004
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AFEDBCF6DBF324D0A9D9
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474918

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Gregory Price Lee, MD
Mailing Address 226 Albermarle Place
City: Macon | State: GA | Zip Code: 31204-1308
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Georgia
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A6A5DF03F4549437D95A
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Chunbong Benjamin Ma, MD
Mailing Address 645 Spar Dr
City: Redwood City | State: CA | Zip Code: 94065-1151
FEC ID number of contributing federal political committee. C
Name of Employer: Univ Of California San Fr-ancis
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AEA82401073D34F1AAAA
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
James O. Maher, III, MD
Mailing Address 12 Peckham Ave
City: Newport | State: RI | Zip Code: 02840-1753
FEC ID number of contributing federal political committee. C
Name of Employer: University Orthopaedic Cl-inic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AE4DB2D5A56E8421D84A
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474919

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Craig Robert Mahoney, MD
Mailing Address 2004 S. 40th Ct
City: West Des Moines | State: IA | Zip Code: 50265-5764
FEC ID number of contributing federal political committee. C
Name of Employer: Iowa Ortho Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A4D7C3ABA26AD4188B7E
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Michael Dennis Maloney, MD
Mailing Address 601 Elmwood Ave Box 665
City: Rochester | State: NY | Zip Code: 14642-0001
FEC ID number of contributing federal political committee. C
Name of Employer: Univ Of Rochester Medical Cent
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AEF4D7DDB028449CB84A
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Joseph C. McCarthy, MD
Mailing Address 2000 Washington St Suite 361 Green
City: Newton Lower Falls | State: MA | Zip Code: 02462
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: ABEFABC4F72844D21B98
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ **1625.00**

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

Image# 10931474920

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 129 / 229
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jeffrey Meisles, MD
Mailing Address 360 W. Butterfield Rd Suite 160
City: Elmhurst | State: IL | Zip Code: 60126-5099
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A7D930924E1544B6CA9B
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Robert Michael Meneghini, MD
Mailing Address 801 Ivy Lane
City: Carmel | State: IN | Zip Code: 46032-4670
FEC ID number of contributing federal political committee. C
Name of Employer: Indiana Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AF996E6AFB24D4D519CB
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Kevin M. Moran, MD
Mailing Address 35 Juniper Grove Place
City: Spring | State: TX | Zip Code: 77382-4403
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 585.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A8FA50F89723746008C4
Amount of Each Receipt this Period: 585.00

SUBTOTAL of Receipts This Page (optional) ▶ **1835.00**

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

Image# 10931474921

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Douglas S. Musgrave, MD
Mailing Address 15800 NW Fair Acres Dr
City: Vancouver | State: WA | Zip Code: 98685-1665
FEC ID number of contributing federal political committee. C
Name of Employer: Northwest Surgical Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A82272E5C221B4EF485A
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
E. Louis Peak, MD
Mailing Address 4140 3rd St NW
City: Hickory | State: NC | Zip Code: 28601-6901
FEC ID number of contributing federal political committee. C
Name of Employer: Joint Replacement Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A9CBE4DEE5CCC4CB9BA8
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Gregg D. Pike, MD
Mailing Address 15 Cougar Dr
City: Great Falls | State: MT | Zip Code: 59404-6463
FEC ID number of contributing federal political committee. C
Name of Employer: Great Falls Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A4EBDE627933C46B5915
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474922

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 131 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Christopher S. Proctor, MD
Mailing Address 511 Bath St
City: Santa Barbara | State: CA | Zip Code: 93101-3403
FEC ID number of contributing federal political committee. C
Name of Employer: Alta Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AD9832F0BC7E34AB1BAB
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
James R. Rappaport, MD
Mailing Address 6630 S. McCarran Bldg 4 Ste A
City: Reno | State: NV | Zip Code: 89509-6145
FEC ID number of contributing federal political committee. C
Name of Employer: Sierra Regional Spine Institut
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1200.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A2CA1DD742758438CBB0
Amount of Each Receipt this Period: 200.00

C.
Full Name (Last, First, Middle Initial)
Kurt W. Rathjen, MD
Mailing Address 4331 Lorraine Ave
City: Dallas | State: TX | Zip Code: 75205-3707
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A1CB35279AE7B48DDAD9
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **950.00**

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

Image# 10931474923

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark Arentz Rhodes, MD
Mailing Address 2110 N. Vantage Circle
City: Tucson | State: AZ | Zip Code: 85749-9117
FEC ID number of contributing federal political committee. C
Name of Employer: Wm B Pirie Hospital
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A0F28534F89B542A5A87
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Neal L. Rockowitz, MD
Mailing Address Rockowitz Orthopaedic Center
3815 North 32nd St
City: Phoenix | State: AZ | Zip Code: 85018-4901
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A9AAC556EA5D6461EA98
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Samuel R. Rosenfeld, MD
Mailing Address 1212 Bennington Dr
City: Santa Ana | State: CA | Zip Code: 92705-2331
FEC ID number of contributing federal political committee. C
Name of Employer: Apos
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A9574482385764951886
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1375.00**

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

Image# 10931474924

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Steven Douglas K. Ross, MD
Mailing Address Dept Of Orthopaedics-Uci
101 City Dr So, Pav Iii Rm 210
City: Orange State: CA Zip Code: 92868
FEC ID number of contributing federal political committee. C
Name of Employer: Regents Of Uc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A18A391ADD6674FCB955
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial)
Benjamin D. Rubin, MD
Mailing Address 21 Chatham Ct
City: Newport Beach State: CA Zip Code: 92660-4229
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A29E623A32EE74248A38
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial)
Mark Ruoff, MD
Mailing Address 15 Sierra Ct
City: Hillsdale State: NJ Zip Code: 07642-1012
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A1F45B854DE0E4AD99E2
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1100.00**

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

Image# 10931474925

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Kooros Sajadi, MD
Mailing Address 230 Foutain Ct Suite 180
City: Lexington | State: KY | Zip Code: 40509-1896
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A75F85A34AA644831B87
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Scott B. Schneider, MD
Mailing Address N30w23473 Greenfield Ct Unit B
City: Pewaukee | State: WI | Zip Code: 53072-5887
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates of Wisconsin
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A0EF7C7F1DF324063813
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Gregory S. Slappey, MD
Mailing Address 139 Fairway Dr
City: Carrollton | State: GA | Zip Code: 30117-4134
FEC ID number of contributing federal political committee. C
Name of Employer: Carrollton Orthopaedic Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A44F87EF0769A403AB93
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474926

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Cooper L. Terry, MD
Mailing Address 1106 S. Lamar Blvd
City: Oxford | State: MS | Zip Code: 38655-4732
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AE3D04AA745A544C69C9
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Suresh Velagapudi, MD
Mailing Address 2111 Ogden Ave
City: Aurora | State: IL | Zip Code: 60504-7597
FEC ID number of contributing federal political committee. C
Name of Employer: Castle Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A5E62FB65A83B48F7AE3
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Torrance Anthony Walker, MD
Mailing Address 2404 Foxborough
City: Pine Bluff | State: AR | Zip Code: 71603
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A6B196BFBB8DA405D802
Amount of Each Receipt this Period: 750.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

Image# 10931474927

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Greg L. Westmoreland, MD
Mailing Address 1006 Wyndham Way #1522
City: Knoxville | State: TN | Zip Code: 37923-7112
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AD8BF555B236D49DFA2D
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Robert B. Wilsterman, MD
Mailing Address 5 Bramblebush Park
City: Falmouth | State: MA | Zip Code: 02540-2325
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopedic Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A6E7F10A55B304EDE9FD
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Mark A. Wolgin, MD
Mailing Address 1709 Devon Dr
City: Albany | State: GA | Zip Code: 31721-1948
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 675.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: A3100ED5B3AED48C8914
Amount of Each Receipt this Period: 225.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1225.00**

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

Image# 10931474928

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 137 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Steven G. Wynder, MD
Mailing Address 2003 Stults Rd Suite 210
City: Huntington | State: IN | Zip Code: 46750-1291
FEC ID number of contributing federal political committee. C
Name of Employer: Parkview Health
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: AA709F6D6289C497888F
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Amit Agarwala, MD
Mailing Address 660 Golden Ridge Rd Suite 250
Panorama Ortho & Spine Ctr
City: Lakewood | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A58F480C28795423DA61
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
James A. Albright, MD
Mailing Address 3932 Fairfield Ave
City: Shreveport | State: LA | Zip Code: 71106-1014
FEC ID number of contributing federal political committee. C
Name of Employer: VHA
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A43BBB6C1362D490F8D5
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

Image# 10931474929

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 138 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Peter C. Amadio, MD
Mailing Address 200 1st St SW
City: Rochester | State: MN | Zip Code: 55905-0001
FEC ID number of contributing federal political committee. C
Name of Employer: Mayo Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AD65E8D6E13614FA7A63
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Thomas E. Baier, MD
Mailing Address 725 Stonegate
City: Libertyville | State: IL | Zip Code: 60048-1855
FEC ID number of contributing federal political committee. C
Name of Employer: Greenleaf Orthopedic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A060F25629EE747D7B14
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Richard W. Barth, MD
Mailing Address 6516 Goldleaf Dr
City: Bethesda | State: MD | Zip Code: 20817-5837
FEC ID number of contributing federal political committee. C
Name of Employer: Washington Orthopaedics & Sports Med
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AA7B979B66E2F40A8875
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474930

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 139 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Evan K. Bash, MD
Mailing Address 127 Walker Ln
City: Wallingford | State: PA | Zip Code: 19086-6127
FEC ID number of contributing federal political committee. C
Name of Employer: Premier Ortho & Sports Med Assoc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A15768C965D824FBC872
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Tomasz W. Borowiecki, MD
Mailing Address 49 Linden Ln
City: Springfield | State: IL | Zip Code: 62712-8965
FEC ID number of contributing federal political committee. C
Name of Employer: Springfield Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A41FD53939092499FAEB
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Christopher M. Brian, MD
Mailing Address 6 White Birch
City: Littleton | State: CO | Zip Code: 80127-3551
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A3F4B7BB4F2D046218BD
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474931

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Daniel Alexander Capen, MD
Mailing Address 3416 The Strand
City: Manhattan Beach | State: CA | Zip Code: 90266-3350
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A05DE5D78386446B9A86
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Kevin Bron Cleveland, MD
Mailing Address 150 E. Goodwyn
City: Memphis | State: TN | Zip Code: 38111-2514
FEC ID number of contributing federal political committee. C
Name of Employer: Campbell Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AE72D64550A084C09B1C
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Paul Victor Conescu, MD
Mailing Address 3118 8th St
City: Las Vegas | State: NM | Zip Code: 87701-5135
FEC ID number of contributing federal political committee. C
Name of Employer: Alta Vista Clinic Corporation
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A5B370F60F0724516AC0
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474932

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark J. Conklin, MD
Mailing Address 1702 Sand Lily Dr
City: Golden | State: CO | Zip Code: 80401-8503
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: ADA23B1C5F2194305A06
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Stephen F. Conti, MD
Mailing Address 1704 Chestnut Ct
City: Sewickley | State: PA | Zip Code: 15143-8634
FEC ID number of contributing federal political committee. C
Name of Employer: Allegheny General Hospital
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A6ED018891DB2427292A
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Lisa DeGnore, MD
Mailing Address 4641 Collinswood Dr
City: Lexington | State: KY | Zip Code: 40515-6202
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AAC20D42EA7244259A6B
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474933

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 142 / 229
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Premjit Deol, DO
Mailing Address 1690 Bassett St Unit 11
City: Denver | State: CO | Zip Code: 80202-1880
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 24 / 2010
Transaction ID: ACBCFD22657FC4B9B912
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Bharat M. Desai, MD
Mailing Address 7955 Spirit Ranch Rd
City: Golden | State: CO | Zip Code: 80403-8123
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 24 / 2010
Transaction ID: AA31B867A6E7B450DB79
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Allen A. Deutsch, MD
Mailing Address 4516 Oleander St
City: Bellaire | State: TX | Zip Code: 77401-5119
FEC ID number of contributing federal political committee. C
Name of Employer: Kelsey Seybold Clinic
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 09 / 24 / 2010
Transaction ID: A68A90156685F417580D
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474934

