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Image# 12950078795

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTTIM OX	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
American Academy of	Neurology BrainPA		
ADDRESS (number and street)	509b 2nd St. NE		
Check if different			
than previously reported. (ACC)	Washington		DC 20002 -
2. FEC IDENTIFICATION N	UMBER ▼ CI	TY▲	STATE ▲ ZIP CODE ▲
C C00435933		IS THIS NEW (N) O	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	o 20 (M2) May 20 (May 20 (M3) Jun 20 (M3)	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
× April 15 Quarterly Report (0		r 20 (M4) Jul 20 (M	7) Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (C	(C) 12-Day	Primary (12P) Convention (12C)	General (12G) Runoff (12R) Special (12S)
October 15 Quarterly Report (0	·	Convention (120)	Spoolar (120)
January 31 Year-End Report (Y	/E) Electi	on on	in the State of
July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	·	on on	in the State of
5. Covering Period 0	M / D D / Y Y Y Y Y Y 1 1 2010	through 03	M / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the	nis Report and to the best o	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	Mr. Timothy J. Engel		
Signature of Treasurer Mr. 2	Timothy J. Engel	[Electronically Filed]	Date 01 / 12 / 2012
NOTE: Submission of false, erron	eous, or incomplete information	on may subject the person signir	g this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Academy of Neurology BrainPAC 01 2010 03 2010 Report Covering the Period: 01 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 120622.00 January 1. 2010 (b) Cash on Hand at 121622.00 Beginning of Reporting Period..... 42787.62 42787.62 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 164409.62 163409.62 6(a) and 6(c) for Column B)..... 41947.62 41947.62 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 122462.00 121462.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Neurology BrainPAC

Report Covering the Period: From: 01	01 2010	To: 03 31 2010		
I. Receipts	I. Receipts COLUMN A Total This Period			
Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees		00400.00		
(i) Itemized (use Schedule A)	28136.00	28136.00		
		0704.00		
(ii) Uniternized	9704.00	9704.00		
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	37840.00	37840.00		
Lines II(a)(i) and (ii)	37040.00	01040.00		
(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)▶	37840.00	37840.00		
. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
. All Loans Received	0.00	0.00		
_				
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures		7		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
. Refunds of Contributions Made		,		
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts		10.17.00		
(Dividends, Interest, etc.)	4947.62	4947.62		
. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(IIOIII Octiedale 110)	0.00	0.00		
(b) Lavin France (france Cabadrila LIF)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	7	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
(4) 1000 1000 (000 10(0) 000 10(0))				
Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	42787.62	42787.62		
Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	42787.62	42787.62		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Jaionaa Tour to Date			
(i) Federal Share	0.00	0.00			
(2) N 5 1 1 2	0.00	0.00			
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00			
Expenditures	0.00	0.00			
(c) Total Operating Expenditures					
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	0.00	0.00			
Committees	500.00	500.00			
Contributions to Federal Candidates/Committees and Other Political Committees	37000.00	37000.00			
Independent Expenditures	0.00	0.00			
(use Schedule E) Coordinated Party Expenditures	0.00	0.00			
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loans Made	0.00	0.00			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees (such as PACs)	0.00	0.00			
(d) Total Contribution Refunds	0.00	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00			
Other Disbursements	4447.62	4447.62			
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity					
(from Schedule H6) (i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	41947.62	41947.62			
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	41947.62	41947.62			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	37840.00	37840.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37840.00	37840.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

1mage# 12950078800 PAGE 6 / 33

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: F3XA

Transaction ID:

Changed distirbution to Sen. Amy Klobuchar from 'general' to 'primary' election.