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 143 / 229
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
David M. Dines, MD
Mailing Address 2 Highland Ct
City: Old Westbury | State: NY | Zip Code: 11568-1527
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A1EC3C8A020DC4FA3A12
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Thomas F. Eastman, MD
Mailing Address 610 Noble Hill Rd
City: Yakima | State: WA | Zip Code: 98908-9114
FEC ID number of contributing federal political committee. C
Name of Employer: Yakima Valley Memorial Hospita
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A6EDCF88D523D4EEEB4A
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Stephen G J. Eckrich, MD
Mailing Address PO Box 6850
City: Rapid City | State: SD | Zip Code: 57709-6850
FEC ID number of contributing federal political committee. C
Name of Employer: Black Hills Orthopaedic & Spine
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A3635A73F1F83407D970
Amount of Each Receipt this Period: 750.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2000.00**

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

Image# 10931474935

SCHEDULE A (FEC Form 3X)
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Douglas A. Foulk, MD
Mailing Address 660 Golden Ridge Rd Suite 250
City: Golden | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee: C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A2A19CDAFC72E4AC2AC8
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Thomas G. Friermood, MD
Mailing Address 2635 Vivian St
City: Lakewood | State: CO | Zip Code: 80215-1018
FEC ID number of contributing federal political committee: C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: ABEF6C028B2DB4B9CA3F
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Christopher Ghigiarelli, MD
Mailing Address 26 Fitzgerald Dr
City: Moosic | State: PA | Zip Code: 18507-2105
FEC ID number of contributing federal political committee: C
Name of Employer: Scranton Orthopaedic Specialis
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A4A9425353AEA43DB961
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474936

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark H. Gonzalez, MD
Mailing Address 2725 N. Mildred
City: Chicago | State: IL | Zip Code: 60614-1417
FEC ID number of contributing federal political committee. C
Name of Employer: University of Illinois Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A523E8D15BAC143A58BF
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Charles Adam Gottlob, MD
Mailing Address 623 W. Meadow Rd
City: Evergreen | State: CO | Zip Code: 80439-9745
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A36BF44D4ACD24108B9E
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Robert N Hotchkiss, MD
Mailing Address 523 E 72nd St 4th Floor
City: New York | State: NY | Zip Code: 10021-4099
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A33C7EAE9881D4CAF9C1
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474937

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 146 / 229
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Raeburn M. Jenkins, MD
Mailing Address 660 Golden Ridge Rd Suite 250
City: Golden | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 24 / 2010
Transaction ID: A099AE5F0EE56438DB43
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
James T. Johnson, MD
Mailing Address 608 S. Pearl St
City: Denver | State: CO | Zip Code: 80209-4211
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 24 / 2010
Transaction ID: ABA7016762FF44E3CA87
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Armen Khachatryan, MD
Mailing Address Center Of Orthopedic Rehabilitatio
3584 W 9000 South Ste 405
City: West Jordan | State: UT | Zip Code: 84088-5712
FEC ID number of contributing federal political committee. C
Name of Employer: Physicians Group of Utah
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 24 / 2010
Transaction ID: AF5A34417E9BB4556AC1
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 1000.00

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

Image# 10931474938

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 147 / 229
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X 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Bruce P. Klein, MD
Mailing Address 5051 Butler Rd
City: Canandaigua | State: NY | Zip Code: 14424-2710
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A1D14A42D55664C04BAF
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Richard Krugel, MD
Mailing Address 1257 Charrington
City: Bloomfield Hills | State: MI | Zip Code: 48301-2116
FEC ID number of contributing federal political committee. C
Name of Employer: Wayne State Physician Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A97AEACD5DF7A42F9A25
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Peter Lammens, MD
Mailing Address 660 Golden Ridge Rd Suite 250
City: Golden | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A8633C30224FA4BE6A48
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474939

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 148 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Gregory Daniel Lewish, MD
Mailing Address 2211 Lyell Ave Suite 107
City: Rochester | State: NY | Zip Code: 14606-5743
FEC ID number of contributing federal political committee. C
Name of Employer: Westside Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A7A025A4762EC4A62B1B
Amount of Each Receipt this Period: 200.00

B.
Full Name (Last, First, Middle Initial)
Rafael Antonio Lopez, MD
Mailing Address 198 Zorzal St
Montehiedra
City: San Juan | State: PR | Zip Code: 00926-7110
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AE357AA9DDB224643ACF
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Lonnie Eric Loutzenhiser, MD
Mailing Address 1411 Wynkoop St Unit 702
City: Denver | State: CO | Zip Code: 80202-1789
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AAD390C6E9AA84DB8B54
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1450.00**

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

Image# 10931474940

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 149 / 229

X 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Benzel C. MacMaster, MD
Mailing Address 5955 Joyce Way
City: Dallas | State: TX | Zip Code: 75225-1626
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AD697FD29F6C64394ACA
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial)
Thomas A. Malvitz, MD
Mailing Address 5480 Forest Bend Dr
City: Ada | State: MI | Zip Code: 49301-9005
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates of Michigan
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A5F315BBC75EE468780B
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Patrick McNair, MD
Mailing Address 9670 Bellmore Ln
City: Highlands Ranch | State: CO | Zip Code: 80126-4971
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A1A78476C7E914377AA0
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474941

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark F. Mills, MD
Mailing Address 660 Golden Ridge Rd Suite 250
City: Golden | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A772CFF1244364DE0ACD
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Steven Braxton Morgan, MD
Mailing Address 1222 San Saba Ct
City: Allen | State: TX | Zip Code: 75013
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A16721890A015493F894
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Roger E. Murken, MD
Mailing Address 1546 Brettonwood Way
City: Littleton | State: CO | Zip Code: 80129-1834
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AB024E523399F4AE8941
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474942

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 151 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Stephen J. Parazin, MD
Mailing Address 5 Cardinal Dr
City: Westwood | State: MA | Zip Code: 02090-1176
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A4387D02B8A4847B89D6
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Nimesh Patel, MD
Mailing Address 1898 Denver West Ct Apt 1211
City: Lakewood | State: CO | Zip Code: 80401-0928
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AE2FDF042A6124B85867
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Anatol Podolsky, MD
Mailing Address 4627 Surrey Dr
City: Corona Del Mar | State: CA | Zip Code: 92625-2725
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A23FFACCC5E0D48E1B02
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474943

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 152 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Thomas Joseph Puschak, MD
Mailing Address 5275 Dunraven Circle
City: Golden | State: CO | Zip Code: 80403-2059
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A45E2F920946A4EE4862
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Jeffrey P. Remington, MD
Mailing Address 8015 Talbot Rd
City: Edmonds | State: WA | Zip Code: 98026-5040
FEC ID number of contributing federal political committee. C
Name of Employer: Proliance Surgeons
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A9372B509E9644B6EB4C
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Walter G. Robinson, Jr, MD
Mailing Address 3042 Nelsoon Dr
City: Lakewood | State: CO | Zip Code: 80215-7155
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: ADD942FD347A447A4B99
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474944

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 153 / 229
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mitchel S. Robinson, MD
Mailing Address 5021 East Oxford Ave
City: Cherry Hills Villa | State: CO | Zip Code: 80113-5117
FEC ID number of contributing federal political committee: C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AB6C6E512B51947DD9B2
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Edmund B. Rowland, Jr, MD
Mailing Address 1301 Old Foards Ln
City: Wilmington | State: NC | Zip Code: 28409-2034
FEC ID number of contributing federal political committee: C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AA7E2BB1048A549268AD
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Thomas J. Schenk, MD
Mailing Address 15114 E. Ridgeway Dr
City: Fountain Hills | State: AZ | Zip Code: 85268-4842
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A535C6305785B45AD9E9
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474945

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 154 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John M. Schimpke, MD
Mailing Address 3431 Old Baldwin Rd
City: Lake Angelus | State: MI | Zip Code: 48326-1274
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AC9E6FCF99BAB45E89D7
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Mitchell D. Seemann, MD
Mailing Address 660 Golden Ridge Rd Suite 250
City: Golden | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A7A58BF6B3C124D63B06
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Raymond M P. Sherman, MD
Mailing Address 903 Willow Circle
City: Dakota Dunes | State: SD | Zip Code: 57049-5290
FEC ID number of contributing federal political committee. C
Name of Employer: CNOS
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A2B2B32F9A67742EE89D
Amount of Each Receipt this Period: 500.00

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

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

Image# 10931474946

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 155 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Eric J. Stahl, MD
Mailing Address 660 Golden Ridge Rd Suite 250
City: Golden | State: CO | Zip Code: 80401-9541
FEC ID number of contributing federal political committee: C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AA29F49C564324B8794C
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Scott P. Steinmann, MD
Mailing Address 1118 Plummer Circle SW
City: Rochester | State: MN | Zip Code: 55902-2083
FEC ID number of contributing federal political committee: C
Name of Employer: Mayo Clinic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AC23D2D068F08436EA1E
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Douglas J. Straehley, MD
Mailing Address 14590 W. 58th Place
City: Arvada | State: CO | Zip Code: 80004-3764
FEC ID number of contributing federal political committee: C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A8ACF336CA8C3448FB5D
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

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

Image# 10931474947

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 156 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James W. Strickland, MD
Mailing Address 8528 Lake Clearwater Ln Apt 1014
City: Indianapolis | State: IN | Zip Code: 46240-7743
FEC ID number of contributing federal political committee. C
Name of Employer: Rush Memorial Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AF6AD8DDE67FF46EC825
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Andrew J. Vicar, MD
Mailing Address 8934 Dandy Creek Dr
City: Indianapolis | State: IN | Zip Code: 46234-2824
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Indy
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: A6783294661AE4E479AF
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Douglas Cabot Wong, MD
Mailing Address 23769 Shooting Star Dr
City: Golden | State: CO | Zip Code: 80401-9141
FEC ID number of contributing federal political committee. C
Name of Employer: Panorama Ortho & Spine Center
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: AEB1E548222D94B96847
Amount of Each Receipt this Period: 250.00

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

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

Image# 10931474948

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 157 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Joseph P. Walls, MD
Mailing Address 2778 Bedford Way
City: Carson City | State: NV | Zip Code: 89703-4618
FEC ID number of contributing federal political committee. C
Name of Employer: Capitol Orthopedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 26 / 2010
Transaction ID: A6FE670E93A6946A1BD0
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Lesley J. Anderson, MD
Mailing Address 133 San Marino Dr
City: San Rafael | State: CA | Zip Code: 94901-1537
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AC445EB5B46554F199AA
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
William Lamont Bargar, MD
Mailing Address 1020 29th St Suite 450
City: Sacramento | State: CA | Zip Code: 95816-5173
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AE8F0ECD3B02C424E88C
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

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

Image# 10931474949

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 158 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jeffery P. Beckenbaugh, DO
Mailing Address 4121 8th St SW
City: Rochester | State: MN | Zip Code: 55902-8751
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A08DCD9315305419BBE3
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Thomas J. Blumenfeld, MD
Mailing Address 1020 29th St Suite 450
City: Sacramento | State: CA | Zip Code: 95816-5173
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A8AEF29DA53B1479EA93
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
W. John Bruder, MD
Mailing Address 4045 W. Royal Dr
City: Traverse City | State: MI | Zip Code: 49684-8965
FEC ID number of contributing federal political committee. C
Name of Employer: Great Lakes Orthopaedic
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: ABBA84792434C48BEA1B
Amount of Each Receipt this Period: 125.00

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

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

Image# 10931474950

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 159 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Salvador B. Cecilio, MD
Mailing Address Orthopedic Surgery
302 California Ave Ste 202
City: Wahiawa State: HI Zip Code: 96786-1841
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AC756BAE011DC4D159F0
Amount of Each Receipt this Period: 300.00

B.
Full Name (Last, First, Middle Initial)
Shannon E. Cooke, MD
Mailing Address 1342 Elmwood Dr
City: Abilene State: TX Zip Code: 79605-4906
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AD4D84C1EE20F4DAB868
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Steven C. Dennis, MD
Mailing Address 22 Corporate Plz
City: Newport Beach State: CA Zip Code: 92660-7985
FEC ID number of contributing federal political committee. C
Name of Employer: Newport Orthopaedic Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A97DEB5D0C1BA4CAF8A4
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2300.00**

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

Image# 10931474951

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 160 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mark E. Endicott, MD
Mailing Address 2801 K St Suite 500
City: Sacramento | State: CA | Zip Code: 95816-5119
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AAF1226B8E3DA4C33B31
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Jefferson Christophe Eyke, MD
Mailing Address 1400 Mercy Dr Suite 100
City: Muskegon | State: MI | Zip Code: 49444-1836
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AE623D4B8C796493590C
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Howard I. Freedberg, MD
Mailing Address 2354 Tennyson
City: Highland Park | State: IL | Zip Code: 60035-1649
FEC ID number of contributing federal political committee. C
Name of Employer: Suburban Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 675.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A9BD491C4636B49D1ACF
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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

Image# 10931474952

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 161 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Eduardo Gonzalez-Hernandez, MD
Mailing Address 3773 Matheson Ave
City: Coconut Grove | State: FL | Zip Code: 33133-6737
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AE31C5FE813294CDC833
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
William L. Green, MD
Mailing Address 3838 California St Suite 715
City: San Francisco | State: CA | Zip Code: 94118-1509
FEC ID number of contributing federal political committee. C
Name of Employer: CPOSM
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A64660F55A3154AFD896
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Jerry Speight Grimes, MD
Mailing Address 3304 20th St
City: Lubbock | State: TX | Zip Code: 79410-1412
FEC ID number of contributing federal political committee. C
Name of Employer: The Center for Orthopaedi-cs
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AAA754A879DB84AF493B
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474953

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 162 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James P. Gutheil, MD
Mailing Address 4609 8th St
City: Lubbock | State: TX | Zip Code: 79416-4704
FEC ID number of contributing federal political committee: C
Name of Employer: Covenant Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AF4708F70B3814D9BA85
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Daniel H. Heller, MD
Mailing Address 9327 N. 3rd St Suite 101
City: Phoenix | State: AZ | Zip Code: 85020-2471
FEC ID number of contributing federal political committee: C
Name of Employer: Arizona Bone & Joint Surg-eons
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A4B040CCC3DE34A4FA65
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
James P. Jamison, MD
Mailing Address 7092 Killdeer Dr
City: Canfield | State: OH | Zip Code: 44406-9181
FEC ID number of contributing federal political committee: C
Name of Employer: Youngstown Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AD9E2AEC80A47460A9E7
Amount of Each Receipt this Period: 750.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474954

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 163 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Glenn J. Jarrett, MD
Mailing Address 2360 Mullan Rd Suite C
City: Missoula | State: MT | Zip Code: 59808-1811
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A0A4EE0BD9A764936944
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Jeffrey Einer Johnson, MD
Mailing Address 2207 Westerly Ct
City: Chesterfield | State: MO | Zip Code: 63017-7927
FEC ID number of contributing federal political committee. C
Name of Employer: Washington University
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A232A14182B3C4B0F8C6
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
John Curry Kagan, MD
Mailing Address 3210 Cleveland Ave Suite 100
City: Fort Myers | State: FL | Zip Code: 33901-7180
FEC ID number of contributing federal political committee. C
Name of Employer: Kagan Jugan & Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A2DA1093997F74A33B46
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1750.00**

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

Image# 10931474955

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Harpal Singh Khanuja, MD
Mailing Address 14023 Greencroft Ln
City: Cockeysville | State: MD | Zip Code: 21030-1127
FEC ID number of contributing federal political committee. C
Name of Employer: Sinai Hospital Of Baltimo-re
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AD1AC415943074DDE95F
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial)
Brian Kwon, MD
Mailing Address 91 Sidney St #805
City: Cambridge | State: MA | Zip Code: 02139-4279
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AF16F4632687842DEAA4
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Ronald S. Lederman, MD
Mailing Address 3227 Woodview Lake Rd
City: West Bloomfield | State: MI | Zip Code: 48323-3572
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AFA470275AEE34E37980
Amount of Each Receipt this Period: 375.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1875.00**

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

Image# 10931474956

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 165 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Lynn M. Lindaman, MD
Mailing Address 4208 Quail Ct
City: West Des Moines | State: IA | Zip Code: 50265-5369
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AFCF463A3541747C6A4D
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Anthony R. Marino, MD
Mailing Address 12 Misty Ln
City: Londonderry | State: NH | Zip Code: 03053-2675
FEC ID number of contributing federal political committee. C
Name of Employer: New Hampshire Orthopedic Cente
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 625.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AD8BC4F0AC3E646ABAD5
Amount of Each Receipt this Period: 375.00

C.
Full Name (Last, First, Middle Initial)
David J. Martin, MD
Mailing Address 7444 N. La Cholla Blvd
City: Tucson | State: AZ | Zip Code: 85741-2306
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AD4CF5351F15A48B78FB
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1125.00**

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

Image# 10931474957

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 166 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Richard G. McCollum, MD
Mailing Address 4155 Blvd Place
City: Mercer Island | State: WA | Zip Code: 98040-3403
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AEA733590A2A248FCAFF
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Leon P. Mead, MD
Mailing Address 730 Goodlette Rd North #201
City: Naples | State: FL | Zip Code: 34102-5618
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AA109940B6D244154A40
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Christopher M. Miller, MD
Mailing Address 5059 S. Greenbriar Ave
City: Springfield | State: MO | Zip Code: 65804-7758
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Specialist Inc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A045DA5D32FC74BD9887
Amount of Each Receipt this Period: 750.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474958

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 167 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Kai Mithoefer, MD
Mailing Address 6 Spruce Ave
City: Cambridge | State: MA | Zip Code: 02138-4522
FEC ID number of contributing federal political committee. C
Name of Employer: Harvard Vanguard Medical Associates
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 400.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A31B6B3F44F8446E783A
Amount of Each Receipt this Period: 400.00

B.
Full Name (Last, First, Middle Initial)
Daniel Beasley Murrey, MD
Mailing Address 1020 Isleworth Ave
City: Charlotte | State: NC | Zip Code: 28203-5218
FEC ID number of contributing federal political committee. C
Name of Employer: Ortho Carolina
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A619C31CE6CD44439B0B
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Adam J. Olscamp, MD
Mailing Address 750 N. Syringa Suite 101
City: Post Falls | State: ID | Zip Code: 83854-5275
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AE747BC892AA34E02994
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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

Image# 10931474959

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 168 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
John Anthony Osterkamp, MD
Mailing Address 1818 Verdugo Blvd Suite 402
City: Glendale | State: CA | Zip Code: 91208-1422
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A3D082484434047F1928
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Dr. Rick Papandrea
Mailing Address N28W30628 Red Fox Court
City: Pewaukee | State: WI | Zip Code: 53072-4292
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A703080663D614995A21
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Pasquale Petrera, MD
Mailing Address 1675 Woodbrooke Dr
City: Salisbury | State: MD | Zip Code: 21804-8502
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A0EC3A3C6378843208E0
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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

Image# 10931474960

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Russell Sean Petrie, MD
Mailing Address 1 Veneto
City: Newport Coast | State: CA | Zip Code: 92657-1230
FEC ID number of contributing federal political committee: C
Name of Employer: Newport Orthopaedic Institute
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A285827AC8CB2444BBBD
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Rola H. Rashid, MD
Mailing Address 42 Delancey Ct
City: Pittsford | State: NY | Zip Code: 14534-2762
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A50B890A4A9AE4BD8B6D
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Richard Mills Roberts, MD
Mailing Address 1505 Cottonwood Valley Cir North
City: Irving | State: TX | Zip Code: 75038-5931
FEC ID number of contributing federal political committee: C
Name of Employer: IOSM
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A9DCB7C70A17845EDB04
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

Image# 10931474961

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Ronald R. Romanelli, MD
Mailing Address 29 Orchard Ln
City: Springfield | State: IL | Zip Code: 62712-8911
FEC ID number of contributing federal political committee. C
Name of Employer: Orthopaedic Center Of Illinois
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AB08B8076200E4B40A78
Amount of Each Receipt this Period: 750.00

B.
Full Name (Last, First, Middle Initial)
Philip L. Schneider, MD
Mailing Address 10508 Bit & Spur Ln
City: Potomac | State: MD | Zip Code: 20854-1507
FEC ID number of contributing federal political committee. C
Name of Employer: Montgomery Orthopaedics
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AA307F5D3B1E8442F9C1
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Suken A. Shah, MD
Mailing Address 42 Stonewold Way
City: Wilmington | State: DE | Zip Code: 19807-2567
FEC ID number of contributing federal political committee. C
Name of Employer: Nemours Foundation
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A6104022482ED4AF587F
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1150.00**

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

Image# 10931474962

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 171 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Jeffrey R. Smith, MD
Mailing Address 2646 N. Foothill Dr
City: Provo | State: UT | Zip Code: 84604-4390
FEC ID number of contributing federal political committee. C
Name of Employer: Intermountain Healthcare
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AD3E7FFABE7C64E809B0
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial)
Mark A. Sprague, MD
Mailing Address 10 Old Tree Farm Rd
City: Stockbridge | State: MA | Zip Code: 01262
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: ABD94F8A336EC43FC880
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
Kevin M. Supple, MD
Mailing Address Greensboro Orthopaedics Center
3200 Northline Dr Ste 200
City: Greensboro | State: NC | Zip Code: 27408-7602
FEC ID number of contributing federal political committee. C
Name of Employer: Greensboro Orthopaedic Center,
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A70B0F632F98F43CDBF8
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **625.00**

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

Image# 10931474963

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 172 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
James P. Tasto, MD
Mailing Address 6719 Alvarado Rd Suite 200
City: San Diego | State: CA | Zip Code: 92120-5256
FEC ID number of contributing federal political committee. C
Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: ACAC5EB11713B4EFDA07
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial)
John W. Vanderhoof, MD
Mailing Address 9202 N. 115th St
City: Scottsdale | State: AZ | Zip Code: 85259-5819
FEC ID number of contributing federal political committee. C
Name of Employer: Public Health
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AEF951136D976408A8B7
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial)
William F. Wagner, Jr, MD
Mailing Address Seattle Hand Surgery
600 Broadway Ste 440
City: Seattle | State: WA | Zip Code: 98122-5377
FEC ID number of contributing federal political committee. C
Name of Employer: Seattle Hand Surgery Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: AC8A503428A8046BC953
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **900.00**

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

Image# 10931474964

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 173 / 229
(check only one)
X 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Edward M. Williams, MD
Mailing Address 4725 N. Federal Hwy
Orthopaedic Center
City: Fort Lauderdale | State: FL | Zip Code: 33308-4603
FEC ID number of contributing federal political committee: C
Name of Employer: Holy Cross Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A167EC27EDC7640F7BC0
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Lawrence Jon Yenni, MD
Mailing Address 8051 Icicle Place NW
City: Silverdale | State: WA | Zip Code: 98383-6308
FEC ID number of contributing federal political committee: C
Name of Employer: Ortho Specialists of North Carolina
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: A4F213D30A0B846CD912
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial)
Alan Schefer
Mailing Address 17 Lambert Ridge
City: Cross River | State: NY | Zip Code: 10518-1123
FEC ID number of contributing federal political committee: C
Name of Employer: Mount Kisco Medical Group
Occupation: Orthopaedic Hand Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00

Date of Receipt: 09 / 29 / 2010
Transaction ID: A60D4F63504524710BEC
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1000.00**

TOTAL This Period (last page this line number only) ..... ▶ **240760.00**

Image# 10931474965

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 174 / 229
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
American Association of Orthopaedic Surgeons
Mailing Address 317 Massachusetts Avenue, NE
1st Floor
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1934.99

Date of Receipt: 07 / 22 / 2010
Transaction ID: A03B4F11A725D4AD79FC
Amount of Each Receipt this Period: 1934.99
Refund of credit card fees from affiliated organizat-ion

B.
Full Name (Last, First, Middle Initial)
American Association of Orthopaedic Surgeons
Mailing Address 317 Massachusetts Avenue, NE
1st Floor
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2395.46

Date of Receipt: 08 / 17 / 2010
Transaction ID: AB7F3B9D5EB994273986
Amount of Each Receipt this Period: 460.47
Refund of bank fees from affiliated organization

C.
Full Name (Last, First, Middle Initial)
American Association of Orthopaedic Surgeons
Mailing Address 317 Massachusetts Avenue, NE
1st Floor
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2549.08

Date of Receipt: 09 / 16 / 2010
Transaction ID: AB4B706D5B0284D12982
Amount of Each Receipt this Period: 153.62
Refund of credit card fees from affiliated organizat-ion

SUBTOTAL of Receipts This Page (optional) ▶ **2549.08**

TOTAL This Period (last page this line number only) ▶ **2549.08**

Image# 10931474966

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 175 / 229
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Citizens For Arlen Specter
Mailing Address 236 Massachusetts Avenue Ne
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee. C C00280206
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00

Date of Receipt: 08 / 12 / 2010
Transaction ID: A091152CECD2B4B6081D
Amount of Each Receipt this Period: 5000.00
Refund of contribution - lost primary election

B.
Full Name (Last, First, Middle Initial)
Dan10
Mailing Address 1088 Bishop Street Suite 1009
City: Honolulu State: HI Zip Code: 96813
FEC ID number of contributing federal political committee. C C00410787
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2000.00

Date of Receipt: 09 / 14 / 2010
Transaction ID: AD74AA4B040FE4793ABF
Amount of Each Receipt this Period: 2000.00

C.
Full Name (Last, First, Middle Initial)
Wally Herger for Congress Committee
Mailing Address P.O. Box 1007
City: Willows State: CA Zip Code: 95988
FEC ID number of contributing federal political committee. C C00202523
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00

Date of Receipt: 09 / 23 / 2010
Transaction ID: A215020BC217C459EA41
Amount of Each Receipt this Period: 5000.00
Refund of 7/16/10 contribution

SUBTOTAL of Receipts This Page (optional) ▶ 12000.00

TOTAL This Period (last page this line number only) ▶ 12000.00

Image# 10931474967

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27
[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b		

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S. Lasalle St.