Form/Schedule: Transaction ID:

	FOR LINE NUMBER:					PAGE		7	OF	3	3
Use separate schedule(s) for each category of the	(check only one)										
Detailed Summary Page	<u> </u> >	11a		11b		11c		12	!		
, ,		13		14		15		16	;	- 11	17

Name of Employer Self Receipt For:	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Neurology	ne name and address of any political committee to	to solicit contributions from such committee.
Date of Receipt Date of Receipt	Mailing Address 27 Saddle Club Road City Lexington FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General	MA 02420-2121 C Occupation Neurologist Aggregate Year-to-Date ▼	01 10 2010 Transaction ID : 31121286
Dr. Mark S. Yerby Mailing Address 1233 SW 57th Avenue City State Zip Code OR 97221-2507 FEC ID number of contributing federal political committee. Name of Employer North Pacific Epilepsy Research Receipt For: Primary General Other (specify) ▼ Date of Receipt M.M. M. J. D. D. J. J. T. V. Y.	Mailing Address 1 Charles St S Unit 5D City Boston FEC ID number of contributing federal political committee. Name of Employer Virginia Mason Medical Center Receipt For: Primary General	MA 02116-5449 C Occupation Physician Aggregate Year-to-Date ▼	01 10 2010 Transaction ID : 31121289
SUBTOTAL of Receipts This Page (optional)	Mailing Address 1233 SW 57th Avenue City Portland FEC ID number of contributing federal political committee. Name of Employer North Pacific Epilepsy Research Receipt For: Primary General	OR 97221-2507 C Occupation Physician Aggregate Year-to-Date ▼	01 14 2010 Transaction ID : 31153399
	SUBTOTAL of Receipts This Page (optional)	•	1750.00

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

FOR LINE NUMBER:			PAGE		8	OF		33		
(check only one)										
X	11a		11b		11c		12	!		
	13		14		15		16	;		17

or for commercial purposes, other than using	and Statements may not be sold or used by any pers g the name and address of any political committee to	
NAME OF COMMITTEE (In Full)	ology, Dynin DA C	
American Academy of Neuro	biogy BrainPAC	
Full Name (Last, First, Middle Initial) 1. Dr. Dominic B. Fee		Date of Receipt
Mailing Address 1224 Litchfield Ln		01 25 2010
City	State Zip Code	Transaction ID : 31224956
Lexington	KY 40513-1794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	†
Univ of Kentucky	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Pushpa Narayanaswami	•	Date of Receipt
Mailing Address 506 Clinton Road		02 11 _2010 _
City	State Zip Code	Transaction ID : 31299122
Chestnut Hill	MA 02467-1419	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	-
Beth Israel Deaconess Medical Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real-to-Date ¥	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Eroboghene E. Ubogu	'	Date of Receipt
Mailing Address 12009 Opal Creek Dr		M = M / D = D / Y = Y = Y
City	State Zip Code	02 11 2010 Transaction ID : 31299355
Pearland	TX 77584-1648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Baylor College of Med.	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
CURTOTAL of Provider Title South		1750.00
SUBTUTAL of Receipts This Page (optional	al)	17 00.00
TOTAL This Period (last page this line num	nber only)	

	FOR LINE	NUMBER	: PAGI	E 9	OF
Use separate schedule(s)	(check only				
for each category of the Detailed Summary Page	X 11a	11b	11c	1	2
,	13	14	15	1	6

33

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Neurolog	gy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Joan Puglia		Date of Receipt
Mailing Address 1 Windy Ridge Lane		02 11 2010
City	State Zip Code	Transaction ID: 31304630
New Milford	CT 06776	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self - Northwest Hills Neurology, P.C.	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Dr. Austin J. Sumner		Date of Receipt
Mailing Address 625 Saint Charles Ave Apt 117		02 11 2010
City	State Zip Code	Transaction ID: 31308251
New Orleans	LA 70130-3430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer LSU Health Sci Ctr/Dept of Neurology	Occupation Physician	
Receipt For:		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Robert T. Leshner		Date of Possint
Mailing Address 939 Coast Blvd. #5-G		Date of Receipt O2 11 2010
City	State Zip Code	Transaction ID : 31308403
La Jolla	CA 92037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Children's National	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	•	1250.00
TOTAL This Period (last page this line number	<u></u>	