City: Chicago | State: IL | Zip Code: 60675

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: B736FC1F9724E4321B64

Date of Disbursement: 07 / 06 / 2010

Amount of Each Disbursement this Period: 1234.71

B.

Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S. Lasalle St.

City: Chicago | State: IL | Zip Code: 60675

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: BD5D1140510DF470BAA2

Date of Disbursement: 07 / 06 / 2010

Amount of Each Disbursement this Period: 700.28

C.

Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S. Lasalle St.

City: Chicago | State: IL | Zip Code: 60675

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: BA1310501C86E4D53948

Date of Disbursement: 07 / 28 / 2010

Amount of Each Disbursement this Period: 7.95

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1942.94**

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

Image# 10931474968

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27
[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b		

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S. Lasalle St.

City: Chicago | State: IL | Zip Code: 60675

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: B3C4433AFF89C4EF5A1E

Date of Disbursement: MM 08 / DD 06 / YYYY 2010

Amount of Each Disbursement this Period: 237.33

B.

Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S. Lasalle St.

City: Chicago | State: IL | Zip Code: 60675

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: BE27A429DEEAD4F24BE0

Date of Disbursement: MM 08 / DD 06 / YYYY 2010

Amount of Each Disbursement this Period: 215.19

C.

Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S. Lasalle St.

City: Chicago | State: IL | Zip Code: 60675

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: BAC9375DA99224E25BE8

Date of Disbursement: MM 09 / DD 08 / YYYY 2010

Amount of Each Disbursement this Period: 100.88

SUBTOTAL of Disbursements This Page (optional) ▶	**553.40**
TOTAL This Period (last page this line number only) ▶	

Image# 10931474969

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27
[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b		

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Northern Trust Company
Mailing Address 50 S. Lasalle St.
City: Chicago | State: IL | Zip Code: 60675
Purpose of Disbursement: Bank fees deducted from account
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: B87C38EFDA5D74B77826
Date of Disbursement: 09 / 08 / 2010
Amount of Each Disbursement this Period: 52.74

B.
Full Name (Last, First, Middle Initial)
Aristotle International, Inc
Mailing Address 205 Pennsylvania Ave SE
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Credit card processing fees
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: BE0C47AAB20BB496BA01
Date of Disbursement: 09 / 30 / 2010
Amount of Each Disbursement this Period: 62.00

C.
Full Name (Last, First, Middle Initial)
Aristotle International, Inc
Mailing Address 205 Pennsylvania Ave SE
City: Washington | State: DC | Zip Code: 20003
Purpose of Disbursement: Credit card processing fees
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: B810A103499434B76847
Date of Disbursement: 09 / 30 / 2010
Amount of Each Disbursement this Period: 86.00

SUBTOTAL of Disbursements This Page (optional) ▶ **200.74**

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

Image# 10931474970

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26	[ ] 27
[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b		

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
Aristotle International, Inc

Mailing Address 205 Pennsylvania Ave SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Credit card processing fees

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President — State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: BD583A6B40EF643C3A39

Date of Disbursement: 09 / 30 / 2010

Amount of Each Disbursement this Period: 2.40

B.

Full Name (Last, First, Middle Initial)
Aristotle International, Inc

Mailing Address 205 Pennsylvania Ave SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Credit card processing fees

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President — State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: B0D592261514F4591899

Date of Disbursement: 09 / 30 / 2010

Amount of Each Disbursement this Period: 204.00

C.

Full Name (Last, First, Middle Initial)
Aristotle International, Inc

Mailing Address 205 Pennsylvania Ave SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Credit card processing fees

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President — State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Transaction ID: B11488FE514174603B34

Date of Disbursement: 09 / 30 / 2010

Amount of Each Disbursement this Period: 192.00

SUBTOTAL of Disbursements This Page (optional) ▶	**398.40**
TOTAL This Period (last page this line number only) ▶	**3095.48**

Image# 10931474971

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
BOB FILNER FOR CONGRESS
Mailing Address PO Box 121480
City Chula Vista State CA Zip Code 91912
Purpose of Disbursement
Candidate Name Rep. BOB FILNER
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 51
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B0E05AD0EF8CE4780BE0
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 2000.00

B.
Full Name (Last, First, Middle Initial)
BRETTPAC
Mailing Address 608 Montgomery Ave
City Elizabethtown State KY Zip Code 42701
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 — Primary / General / X Other (specify) 0

Transaction ID: B3F5BD45F70694B1FB3C
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
David Scott for Congress
Mailing Address P.O. Box 960821
City Riverdale State GA Zip Code 30296
Purpose of Disbursement
Candidate Name Rep. David A. Scott
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 13
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B47203CF265AB4C0FAA8
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 4000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11000.00**

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

Image# 10931474972

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends Of Rosa Delauro
Mailing Address 12 Trumbull Street
City New Haven State CT Zip Code 06511
Purpose of Disbursement
Candidate Name Rep. Rosa L. DeLauro
Category/ Type
Office Sought: X House Senate President
State: CT District: 03
Disbursement For: 2010 Primary X General Other (specify)
Transaction ID: B12DD09EF4F1C442A87A
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
Kurt Schrader For Congress
Mailing Address Po Box 3314 Suite 240
City Oregon City State OR Zip Code 97045
Purpose of Disbursement
Candidate Name Rep. Kurt Schrader
Category/ Type
Office Sought: X House Senate President
State: OR District: 05
Disbursement For: 2010 Primary X General Other (specify)
Transaction ID: B1FC3A19E54704F678D1
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
New Democrat Coalition PAC (NDC PAC)
Mailing Address 607 14th Street, NW Suite 800
City Washington State DC Zip Code 20005
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House Senate President
State: District:
Disbursement For: 2010 Primary General X Other (specify) 0
Transaction ID: B10E15E12AEE84F429CF
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **8500.00**

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

Image# 10931474973

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
RODNEY ALEXANDER FOR CONGRESS INC.
Mailing Address 319 Nancy's Road
City Quitman State LA Zip Code 71268
Purpose of Disbursement
Candidate Name Rep. RODNEY M. MR. ALEXANDER
Category/ Type
Office Sought: X House / Senate / President
State: LA District: 05
Disbursement For: 2010 X Primary / General / Other (specify)

Transaction ID: B15EA6DD8174E4C6E860
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Sheriff PAC
Mailing Address 1115 MASSACHUSETTS AVE NW Lower Level
City Washington State DC Zip Code 20005
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 Primary / General / X Other (specify) 0

Transaction ID: B6017ABCDE90946AB814
Date of Disbursement 07 / 11 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
JOBS, ECONOMY AND BUDGET FUND (JEB FUND)
Mailing Address 7315 Wisconsin Avenue Suite 310 East
City Bethesda State MD Zip Code 20814
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 Primary / General / X Other (specify) 0

Transaction ID: B7139C769BE134CA399D
Date of Disbursement 07 / 14 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931474974

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Bill Cassidy For Congress
Mailing Address 8550 United Plaza Blvd.
Suite 1001
City: Baton Rouge | State: LA | Zip Code: 70809
Purpose of Disbursement:
Candidate Name: Rep. William Cassidy
Category/ Type:
Office Sought: X House | Senate | President
State: LA District: 06
Disbursement For: 2010 — Primary | X General | Other (specify)

Transaction ID: B2BB186FD9C5349F5901
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Bill Cassidy For Congress
Mailing Address 8550 United Plaza Blvd.
Suite 1001
City: Baton Rouge | State: LA | Zip Code: 70809
Purpose of Disbursement:
Candidate Name: Rep. William Cassidy
Category/ Type:
Office Sought: X House | Senate | President
State: LA District: 06
Disbursement For: 2010 — X Primary | General | Other (specify)

Transaction ID: B41C29005D67646A3B2C
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 3500.00

C.
Full Name (Last, First, Middle Initial)
Brady For Congress
Mailing Address P.o. Box 8277
City: The Woodlands | State: TX | Zip Code: 77387
Purpose of Disbursement:
Candidate Name: Rep. Kevin Brady
Category/ Type:
Office Sought: X House | Senate | President
State: TX District: 08
Disbursement For: 2010 — Primary | X General | Other (specify)

Transaction ID: BD25AEF8683FB4C50BB7
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **13500.00**

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

Image# 10931474975

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Cathy McMorris Rodgers For Congress
Mailing Address Box 137
City: Spokane | State: WA | Zip Code: 99210
Purpose of Disbursement
Candidate Name: Rep. Cathy McMorris Rodgers
Category/ Type
Office Sought: X House | Senate | President
State: WA District: 05
Disbursement For: 2010 — Primary | X General | Other (specify)

Transaction ID: B1C474A9539EB4EC1A7E
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Cathy McMorris Rodgers For Congress
Mailing Address Box 137
City: Spokane | State: WA | Zip Code: 99210
Purpose of Disbursement
Candidate Name: Rep. Cathy McMorris Rodgers
Category/ Type
Office Sought: X House | Senate | President
State: WA District: 05
Disbursement For: 2010 — X Primary | General | Other (specify)

Transaction ID: BD74D6A9E25C84BC6AB2
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial)
Congressman Joe Barton Committee, The
Mailing Address P.O. Box 1444
City: Ennis | State: TX | Zip Code: 75120
Purpose of Disbursement
Candidate Name: Rep. Joe L. Barton
Category/ Type
Office Sought: X House | Senate | President
State: TX District: 06
Disbursement For: 2010 — Primary | X General | Other (specify)

Transaction ID: BE1A8F645F43F406D838
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **11000.00**

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

Image# 10931474976

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Culberson for Congress
Mailing Address P.O. Box 41964
City Houston State TX Zip Code 77241
Purpose of Disbursement
Candidate Name
Rep. John Abney Culberson
Category/ Type
Office Sought: X House Senate President
State: TX District: 07
Disbursement For: 2010 Primary X General Other (specify)
Transaction ID: BC923EEA15EE2414BA08
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 4000.00

B.
Full Name (Last, First, Middle Initial)
Devin Nunes Campaign Committee
Mailing Address Po Box 6545
City Visalia State CA Zip Code 93290
Purpose of Disbursement
Candidate Name
Rep. Devin Nunes
Category/ Type
Office Sought: X House Senate President
State: CA District: 21
Disbursement For: 2010 Primary X General Other (specify)
Transaction ID: B6FD579CF6ED34711A00
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Friends Of Jack Kingston
Mailing Address Po Box 2133
City Savannah State GA Zip Code 31402
Purpose of Disbursement
Candidate Name
Rep. Jack Kingston
Category/ Type
Office Sought: X House Senate President
State: GA District: 01
Disbursement For: 2010 Primary X General Other (specify)
Transaction ID: BC5E3904716EA41FA8C6
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **14000.00**

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

Image# 10931474977

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends Of Jack Kingston
Mailing Address Po Box 2133
City Savannah State GA Zip Code 31402
Purpose of Disbursement
Candidate Name Rep. Jack Kingston
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 01
Disbursement For: 2010 X Primary / General / Other (specify)
Transaction ID: B6FF8C7D5D8814070BFC
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Hal Rogers For Congress
Mailing Address P.O. Box 1214 East Mt Vernon St
City Somerset State KY Zip Code 42502
Purpose of Disbursement
Candidate Name Rep. Hal Rogers
Category/ Type
Office Sought: X House / Senate / President
State: KY District: 05
Disbursement For: 2010 Primary / X General / Other (specify)
Transaction ID: BBB4A7D41175D45F3A6E
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Jo Bonner For Congress Committee
Mailing Address P.O. Box 851232
City Mobile State AL Zip Code 36685
Purpose of Disbursement
Candidate Name Rep. Jo Bonner
Category/ Type
Office Sought: X House / Senate / President
State: AL District: 01
Disbursement For: 2010 Primary / X General / Other (specify)
Transaction ID: B7C34070F016F4A35B10
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931474978

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Kay Granger Campaign Fund
Mailing Address 715 Jones Street, Suite 101
City Fort Worth State TX Zip Code 76102
Purpose of Disbursement
Candidate Name Rep. Kay Granger
Category/ Type
Office Sought: X House Senate President
State: TX District: 12
Disbursement For: 2010 Primary X General Other (specify)

Transaction ID: BBB7FAA34B225401F8C7
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Kline For Congress
Mailing Address 101 W Burnsville Pkwy Suite 104
City Burnsville State MN Zip Code 55337
Purpose of Disbursement
Candidate Name Rep. John Kline
Category/ Type
Office Sought: X House Senate President
State: MN District: 02
Disbursement For: 2010 X Primary General Other (specify)

Transaction ID: B6D683C5D1D404BA9BA1
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Kline For Congress
Mailing Address 101 W Burnsville Pkwy Suite 104
City Burnsville State MN Zip Code 55337
Purpose of Disbursement
Candidate Name Rep. John Kline
Category/ Type
Office Sought: X House Senate President
State: MN District: 02
Disbursement For: 2010 Primary X General Other (specify)

Transaction ID: BDE1848EFBA5F491C8B1
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931474979

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Latourette For Congress Committee
Mailing Address 320 Kenarden Dr.
City Highland Hts. State OH Zip Code 44143
Purpose of Disbursement
Candidate Name Rep. Steven C. LaTourette
Category/ Type
Office Sought: X House / Senate / President
State: OH District: 14
Disbursement For: 2010 Primary X General / Other (specify)

Transaction ID: B77455024BEE5424B89A
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Linder For Congress
Mailing Address P. O. Box 4026
City Duluth State GA Zip Code 30096
Purpose of Disbursement
Candidate Name Rep. John Linder
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 07
Disbursement For: 2010 Primary X General / Other (specify)

Transaction ID: BD2B4302278544B33AB3
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Linder For Congress
Mailing Address P. O. Box 4026
City Duluth State GA Zip Code 30096
Purpose of Disbursement
Candidate Name Rep. John Linder
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 07
Disbursement For: 2010 X Primary General / Other (specify)

Transaction ID: B5013E7F889E44815A1D
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931474980

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Mary Bono Mack Committee
Mailing Address P.O. Box 3370
City Palm Springs State CA Zip Code 92263
Purpose of Disbursement
Candidate Name Rep. Mary Bono-Mack
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 45
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: BC3443D8E2B39473EB0E
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 3000.00

B.
Full Name (Last, First, Middle Initial)
Scalise For Congress
Mailing Address PO Box 23219 Suite 301
City Jefferson State LA Zip Code 70183
Purpose of Disbursement
Candidate Name Rep. Steve J. Scalise
Category/ Type
Office Sought: X House / Senate / President
State: LA District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B3F027A11F2A5420E9B2
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Scalise For Congress
Mailing Address PO Box 23219 Suite 301
City Jefferson State LA Zip Code 70183
Purpose of Disbursement
Candidate Name Rep. Steve J. Scalise
Category/ Type
Office Sought: X House / Senate / President
State: LA District: 01
Disbursement For: 2010 — X Primary / General / Other (specify)

Transaction ID: BF59D6E9B58F1492DA93
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **13000.00**

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

Image# 10931474981

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Tiberi For Congress
Mailing Address 2931 E Dublin Granville Road
Suite 190
City: Columbus State: OH Zip Code: 43231
Purpose of Disbursement:
Candidate Name: Rep. Patrick J. Tiberi
Category/ Type:
Office Sought: X House / Senate / President
State: OH District: 12
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B12DC4EDD2EDB4AA2820
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Upton For All Of Us
Mailing Address P.o. Box 490
City: St. Joseph State: MI Zip Code: 49085
Purpose of Disbursement:
Candidate Name: Rep. Fred Upton
Category/ Type:
Office Sought: X House / Senate / President
State: MI District: 06
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B862A61DBE1DF419D94F
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial)
Walden For Congress
Mailing Address PO Box 1091
City: Hood River State: OR Zip Code: 97031
Purpose of Disbursement:
Candidate Name: Rep. Greg Walden
Category/ Type:
Office Sought: X House / Senate / President
State: OR District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B7FC25E601A104F3D99C
Date of Disbursement: 07 / 15 / 2010
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11000.00**

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

Image# 10931474982

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Wally Herger for Congress Committee
Mailing Address P.O. Box 1007
City Willows State CA Zip Code 95988
Purpose of Disbursement
Candidate Name Rep. Wally Herger
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B9FEFB659E2CD4806B2E
Date of Disbursement 07 / 15 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Charles Boustany Jr. Md For Congress, In
Mailing Address Po Box 80126
City Lafayette State LA Zip Code 70598
Purpose of Disbursement
Candidate Name Rep. Charles W. Boustany, Jr.
Category/ Type
Office Sought: X House / Senate / President
State: LA District: 07
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B1ED54D514A284675B1F
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
Dutch Ruppersberger for Congress
Mailing Address 22 West Padonia Road Suite C-141
City Timonium State MD Zip Code 21093
Purpose of Disbursement
Candidate Name Rep. Dutch Ruppersberger
Category/ Type
Office Sought: X House / Senate / President
State: MD District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B556B59B33BA945A7874
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9500.00**

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

Image# 10931474983

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends Of Cliff Stearns
Mailing Address PO Box 308
City Silver Springs | State FL | Zip Code 34489
Purpose of Disbursement
Candidate Name
Rep. Cliff B. Stearns
Category/ Type
Office Sought: X House | Senate | President
State: FL District: 06
Disbursement For: 2010 X Primary | General | Other (specify)

Transaction ID: B0DCBAB65CC914C18A5B
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
Friends Of Dan Maffei
Mailing Address PO Box 74
City Syracuse | State NY | Zip Code 13214
Purpose of Disbursement
Candidate Name
Rep. Dan B. Maffei
Category/ Type
Office Sought: X House | Senate | President
State: NY District: 25
Disbursement For: 2010 X Primary | General | Other (specify)

Transaction ID: BCC8DFA816DCA4261B51
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
Friends of Jeb Hensarling
Mailing Address P.O. Box 820504
City Dallas | State TX | Zip Code 75382
Purpose of Disbursement
VOID - Hensarling's Leadership Pac
Candidate Name
Rep. Jeb Hensarling
Category/ Type
Office Sought: X House | Senate | President
State: TX District: 05
Disbursement For: 2010 Primary | General | X Other (specify)
0

Transaction ID: BCCB105A44F4D4855BC4
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period -5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **-3000.00**

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

Image# 10931474984

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends of Joe Pitts
Mailing Address P.O. Box 775
City Unionville State PA Zip Code 19375
Purpose of Disbursement
Candidate Name Rep. Joseph R. Pitts
Category/ Type
Office Sought: X House / Senate / President
State: PA District: 16
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B9AB9A15F847C49DF9DE
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
People For Patty Murray
Mailing Address PO Box 3662
City Seattle State WA Zip Code 98124
Purpose of Disbursement
Candidate Name Sen. Patty Murray
Category/ Type
Office Sought: House / X Senate / President
State: WA District:
Disbursement For: 2010 — X Primary / General / Other (specify)

Transaction ID: B8DDF9E09748149738DE
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
Sanford D. Bishop, Jr. For Congress
Mailing Address P. O. Box 909
City Columbus State GA Zip Code 31902
Purpose of Disbursement
Candidate Name Rep. Sanford D. Bishop, Jr.
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 02
Disbursement For: 2010 — X Primary / General / Other (specify)

Transaction ID: B889ABA9E267F471C964
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **6000.00**

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

Image# 10931474985

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Wally Herger for Congress Committee
Mailing Address P.O. Box 1007
City Willows State CA Zip Code 95988
Purpose of Disbursement
Candidate Name Rep. Wally Herger
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 02
Disbursement For: 2010 — Primary / General / X Other (specify) ▼ 0

Transaction ID: B952DBB77CF8D44D590E
Date of Disbursement 07 / 16 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Friends of John Barrow
Mailing Address PO Box 8166
City Savannah State GA Zip Code 31412
Purpose of Disbursement
Candidate Name Rep. John Barrow
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 12
Disbursement For: 2010 — X Primary / General / Other (specify) ▼

Transaction ID: BE5AB9AFFD02C45B2A1A
Date of Disbursement 07 / 20 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
John Lewis For Congress
Mailing Address PO Box 2323 Suite 5300
City Atlanta State GA Zip Code 30301
Purpose of Disbursement
Candidate Name Rep. John Lewis
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 05
Disbursement For: 2010 — X Primary / General / Other (specify) ▼

Transaction ID: B39816086C7634ADD91A
Date of Disbursement 07 / 20 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **12500.00**

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

Image# 10931474986

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Anna Eshoo For Congress
Mailing Address 555 Capitol Mall, Suite 1425
City: Sacramento | State: CA | Zip Code: 95814
Purpose of Disbursement
Candidate Name: Rep. Anna Eshoo
Category/ Type
Office Sought: X House | Senate | President
State: CA District: 14
Disbursement For: 2010 Primary | X General | Other (specify)
Transaction ID: B1E83B26E41394D12A6A
Date of Disbursement: 07 / 26 / 2010
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
Friends Of Jim Clyburn
Mailing Address PO Box 12567
City: Columbia | State: SC | Zip Code: 29211
Purpose of Disbursement
Candidate Name: Rep. James E. Clyburn
Category/ Type
Office Sought: X House | Senate | President
State: SC District: 06
Disbursement For: 2010 Primary | X General | Other (specify)
Transaction ID: B135DB9AA00194A6BBCB
Date of Disbursement: 07 / 26 / 2010
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
John Sullivan For Congress Inc
Mailing Address Post Office Box 470840
City: Tulsa | State: OK | Zip Code: 74147
Purpose of Disbursement
Candidate Name: Rep. John Sullivan
Category/ Type
Office Sought: X House | Senate | President
State: OK District: 01
Disbursement For: 2010 X Primary | General | Other (specify)
Transaction ID: BAE292195FED341F193D
Date of Disbursement: 07 / 26 / 2010
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7500.00**

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

Image# 10931474987

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Kagen 4 Congress
Mailing Address 100 W. College Ave.
50 D
City Appleton State WI Zip Code 54911
Purpose of Disbursement
Candidate Name Rep. Steven L. Kagen
Category/ Type
Office Sought: X House / Senate / President
State: WI District: 08
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B4447D4F77A104157A89
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Mike Honda For Congress
Mailing Address P.O. Box 8180
City San Jose State CA Zip Code 95155
Purpose of Disbursement
Candidate Name Rep. Mike Honda
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 15
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: BAC020DFDB7F14BFEB29
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
Mike Ross For Congress Committee
Mailing Address PO Box 360
City Prescott State AR Zip Code 71857
Purpose of Disbursement
Candidate Name Rep. Mike Ross
Category/ Type
Office Sought: X House / Senate / President
State: AR District: 04
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B391DF5F4F7E941F38C3
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **8500.00**

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

Image# 10931474988

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Patrick Murphy for Congress
Mailing Address P.O. Box 868
City Levittown | State PA | Zip Code 19058
Purpose of Disbursement
Candidate Name Rep. Patrick J. Murphy
Category/ Type
Office Sought: X House | Senate | President
State: PA District: 08
Disbursement For: 2010 | Primary | X General | Other (specify)