FOR LINE NUMBER: PAGE 10 OF 33 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Susan M. Naselli Date of Receipt Mailing Address 8813 Fawn Ridge Dr. 2010 City State Zip Code Transaction ID: 31308428 FL Fort Myers 33912 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation VA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Neil A. Busis Date of Receipt Mailing Address 6934 Rosewood Street 02 2010 14 City State Zip Code Transaction ID: 31311647 Pittsburgh PA 15208-2639 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Pittsburgh Neurology Ctr. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Daniel B. Hier Date of Receipt Mailing Address 230 W Second St #3106 02 16 2010 City Zip Code State Transaction ID: 31312313 MO Kansas City 64105 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Cerner Corporation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LIN	1E NO	PAGE	PAGE 11 OF				
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	X 11a		11b		11c		12	
	13		14		15		16	

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NAME OF COMMITTEE (In Full)

American Academy of Neurol	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Timothy A. Pedley Mailing Address 55 Grace Church St.		Date of Receipt 02 12 2010
City Rye	State Zip Code NY 10580	Transaction ID : 31317949 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Columbia University	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) B. Dr. Edgar J. Kenton III Mailing Address, 1290 W Peophtres St NW (Not 2004	Date of Receipt
Mailing Address 1280 W Peachtree St NW A City Atlanta	Apt 3904 State Zip Code GA 30309-3444	02 12 2010 Transaction ID : 31318154 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Morehouse School of Medicine	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Dr. Anthony G. Alessi		Date of Receipt
Mailing Address 269 Broadway		02
City Norwich	State Zip Code CT 06360-3526	Transaction ID : 31378803 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer NeuroDiagnostics LLC Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	····	2500.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 12 OF 33 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Elaine C. Jones Date of Receipt Mailing Address PO Box 603253 2010 24 City Zip Code State Transaction ID: 31388584 RΙ Providence 02906 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Orly Avitzur Date of Receipt Mailing Address 815 Old Sleepy Hollow Rd Extension 02 2010 25 City State Zip Code Transaction ID: 31395915 Briarcliff NY 10510-2543 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Nilay R. Shah Date of Receipt Mailing Address 160 W 66th St Apt 22J 2010 02 27 City Zip Code State Transaction ID: 31405222 NY New York 10023-6558 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 33 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Maureen A. Callaghan Date of Receipt Mailing Address PO Box 6059 1617 Sylvester St SW 01 2010 City Zip Code State Transaction ID: 31405665 WA Olympia 98501-2228 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Madigan Army Medical Center / Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Michael J. Kaminski Date of Receipt Mailing Address 2307 Valley Brook Rd 03 2010 07 City State Zip Code Transaction ID: 31416681 TN Nashville 37215 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation St. Thomas Neurology Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Rod Larson Date of Receipt Mailing Address 4418 Xerxes Ave S 2010 03 05 City Zip Code State Transaction ID: 31416682 MN Minneapolis 55410 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation American Academy of Neurology Deputy Exec. Director, Center for Heal Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Amie L. Peterson Date of Receipt Mailing Address 3846 SE Alder St 08 2010 City Zip Code State Transaction ID: 31419411 OR Portland 97214-3226 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Portland VA / OHSO Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. O'Neill D'Cruz Date of Receipt Mailing Address 825 Deseret Ln 03 2010 80 City State Zip Code Transaction ID: 31419540 Chapel Hill NC 27516-7856 Amount of Each Receipt this Period FEC ID number of contributing 1001.00 federal political committee. Name of Employer Occupation **UCB** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1001.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Robert W. Hamill Date of Receipt Mailing Address 89 Beaumont Dr 2010 Given C225 03 12 City State Zip Code Transaction ID: 31440724 Burlington VT 05405-0001 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Professor of Neurology University of Vermont Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2251.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 15 OF 33 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Sara G. Austin Date of Receipt Mailing Address 3006 Loveland Cove 2010 City State Zip Code Transaction ID: 31441703 78746-7635 TX Austin Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jaime A. Boero Date of Receipt Mailing Address 1000 N Oak Ave 03 2010 12 City State Zip Code Transaction ID: 31444320 Marshfield WI 54449-5702 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Marshfield Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr. Kathryn I. Florio Date of Receipt Mailing Address 1205 S. Grange Ave. Ste. 201 2010 03 12 City Zip Code State Transaction ID: 31444620 SD Sioux Falls 57105 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Sanford Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF 33 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Barry Kosofsky Date of Receipt Mailing Address 70 Catherine Rd 2010 City Zip Code State Transaction ID: 31445189 NY Scarsdale 10583-6917 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Weill Cornell Physicians Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Stacy A. Rudnicki Date of Receipt Mailing Address 236 Kingsrow Drive 03 2010 12 City State Zip Code Transaction ID: 31445474 AR Little Rock 72207-4117 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Univ. of AR Med. Ctr. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dr. Thomas R. Vidic Date of Receipt Mailing Address 22642 Remington Court 03 12 2010 City Zip Code State Transaction ID: 31445639 IN Elkhart 46514-4674 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Elkhart Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Anna D. Hohler Date of Receipt Mailing Address 58 Morton Street 2010 City Zip Code State Transaction ID: 31445754 Needham Heights MA 02494-1204 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation BUMC Dept. of Neurology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Thomas R. Vidic Date of Receipt Mailing Address 22642 Remington Court 03 2010 12 City State Zip Code Transaction ID: 31446092 IN Elkhart 46514-4674 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Elkhart Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Robert C. Griggs Date of Receipt Mailing Address 901 East Ave Apt A 2010 03 12 City Zip Code State Transaction ID: 31446127 NY Rochester 14607-2271 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Univ of Rochester Sch of Med Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 18 OF 33 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Richard A. Lafrance Date of Receipt Mailing Address 444 NW Elks Dr 2010 City Zip Code State Transaction ID: 31457248 OR Corvallis 97330-3758 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Corvalis Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Drasko Simovic Date of Receipt Mailing Address 50 Prospect St Rm 404 03 2010 13 City State Zip Code Transaction ID: 31457259 MA Lawrence 01841-2838 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Tufts University School of Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Eugene May Date of Receipt Mailing Address 1919 Fairmount Ave SW 03 14 2010 City Zip Code State Transaction ID: 31464232 WA Seattle 98126-2075 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Seattle Radiologists Neuro-opthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

Any information copied from such Reports and or for commercial purposes, other than using to	I Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Neurology	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. David L. Camenga Mailing Address 6 Glenwood Avenue		Date of Receipt
0.1	7.0.1	03 15 2010
City	State Zip Code ME 04330-6906	Transaction ID : 31464240
Augusta	WL 04330-6906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
Togus Veterans' Adm Med Ctr	Neurologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Dr. Debasish Mridha		Date of Receipt
Mailing Address 4705 Towne Centre Rd Ste		03 15 2010
City	State Zip Code	Transaction ID: 31464800
Saginaw	MI 48604-2821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
MANC	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Dr. Lily Jung-Henson		Date of Receipt
Mailing Address 9420 SE 54th St		03 15 2010
City	State Zip Code	Transaction ID : 31464816
Mercer Island	WA 98040-5121	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Swedish Neurosci. Institute, Swedish H	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional).		1000.00
TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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Any information copied from such Reports and or for commercial purposes, other than using t	I Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Neurolo	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Glen R. Finney Mailing Address 9235 NW 26th Avenue		Date of Receipt
		03 15 2010
City	State Zip Code	Transaction ID : 31464830
Gainesville	FL 32606-9180	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	85.00
Name of Employer	Occupation	
Univ. of FL Dept. of Neurology	Behavioral Neurology	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.00	
Full Name (Last, First, Middle Initial) 3. Dr. Elizabeth Minto	•	Date of Receipt
Mailing Address 553 N. Mobile Street		03 15 2010
City	State Zip Code	Transaction ID: 31464832
Fairhope	AL 36532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	1
Neurology: Child and Adult, P.C.	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Bruce H. Cohen		Date of Receipt
Mailing Address 3141 Neille Lane		03 15 2010
City	State Zip Code OH 44087	Transaction ID: 31464836
Twinsburg	OH 44087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	1
Children's Hospital and Med. Center of	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional).		285.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 21 Use separate schedule(s) (check only one) X 11a 11b 11c