Transaction ID: BC0E119AF91B343DAB48
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 2500.00

B.
Full Name (Last, First, Middle Initial)
REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROS-KAM PAC)
Mailing Address P. O. Box 1011
City Wheaton | State IL | Zip Code 60187
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House | Senate | President
State: District:
Disbursement For: 2010 | Primary | General | X Other (specify) 0

Transaction ID: B2F30CD7F8BDC447FBD2
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Sue Myrick for Congress
Mailing Address P.O. Box 37091
City Charlotte | State NC | Zip Code 28237
Purpose of Disbursement
Candidate Name Rep. Sue Myrick
Category/ Type
Office Sought: X House | Senate | President
State: NC District: 09
Disbursement For: 2010 | Primary | X General | Other (specify)

Transaction ID: B193EC959DAFE4D12BDF
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **10000.00**

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

Image# 10931474989

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Welch For Congress
Mailing Address Po Box 1682
City Burlington State VT Zip Code 05402
Purpose of Disbursement
Candidate Name Rep. Peter Welch
Category/ Type
Office Sought: X House / Senate / President
State: VT District: 01
Disbursement For: 2010 X Primary / General / Other (specify)

Transaction ID: B18CCC635240D40AF836
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
WOOLSEY FOR CONGRESS
Mailing Address P.O. Box 750176
City Petaluma State CA Zip Code 94975
Purpose of Disbursement
Candidate Name Rep. LYNN C. WOOLSEY
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 06
Disbursement For: 2010 Primary / X General / Other (specify)

Transaction ID: BACABF63F8F84412BA6F
Date of Disbursement 07 / 26 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Adler For Congress
Mailing Address 14 Knightswood Drive
City Marlton State NJ Zip Code 08053
Purpose of Disbursement
Candidate Name Rep. John Adler
Category/ Type
Office Sought: X House / Senate / President
State: NJ District: 03
Disbursement For: 2010 Primary / X General / Other (specify)

Transaction ID: B144DDD2274E64D17AC3
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **8000.00**

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

Image# 10931474990

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Chet Edwards for Congress
Mailing Address P.O. Box 23273
City Waco State TX Zip Code 76702
Purpose of Disbursement
Candidate Name Rep. Chet Edwards
Category/ Type
Office Sought: X House / Senate / President
State: TX District: 17
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: BAC663EA320894DC1A43
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 2000.00

B.
Full Name (Last, First, Middle Initial)
Citizens For Altmire
Mailing Address P.O. Box 1776
City Freedom State PA Zip Code 15042
Purpose of Disbursement
Candidate Name Rep. Jason Altmire
Category/ Type
Office Sought: X House / Senate / President
State: PA District: 04
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: BA65AC23CE6F24241A09
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
Diane Black for Congress
Mailing Address 819 Plantation Blvd
City Gallatin State TN Zip Code 37066
Purpose of Disbursement
Candidate Name Diane Black
Category/ Type
Office Sought: X House / Senate / President
State: TN District: 06
Disbursement For: 2010 X Primary General / Other (specify)
Transaction ID: B3878B91C9A1C439CB71
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9500.00**

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

Image# 10931474991

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Fleming for Congress
Mailing Address P.O. Box 1236
City Minden State LA Zip Code 71058
Purpose of Disbursement
Candidate Name Rep. John Fleming
Category/ Type
Office Sought: X House / Senate / President
State: LA District: 04
Disbursement For: 2010
X Primary / General / Other (specify)

Transaction ID: BC6402D4A210E4AB7941
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 2500.00

B.
Full Name (Last, First, Middle Initial)
Lewis For Congress Committee
Mailing Address PO Box 247
City Redlands State CA Zip Code 92373
Purpose of Disbursement
Candidate Name Rep. Jerry Lewis
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 41
Disbursement For: 2010
Primary / X General / Other (specify)

Transaction ID: BF5F1B6C2C82C4105A8F
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
Lucille Roybal-Allard for Congress
Mailing Address 6 E Street, SE
City Washington State DC Zip Code 20003
Purpose of Disbursement
Candidate Name Rep. Lucille Roybal-Allard
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 34
Disbursement For: 2010
Primary / X General / Other (specify)

Transaction ID: B1419242C771B48A7957
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **6000.00**

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

Image# 10931474992

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Moran For Kansas
Mailing Address P.O. Box 1151
City Hays | State KS | Zip Code 67601
Purpose of Disbursement
Candidate Name
Rep. Jerry Moran
Category/ Type
Office Sought: X House / Senate / President
State: KS District: 01
Disbursement For: 2010 — X Primary / General / Other (specify)

Transaction ID: B660729FFE27B4EF88F0
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Simpson For Congress
Mailing Address 1487 Parkway Drive
City Blackfoot | State ID | Zip Code 83221
Purpose of Disbursement
Candidate Name
Rep. Mike K. Simpson
Category/ Type
Office Sought: X House / Senate / President
State: ID District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: BAEE9BFFDB4F445ACA1F
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
Steve Israel For Congress Committee
Mailing Address PO Box 777
City Deer Park | State NY | Zip Code 11729
Purpose of Disbursement
Candidate Name
Rep. Steve J. Israel
Category/ Type
Office Sought: X House / Senate / President
State: NY District: 02
Disbursement For: 2010 — X Primary / Other (specify)

Transaction ID: B41F5D12BF41E4A4B8BD
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **8500.00**

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

Image# 10931474993

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Tim Bishop for Congress
Mailing Address P.O. Box 437
City Farmingville State NY Zip Code 11738
Purpose of Disbursement
Candidate Name Rep. Timothy H. Bishop
Category/ Type
Office Sought: X House / Senate / President
State: NY District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B4814D7720D2445B69E0
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
Visclosky for Congress
Mailing Address P.O. Box 10003
City Merrillville State IN Zip Code 46411
Purpose of Disbursement
Candidate Name Rep. Pete Visclosky
Category/ Type
Office Sought: X House / Senate / President
State: IN District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B509504CA9AE44713A9D
Date of Disbursement 08 / 02 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
Glacier PAC
Mailing Address 818 Connecticut Ave, NW Suite 1100
City Washington State DC Zip Code 20006
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 — Primary / General / X Other (specify) 0
Transaction ID: B2D720203778C43F885C
Date of Disbursement 08 / 09 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7000.00**

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

Image# 10931474994

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Lummis for Congress
Mailing Address 2015 Central Ave. Suite 200
City Cheyenne State WY Zip Code 82001
Purpose of Disbursement
Candidate Name Rep. Cynthia Lummis
Category/ Type
Office Sought: X House / Senate / President
State: WY District: 01
Disbursement For: 2010 X Primary / General / Other (specify)
Transaction ID: B7AC4D3C763C84716853
Date of Disbursement 08 / 09 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Mikulski for Senate Committee
Mailing Address P.O. Box 13147
City Baltimore State MD Zip Code 21203
Purpose of Disbursement
Candidate Name Sen. Barbara A. Mikulski
Category/ Type
Office Sought: House / X Senate / President
State: MD District:
Disbursement For: 2010 X Primary / General / Other (specify)
Transaction ID: B27B16B05EA724A4290E
Date of Disbursement 08 / 09 / 2010
Amount of Each Disbursement this Period 2000.00

C.
Full Name (Last, First, Middle Initial)
Poe for Congress
Mailing Address P.O. Box 14222
City Humble State TX Zip Code 77347
Purpose of Disbursement
Candidate Name Rep. Ted Poe
Category/ Type
Office Sought: X House / Senate / President
State: TX District: 02
Disbursement For: 2010 Primary / X General / Other (specify)
Transaction ID: B09490075A0FD4EC2BF0
Date of Disbursement 08 / 09 / 2010
Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8000.00**

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

Image# 10931474995

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Tim Walz for U.S. Congress
Mailing Address P.O. Box 938
City Mankato State MN Zip Code 56002
Purpose of Disbursement
Candidate Name
Rep. Timothy J. Walz
Category/ Type
Office Sought: X House / Senate / President
State: MN District: 01
Disbursement For: 2010 X Primary / General / Other (specify)

Transaction ID: B3B755437A7294D3186B
Date of Disbursement 08 / 10 / 2010
Amount of Each Disbursement this Period 2500.00

B.
Full Name (Last, First, Middle Initial)
Linder For Congress
Mailing Address P. O. Box 4026
City Duluth State GA Zip Code 30096
Purpose of Disbursement
VOID - 7/15/10 Disbursement
Candidate Name
Rep. John Linder
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 07
Disbursement For: 2010 X Primary / General / Other (specify)

Transaction ID: BC0BD83F671BF4FD69D8
Date of Disbursement 08 / 13 / 2010
Amount of Each Disbursement this Period -5000.00

C.
Full Name (Last, First, Middle Initial)
Linder For Congress
Mailing Address P. O. Box 4026
City Duluth State GA Zip Code 30096
Purpose of Disbursement
VOID - 7/15/10 Disbursement
Candidate Name
Rep. John Linder
Category/ Type
Office Sought: X House / Senate / President
State: GA District: 07
Disbursement For: 2010 Primary / X General / Other (specify)

Transaction ID: B6CC26025E694448B96C
Date of Disbursement 08 / 13 / 2010
Amount of Each Disbursement this Period -5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **-7500.00**

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

Image# 10931474996

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Barbara Lee for Congress
Mailing Address 1736 Franklin Street #550
City: Oakland | State: CA | Zip Code: 94612
Purpose of Disbursement:
Candidate Name: Rep. BARBARA LEE
Category/ Type:
Office Sought: X House | Senate | President
State: CA District: 09
Disbursement For: 2010 | Primary | X General | Other (specify)
Transaction ID: B893966C4F3A54454BC4
Date of Disbursement: 08 / 20 / 2010
Amount of Each Disbursement this Period: 3000.00

B.
Full Name (Last, First, Middle Initial)
Ed Royce for Congress
Mailing Address P.O. Box 2525
City: Orange | State: CA | Zip Code: 92859
Purpose of Disbursement:
Candidate Name: Rep. Ed Royce
Category/ Type:
Office Sought: X House | Senate | President
State: CA District: 40
Disbursement For: 2010 | Primary | X General | Other (specify)
Transaction ID: BA82846D700E44FE1BA6
Date of Disbursement: 08 / 20 / 2010
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Gene Taylor for Congress Committee
Mailing Address P.O. Box 3838
City: Bay St. Louis | State: MS | Zip Code: 39520
Purpose of Disbursement:
Candidate Name: Rep. Gene Taylor
Category/ Type:
Office Sought: X House | Senate | President
State: MS District: 04
Disbursement For: 2010 | Primary | X General | Other (specify)
Transaction ID: B2BA8A144B4754971A57
Date of Disbursement: 08 / 20 / 2010
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9000.00**

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

Image# 10931474997

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Legacy Victory Fund
Mailing Address 5310 Harvest Hill Road
Suite 209
City Dallas State TX Zip Code 75230
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 Primary / General / X Other (specify) ▼ 0
Transaction ID: B07333D6FC7CA4CB9ACC
Date of Disbursement 08 / 20 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Maloney For Congress
Mailing Address 49 East 92nd Street
City New York State NY Zip Code 10128
Purpose of Disbursement
Candidate Name Rep. Carolyn B. Maloney
Category/ Type
Office Sought: X House / Senate / President
State: NY District: 14
Disbursement For: 2010 X Primary / General / Other (specify) ▼
Transaction ID: B725D949099B440E9B39
Date of Disbursement 08 / 20 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
Chet Edwards for Congress
Mailing Address P.O. Box 23273
City Waco State TX Zip Code 76702
Purpose of Disbursement
Candidate Name Rep. Chet Edwards
Category/ Type
Office Sought: X House / Senate / President
State: TX District: 17
Disbursement For: 2010 Primary / X General / Other (specify) ▼
Transaction ID: B7AF38AE0224146A9A4E
Date of Disbursement 09 / 01 / 2010
Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **8000.00**

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

Image# 10931474998

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Heller for Congress
Mailing Address P.O. Box 750580
City Las Vegas State NV Zip Code 89136
Purpose of Disbursement
Candidate Name Rep. Dean Heller
Category/ Type
Office Sought: X House / Senate / President
State: NV District: 02
Disbursement For: 2006
Primary / General / X Other (specify) ▼ Debt2006
Transaction ID: BFD22EDBA45EF47048FC
Date of Disbursement 09 / 01 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Lungren For Congress
Mailing Address 9321 Silverbend Lane
City Elk Grove State CA Zip Code 95624
Purpose of Disbursement
Candidate Name Rep. Dan Lungren
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 03
Disbursement For: 2010
Primary / X General / Other (specify) ▼
Transaction ID: BC817798B6B944046986
Date of Disbursement 09 / 01 / 2010
Amount of Each Disbursement this Period 2000.00