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Erik Perkins Date of Receipt Mailing Address 11660 Cypress Canyon Road 2010 City State Zip Code Transaction ID: 31464885 CA San Diego 92131-3756 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Sharp-Rees-Stealy Medical Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. James C. Stevens Date of Receipt Mailing Address 12112 Aboite Center Road 03 2010 16 City State Zip Code Transaction ID: 31465668 Fort Wayne IN 46814-9528 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Allied Physicians, Inc. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Catherine M. Rydell Date of Receipt Mailing Address 4645 Park Commons, #319 2010 03 18 Zip Code State Transaction ID: 31502499 MN St. Louis Park 55416 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation American Academy of Neurology Executive Director/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Bruce Sigsbee Date of Receipt Mailing Address 1199 Sennebec Rd 2010 City Zip Code State Transaction ID: 31526385 ME Union 04862-4628 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Penobscot Bay Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Alexander Krob Date of Receipt Mailing Address 2121 NE 139th St Suite 400 03 2010 31 City State Zip Code Transaction ID: 31536744 WA Vancouver 98686-2742 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Dept of Neurology Unc Hospitals Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 SUBTOTAL of Receipts This Page (optional)..... 28136.00 TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 OF 33							
IT	EMIZED RECEIPTS		for each category of the	(check only one)						
			Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17						
	ly information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$ \rangle$	American Academy of Neurology Bra		AC							
Α.	Full Name (Last, First, Middle Initial) Lawrenceville Neurology Center PA			Date of Receipt						
	Mailing Address 3231 Princeton Pike			M = M / D = D / Y = Y = Y						
	Bldg. 3, Suite 202	Ctoto	Zin Code	02 03 2010						
	City Lawrenceville	State NJ	Zip Code 08648	Transaction ID : 31437031						
		140	00040	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.00						
	Name of Employer	Occupation	1							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	Assidental denseit funds transfered out on 2/44/20						
	Other (specify) ▼		500.00	Accidental deposit; funds tranfered out on 3/11						
— В.	Full Name (Last, First, Middle Initial) AAN/PA Transfer Account			Date of Receipt						
	Mailing Address 1080 Montreal Ave			03 30 2010						
	City	State	Zip Code	Transaction ID: 31570005						
	Saint Paul	MN	55116	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		4447.62						
	Name of Employer	Occupation	1							
	Receipt For:	Aggragata	Voor to Data W	-						
	Primary General	Aggregate	Year-to-Date ▼	Refund for Accidental Internal Transfer on 3/2/20						
	Other (specify) ▼		4447.62	North for Accidental Internal Transfer of 5/2/20						
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt						
	Mailing Address			M - M / D - D / Y - Y - Y - Y						
	City	State	Zip Code	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		Tallocate of Each Hoseign time i shou						
	Name of Employer	Occupation	1							
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼							
s	SUBTOTAL of Receipts This Page (optional)			4947.62						

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

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EMIZED DISPLIBSEMENTS	Use separa	te schedule(s)	FOR LINE NUMBER: PAGE 24 OF 33 (check only one)								_33_
EMIZED DISBURSEMENTS	for each car	tegory of the mmary Page		21b 27	22 28a	23 28b		24 28c	25 29		26 30b
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NAME OF COMMITTEE (In Full)	Proin DAC										
American Academy of Neurology E	SiainPAC										
Full Name (Last, First, Middle Initial) AANPA Soft Dollar Account					Date of	Disburse	ement				
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Mailing Address 1080 Montreal Ave					03	1	1	Ь	2010		
•		Zip Code			Trans	action ID	: 314	37067	7		
Saint Paul Purpose of Disbursement	MN t	55116									
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Office Sought: House Disburser Senate President	ment For: Primary Other (specify	General	. 71		Transfe	of reciep	t repo	orted o	on line 1	7A or	า 2/3/
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Mailing Address								L			
City	State Z	Zip Code									
Purpose of Disbursement			-	$\overline{}$	Amount	Amount of Each Disbursement this Period					od
Candidate Name			Categ		Allican of Each Dissaconient and						
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Full Name (Last, First, Middle Initial)											
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UBTOTAL of Disbursements This Page (optional)									50	00.00	