C.
Full Name (Last, First, Middle Initial)
McKinley for Congress
Mailing Address P.O. Box 6861
City Wheeling State WV Zip Code 26003
Purpose of Disbursement
Candidate Name David B McKinley
Category/ Type
Office Sought: X House / Senate / President
State: WV District: 01
Disbursement For: 2010
Primary / X General / Other (specify) ▼
Transaction ID: B9739A52A5C8E4815A50
Date of Disbursement 09 / 01 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **12000.00**

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

Image# 10931474999

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Paul Broun Committee
Mailing Address P.O. Box 1512
City Athens State GA Zip Code 30601
Purpose of Disbursement
Candidate Name
Rep. Paul C. Broun, Jr.
Category/ Type
Office Sought: X House Senate President
State: GA District: 10
Disbursement For: 2010 Primary X General Other (specify)

Transaction ID: BA2D5BEB47D8F4F5D905
Date of Disbursement 09 / 01 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Castle Campaign Fund
Mailing Address PO Box 133
City Wilmington State DE Zip Code 19899
Purpose of Disbursement
2010 Primary Election Contribution
Candidate Name
Rep. Mike Castle
Category/ Type
Office Sought: X House Senate President
State: DE District: 01
Disbursement For: 2010 X Primary General Other (specify)

Transaction ID: BB17C89CDDE834B80858
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Diane Black for Congress
Mailing Address 819 Plantation Blvd
City Gallatin State TN Zip Code 37066
Purpose of Disbursement
2010 General Election Contribution
Candidate Name
Diane Black
Category/ Type
Office Sought: X House Senate President
State: TN District: 06
Disbursement For: 2010 Primary X General Other (specify)

Transaction ID: B86C326DB77804AFB99C
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931475000

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends of Erik Paulsen
Mailing Address P.O. Box 44369
City Eden Prairie State MN Zip Code 55344
Purpose of Disbursement: 2010 General Election Contribution
Candidate Name: Rep. Erik Paulsen
Category/ Type:
Office Sought: X House / Senate / President
State: MN District: 03
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B4422F692098A4E16BA1
Date of Disbursement: 09 / 14 / 2010
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
KEEP NICK RAHALL IN CONGRESS COMMITTEE
Mailing Address P O Box 64
City Beckley State WV Zip Code 25802
Purpose of Disbursement: 2010 General Election Contribution
Candidate Name: Rep. Nick J. Rahall, II
Category/ Type:
Office Sought: X House / Senate / President
State: WV District: 03
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B7E82E2A5648D4C36871
Date of Disbursement: 09 / 14 / 2010
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial)
Kirk For Senate
Mailing Address P.O. Box 8
City Winnetka State IL Zip Code 60093
Purpose of Disbursement: 2010 Special General Election Contribution
Candidate Name: Mark Steven Kirk
Category/ Type:
Office Sought: House / X Senate / President
State: IL District:
Disbursement For: 2010 — Primary / General / X Other (specify)
Special General2010

Transaction ID: B01B314602E564DD4930
Date of Disbursement: 09 / 14 / 2010
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931475001

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Lance For Congress
Mailing Address PO Box 225
City Colonia State NJ Zip Code 07067
Purpose of Disbursement
2010 General Election Contribution
Candidate Name
Rep. Leonard Lance
Category/ Type
Office Sought: X House / Senate / President
State: NJ District: 07
Disbursement For: 2010
Primary X General
Other (specify)

Transaction ID: B52F2E65CF00D4C9EA89
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
Mike Pence Committee
Mailing Address P. O. Box 408
City Anderson State IN Zip Code 46015
Purpose of Disbursement
2010 General Election Contribution
Candidate Name
Rep. Mike Pence
Category/ Type
Office Sought: X House / Senate / President
State: IN District: 06
Disbursement For: 2010
Primary X General
Other (specify)

Transaction ID: BFC9BD3A972E64C5C83D
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
People For Patty Murray
Mailing Address PO Box 3662
City Seattle State WA Zip Code 98124
Purpose of Disbursement
2010 General Election Contribution
Candidate Name
Sen. Patty Murray
Category/ Type
Office Sought: House / X Senate / President
State: WA District:
Disbursement For: 2010
Primary X General
Other (specify)

Transaction ID: B1E0D53C942C64917A8B
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

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

Image# 10931475002

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
PORTMAN FOR SENATE COMMITTEE
Mailing Address 8331 Little Harbor Drive
City Cincinnati State OH Zip Code 45244
Purpose of Disbursement
2010 General Election Contribution
Candidate Name
Rob Portman
Category/ Type
Office Sought: [ ] House [X] Senate [ ] President
State: OH District:
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: B302694D602D242FD9DE
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Zack Space for Congress Committee
Mailing Address 726 Sixteenth Street NE
City Massillon State OH Zip Code 44646
Purpose of Disbursement
2010 General Election Contribution
Candidate Name
Rep. Zachary T. Space
Category/ Type
Office Sought: [X] House [ ] Senate [ ] President
State: OH District: 18
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: B601133D5A1A34484A01
Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 3000.00

C.
Full Name (Last, First, Middle Initial)
Arcuri for Congress
Mailing Address P.O. Box 8508
City Utica State NY Zip Code 13505
Purpose of Disbursement
Candidate Name
Rep. Michael A. Arcuri
Category/ Type
Office Sought: [X] House [ ] Senate [ ] President
State: NY District: 24
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: B268C3E6E8BEC45F8A19
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **11000.00**

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

Image# 10931475003

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Boren for Congress
Mailing Address P.O. Box 1924
City Muskogee State OK Zip Code 74402
Purpose of Disbursement
Candidate Name Rep. Dan Boren
Category/ Type
Office Sought: X House / Senate / President
State: OK District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B713694E31EB34559863
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Charles A. Gonzalez Congressional Campai
Mailing Address P.O. Box 12612
City San Antonio State TX Zip Code 78212
Purpose of Disbursement
Candidate Name Rep. Charles A. Gonzalez
Category/ Type
Office Sought: X House / Senate / President
State: TX District: 20
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: BD6D5DED768504FC68BE
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
FREEDOM AND SECURITY PAC
Mailing Address 228 S. Washington St., Ste. 115
City Alexandria State VA Zip Code 22314
Purpose of Disbursement Kline's Leaderhsip PAC
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 — Primary / General / X Other (specify) Other0

Transaction ID: B46744319773E4AECBB4
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931475004

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends of Dave Reichert
Mailing Address P. O. Box 53322
City Bellevue State WA Zip Code 98015
Purpose of Disbursement
Candidate Name Rep. Dave G. Reichert
Category/ Type
Office Sought: X House / Senate / President
State: WA District: 08
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: BD71543625DC64DF4A13
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 3000.00

B.
Full Name (Last, First, Middle Initial)
Larson for Congress
Mailing Address 29 Ruff Circle
City Glastonbury State CT Zip Code 06033
Purpose of Disbursement
Candidate Name Rep. John B. Larson
Category/ Type
Office Sought: X House / Senate / President
State: CT District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: BD97B7341E6CE40B3822
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC
Mailing Address P.O. Box 10134
City Bakersfield State CA Zip Code 93389
Purpose of Disbursement Kevin McCarthy Leadership PAC
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 — Primary / General / X Other (specify) Other0

Transaction ID: BF0ED3B1FFA754866B34
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **13000.00**

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

Image# 10931475005

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
New Democrat Coalition PAC (NDC PAC)
Mailing Address 607 14th Street, NW
Suite 800
City Washington State DC Zip Code 20005
Purpose of Disbursement
Coalition PAC
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 Primary / General / X Other (specify) ▼ Other0

Transaction ID: B67EB7A50C9354B7FBF4
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 2000.00

B.
Full Name (Last, First, Middle Initial)
Pearce for Congress
Mailing Address P.O. Box 2696
City Hobbs State NM Zip Code 88241
Purpose of Disbursement
Candidate Name
Rep. Steve Pearce
Category/ Type
Office Sought: X House / Senate / President
State: NM District: 02
Disbursement For: 2010 Primary / X General / Other (specify) ▼

Transaction ID: B664FCBD60E9F4032802
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Thornberry for Congress Committee
Mailing Address P.O. Box 9392
City Amarillo State TX Zip Code 79105
Purpose of Disbursement
Candidate Name
Rep. MAC THORNBERRY
Category/ Type
Office Sought: X House / Senate / President
State: TX District: 13
Disbursement For: 2010 Primary / X General / Other (specify) ▼

Transaction ID: BCB19F97C18CF46DAA11
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9500.00**

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

Image# 10931475006

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Tom Rooney for Congress
Mailing Address 2336 S. East Ocean Blvd. #313
City Stuart State FL Zip Code 34996
Purpose of Disbursement
Candidate Name Tom Rooney
Category/ Type
Office Sought: X House / Senate / President
State: FL District: 16
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: B7679E12937D54E46845
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Van Hollen for Congress
Mailing Address 10537 St. Paul Street
City Kensington State MD Zip Code 20895
Purpose of Disbursement
Candidate Name Rep. Chris Van Hollen
Category/ Type
Office Sought: X House / Senate / President
State: MD District: 08
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: BAF04D83F15954B0E8C5
Date of Disbursement 09 / 21 / 2010
Amount of Each Disbursement this Period 4000.00

C.
Full Name (Last, First, Middle Initial)
Capuano for Congress Committee
Mailing Address P.O. Box 440305
City Somerville State MA Zip Code 02144
Purpose of Disbursement
Candidate Name Rep. Michael E. Capuano
Category/ Type
Office Sought: X House / Senate / President
State: MA District: 08
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: B36B31584BB3A4BFAB38
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **14000.00**

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

Image# 10931475007

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Committe to Re-elect Ed Towns
Mailing Address 438 Lewis Avenue
City: Brooklyn State: NY Zip Code: 11233
Purpose of Disbursement
Candidate Name: Rep. Edolphus Towns
Category/ Type
Office Sought: X House / Senate / President
State: NY District: 10
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B16FCDEEFCD664DB8B4A
Date of Disbursement: 09 / 27 / 2010
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Djou for Hawaii
Mailing Address P.O.Box 235280
City: Honolulu State: HI Zip Code: 96823
Purpose of Disbursement
Candidate Name: Charles Djou
Category/ Type
Office Sought: X House / Senate / President
State: HI District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: BD7EDFE805DE641708DC
Date of Disbursement: 09 / 27 / 2010
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial)
Fleming for Congress
Mailing Address P.O. Box 1236
City: Minden State: LA Zip Code: 71058
Purpose of Disbursement
Candidate Name: Rep. John Fleming
Category/ Type
Office Sought: X House / Senate / President
State: LA District: 04
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B32C714B2B5D24D2FB04
Date of Disbursement: 09 / 27 / 2010
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **9500.00**

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

Image# 10931475008

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Friends of Joe Heck
Mailing Address P.O. Box 750114
City Las Vegas | State NV | Zip Code 89136
Purpose of Disbursement
Candidate Name Joe Heck
Category/ Type
Office Sought: X House | Senate | President
State: NV District: 03
Disbursement For: 2010 Primary | X General | Other (specify)
Transaction ID: BEED1D022B6EB4BD3833
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Friends of Roy Blunt
Mailing Address P.O. Box 50100
City Springfield | State MO | Zip Code 65805
Purpose of Disbursement
Candidate Name Rep. Roy Blunt
Category/ Type
Office Sought: X House | Senate | President
State: MO District: 07
Disbursement For: 2010 Primary | X General | Other (specify)
Transaction ID: B1A4258593DE148C187C
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Future Leaders PAC
Mailing Address 1155 21st Street, NW Suite 300
City Washington | State DC | Zip Code 20036
Purpose of Disbursement Jerry Lewis' Leadership PAC
Candidate Name
Category/ Type
Office Sought: House | Senate | President
State: District:
Disbursement For: 2010 Primary | General | X Other (specify) Other0
Transaction ID: B2FF418E4EB41447C9BB
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931475009

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Pat Meehan for Congress
Mailing Address 5035 Township Line Rd
City Drexel Hill | State PA | Zip Code 19026
Purpose of Disbursement
Candidate Name PATRICK L MEEHAN
Category/ Type
Office Sought: X House / Senate / President
State: PA District: 07
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B261075C3EFAA4E80901
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Sue Myrick for Congress
Mailing Address P.O. Box 37091
City Charlotte | State NC | Zip Code 28237
Purpose of Disbursement
Candidate Name Rep. Sue Myrick
Category/ Type
Office Sought: X House / Senate / President
State: NC District: 09
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B0D38B0968E914643969
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 1000.00

C.
Full Name (Last, First, Middle Initial)
Target State Victory Fund
Mailing Address 228 S Washington St. Suite 115
City Alexandria | State VA | Zip Code 22314
Purpose of Disbursement
Joint Fundraising Committee w/NRSC
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 — Primary / General / X Other (specify)
Other0

Transaction ID: B9A768E4F563F415A895
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **11000.00**

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

Image# 10931475010

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Tim Bishop for Congress
Mailing Address P.O. Box 437
City Farmingville State NY Zip Code 11738
Purpose of Disbursement
Candidate Name Rep. Timothy H. Bishop
Category/ Type
Office Sought: X House / Senate / President
State: NY District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: BC7351CF61A034B56A8F
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 4000.00

B.
Full Name (Last, First, Middle Initial)
Tim Walz for U.S. Congress
Mailing Address P.O. Box 938
City Mankato State MN Zip Code 56002
Purpose of Disbursement
Candidate Name Rep. Timothy J. Walz
Category/ Type
Office Sought: X House / Senate / President
State: MN District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B6156905BAE8849FE8E1
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Wyden for Senate
Mailing Address 232 NE 9th Avenue
City Portland State OR Zip Code 97232
Purpose of Disbursement
Candidate Name Sen. Ron Wyden
Category/ Type
Office Sought: House / X Senate / President
State: OR District:
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B67AFF041CF6441029CA
Date of Disbursement 09 / 27 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **14000.00**

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

Image# 10931475011

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Ben Chandler for Congress
Mailing Address P.O. Box 12678
City Lexington State KY Zip Code 40583
Purpose of Disbursement
Candidate Name Rep. Ben Chandler
Category/ Type
Office Sought: X House / Senate / President
State: KY District: 06
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: BB4BB3D20A84B4EB7A18
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2500.00

B.
Full Name (Last, First, Middle Initial)
Boren for Congress
Mailing Address P.O. Box 1924
City Muskogee State OK Zip Code 74402
Purpose of Disbursement VOID -
Candidate Name Rep. Dan Boren
Category/ Type
Office Sought: X House / Senate / President
State: OK District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: BCA658D5069D54770802
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period -5000.00

C.
Full Name (Last, First, Middle Initial)
Boren for Congress
Mailing Address P.O. Box 1924
City Muskogee State OK Zip Code 74402
Purpose of Disbursement
Candidate Name Rep. Dan Boren
Category/ Type
Office Sought: X House / Senate / President
State: OK District: 02
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B0DF2A1611D4F49A0973
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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

Image# 10931475012

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Citizens for Rush
Mailing Address P. O. Box 7292
City Chicago State IL Zip Code 60680
Purpose of Disbursement
Candidate Name Rep. Bobby L. Rush
Category/ Type
Office Sought: X House / Senate / President
State: IL District: 01
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: BFEADC84BF462413E8EC
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2500.00

B.
Full Name (Last, First, Middle Initial)
Committee to Elect Chris Murphy
Mailing Address P.O. Box 127
City Cheshire State CT Zip Code 06410
Purpose of Disbursement
Candidate Name Rep. Christopher S. Murphy
Category/ Type
Office Sought: X House / Senate / President
State: CT District: 05
Disbursement For: 2010 — Primary / X General / Other (specify)
Transaction ID: B8A11A7EA1DCE4C8E834
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Continuing America's Strength and Security
Mailing Address PO Box 80694
City Baton Rouge State LA Zip Code 70898
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District: 0
Disbursement For: 2010 — Primary / General / X Other (specify)
Transaction ID: B578E4CF2D37F4558BB5
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **12500.00**

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

Image# 10931475013

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Fiorina Victory Committee
Mailing Address P.O. Box 365
City McLean State VA Zip Code 22101
Purpose of Disbursement
Candidate Name Carly Fiorina
Category/ Type
Office Sought: [ ] House [X] Senate [ ] President
State: CA District:
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: BEB4E8191403144B99A6
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Frelinghuysen for Congress
Mailing Address 19 Cattano Ave
City Morristown State NJ Zip Code 07960
Purpose of Disbursement
Candidate Name Rep. Rodney Frelinghuysen
Category/ Type
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 11
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: BAA07C3DF5A044AFDB02
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Friends of Kelly Ayotte
Mailing Address P.O. Box 233
City Nashua State NH Zip Code 03061
Purpose of Disbursement
Candidate Name Kelly A Ayotte
Category/ Type
Office Sought: [ ] House [X] Senate [ ] President
State: NH District:
Disbursement For: 2010 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: B19FAF98F34F94404B81
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **15000.00**

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

Image# 10931475014

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Giffords for Congress
Mailing Address P.O. Box 12886
City Tucson State AZ Zip Code 85732
Purpose of Disbursement
Candidate Name Rep. Gabrielle Giffords
Category/ Type
Office Sought: X House / Senate / President
State: AZ District: 08
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B4737BFC564E749A9841
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
LEGPAC
Mailing Address 38 Ivy St., SE
City Washington State DC Zip Code 20003
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2010 — Primary / General / X Other (specify)
Other0

Transaction ID: B274C1ACBBAA9427DB02
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

C.
Full Name (Last, First, Middle Initial)
Lincoln Davis for Congress
Mailing Address P.O Box 350
City Jamestown State TN Zip Code 38556
Purpose of Disbursement
Candidate Name Rep. Lincoln Davis
Category/ Type
Office Sought: X House / Senate / President
State: TN District: 04
Disbursement For: 2010 — Primary / X General / Other (specify)

Transaction ID: B70889E7C6FE344FFBCF
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **15000.00**

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

Image# 10931475015

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Minnick for Congress
Mailing Address PO Box 636
City Annandale State VA Zip Code 22003
Purpose of Disbursement
Candidate Name Rep. Walt Minnick
Category/ Type
Office Sought: X House / Senate / President
State: ID District: 01
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: B491DDDF188904E84A40
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 5000.00

B.
Full Name (Last, First, Middle Initial)
Norm Dicks for Congress
Mailing Address P.O. Box 1663
City Tacoma State WA Zip Code 98401
Purpose of Disbursement
Candidate Name Rep. Norm Dicks
Category/ Type
Office Sought: X House / Senate / President
State: WA District: 06
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: B3F8C6D2AD65644F2A59
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
Pete Stark Re-election Committee
Mailing Address P.O. Box 8331
City Fremont State CA Zip Code 94537
Purpose of Disbursement
Candidate Name Rep. Pete Stark
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 13
Disbursement For: 2010 Primary X General / Other (specify)
Transaction ID: BE61A50C0946C49ADA75
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **10000.00**

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

Image# 10931475016

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 X 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.
Full Name (Last, First, Middle Initial)
Susan Davis for Congress
Mailing Address 1212 S. Victory Blvd.
Suite 200
City Burbank State CA Zip Code 91502
Purpose of Disbursement
Candidate Name
Rep. Susan A. Davis
Category/ Type
Office Sought: X House / Senate / President
State: CA District: 53
Disbursement For: 2010
Primary X General
Other (specify)

Transaction ID: B563EC010C74F4508917
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2500.00

B.
Full Name (Last, First, Middle Initial)
Thornberry for Congress Committee
Mailing Address P.O. Box 9392
City Amarillo State TX Zip Code 79105
Purpose of Disbursement
Candidate Name
Rep. MAC THORNBERRY
Category/ Type
Office Sought: X House / Senate / President
State: TX District: 13
Disbursement For: 2010
Primary X General
Other (specify)

Transaction ID: B52052E1B7BE444F38DD
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2500.00

C.
Full Name (Last, First, Middle Initial)
Tom Hayhurst for Congress
Mailing Address P.O. Box 40222
City Fort Wayne State IN Zip Code 46804
Purpose of Disbursement
Candidate Name
Thomas E Hayhurst
Category/ Type
Office Sought: X House / Senate / President
State: IN District: 03
Disbursement For: 2010
Primary X General
Other (specify)

Transaction ID: B62DAFCA286174E8A917
Date of Disbursement 09 / 28 / 2010
Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7000.00**

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

Image# 10931475017

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

21b | 22 | X 23 | 24 | 25 | 26
27 | 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
Victory In November Election Pac (vine P

Mailing Address 607 14th Street, Nw
Suite 800

City: Washington | State: DC | Zip Code: 20005

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: 2010
Primary / General / X Other (specify)
0

Transaction ID: BD0B5D3BD49744B8299D
Date of Disbursement: 09 / 28 / 2010

Amount of Each Disbursement this Period: 5000.00

B.

Full Name (Last, First, Middle Initial)
Friends of Kelly Ayotte

Mailing Address P.O. Box 233

City: Nashua | State: NH | Zip Code: 03061

Purpose of Disbursement

Candidate Name
Kelly A Ayotte

Category/ Type

Office Sought: House / X Senate / President
State: NH District:

Disbursement For: 2010
Primary / General / X Other (specify)
Debt2010

Transaction ID: BC7E2FB44BC8C42E2841
Date of Disbursement: 09 / 29 / 2010

Amount of Each Disbursement this Period: 5000.00

C.

Full Name (Last, First, Middle Initial)
Committee To Re-elect Linda Sanchez

Mailing Address 1212 S. Victory Blvd
Suite 211

City: Burbank | State: CA | Zip Code: 91502

Purpose of Disbursement

Candidate Name
Rep. Linda Sanchez

Category/ Type

Office Sought: X House / Senate / President
State: CA District: 39

Disbursement For: 2010
Primary / X General / Other (specify)

Transaction ID: BA72E65A0EFC9485EBD0
Date of Disbursement: 09 / 30 / 2010

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **12500.00**

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

Image# 10931475018

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
HELPING ENSURE RESPONSIBLE GOVERNMENT BY ELECTING REPUBLICANS (H.E.R.G.E.R. PAC)

Transaction ID: BE41BF96A28964A76BD8

Mailing Address PO Box 984

Date of Disbursement: 09 / 30 / 2010

City: Willows | State: CA | Zip Code: 95988

Amount of Each Disbursement this Period: 5000.00

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010 [ ] Primary [ ] General [X] Other (specify)

0

B.

Full Name (Last, First, Middle Initial)
NO RETREAT POLITICAL ACTION COMMITTEE

Transaction ID: B35CF0DD302CE46E1BA9

Mailing Address 701 8th Street, NW
Suite 500

Date of Disbursement: 09 / 30 / 2010

City: Washington | State: DC | Zip Code: 20001

Amount of Each Disbursement this Period: 5000.00

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010 [ ] Primary [ ] General [X] Other (specify)

Other0

SUBTOTAL of Disbursements This Page (optional) ▶	**10000.00**
TOTAL This Period (last page this line number only) ▶	**492500.00**

Image# 10931475019

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

21b	22	23	24	25	26
27	X 28a	28b	28c	29	30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
Norman B. Livermore, III, MD

Mailing Address 120 La Casa Via Suite 206

City: Walnut Creek | State: CA | Zip Code: 94598-3007

Purpose of Disbursement
Refund of erroneous contribution

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: BCD569239374045DB942

Date of Disbursement: 09 / 23 / 2010

Amount of Each Disbursement this Period: 975.00

SUBTOTAL of Disbursements This Page (optional)	**975.00**
TOTAL This Period (last page this line number only)	**975.00**

Image# 10931475020

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons

A.

Full Name (Last, First, Middle Initial)
The Congressional Award Foundation

Mailing Address P.O. Box 77440

City: Washington | State: DC | Zip Code: 20013

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☐ Primary ☐ General ☒ Other (specify)
Other0

Transaction ID: BDCEB178C417F4A599F8

Date of Disbursement: 09 / 28 / 2010

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶	**5000.00**
TOTAL This Period (last page this line number only) ▶	**5000.00**