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)					
	Detailed Summary Page	21b	22 X 23 24 25 26					
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Any information copied from such Reports and Sta or for commercial purposes, other than using the n								
NAME OF COMMITTEE (In Full)								
American Academy of Neurology	BrainPAC							
Full Name (Last, First, Middle Initial)								
A. Michael Burgess For Congress			Date of Disbursement					
Mailing Address PO Box 2334			01 14 2010					
City	State Zip Code		Transaction ID : 31170921					
Denton	TX 76202		Transaction ib . 31170321					
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
Rep. Michael C. Burgess M.D.		Type	1000.00					
Office Sought: House Disburs Senate President	ffice Sought: House Disbursement For: 2009 Senate Primary General							
State: TX District: 26								
Full Name (Last, First, Middle Initial)								
B. Gingrey For Congress, Inc.		Date of Disbursement						
Mailing Address PO Box U			01 14 2010					
City Marietta Purpose of Disbursement	State Zip Code GA 30060		Transaction ID: 31171865					
Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
Rep. Phil Gingrey M.D.	_	Туре	1000.00					
	ement For: 2009 ✓ Primary General Other (specify) ▼		Campaign Contribution					
Full Name (Last, First, Middle Initial)								
C. Earl Pomeroy For Congress			Date of Disbursement					
Mailing Address Post Office Box 9336			01 21 2010					
City Fargo	State Zip Code ND 58106		Transaction ID : 31203485					
Purpose of Disbursement	11.55							
Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	1000.00					
Rep. Earl Pomeroy		Туре	1000.00					
Senate President	ement For: 2010 Primary ☐ General Other (specify) ▼		Campaign Contribution					
State: ND District: 00								
SUBTOTAL of Disbursements This Page (optional)	·····	3000.00					
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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER:	PAGE 26 OF 33				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	4 🗆 05 —				
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NAME OF COMMITTEE (In Full)								
American Academy of Neurology E	BrainPAC							
Full Name (Last, First, Middle Initial)								
A. Friends For Harry Reid			Date of Disbursement					
Mailing Address P.O. Box 19163			01 25 2010					
City	State Zip Code		Transaction ID: 3121	0155				
Las Vegas	NV 89132		Transaction ib . 3121	3133				
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbu	sement this Period				
Candidate Name		Category/		4000.00				
Sen. Harry Reid		Type		1000.00				
Office Sought: House Disburse Senate President	ment For: 2010 Primary		Campaign Contribution					
State: NV District:								
Full Name (Last, First, Middle Initial)								
B. Klobuchar For Minnesota 2012		Date of Disbursement	Y Y Y Y					
Mailing Address PO Box 4146			02 24 2010					
City St Paul Purpose of Disbursement	State Zip Code MN 55104		Transaction ID: 3138	32039				
Campaign Contribution		011	Amount of Each Disbu	sement this Period				
Candidate Name		Category/	1000.6					
Sen. Amy Klobuchar		Type	7	1000.00				
	ment For: 2012 Primary ☐ General Other (specify) ▼		Campaign Contribution					
Full Name (Last, First, Middle Initial) C. AMERIPAC			Date of Disbursement					
/ IIVIE / III / IO			M M / D D /	YYYY				
Mailing Address 499 S. Capitol SW Suite 414			02 24	2010				
City Washington	State Zip Code DC 20003		Transaction ID : 3138	35034				
Purpose of Disbursement Leadership PAC		011						
Candidate Name			Amount of Each Disbu	sement this Period				
AMERIPAC		Category/ Type	1	2500.00				
	ment For:	71	7	,				
Senate	Primary General		Leadership PAC					
President	Other (specify) ▼		•					
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	NAME OF COMMITTEE (In Full)															
	American Academy of Neurology E	BrainPAC														
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Α.	Pallone For Congress						Date o	t Dist	oursei	ment						
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	Mailing Address PO Box 3176						02		24	1		2010	_			
	City	State Zi	n Codo													
	City Stanch		p Code 7740				Trans	sactio	n ID	: 3138	7120					
	Purpose of Disbursement	140 0	7740													
	Campaign Contribution			01	11	71	Amoun	t of F	ach l	Disbu	rseme	nt this	Perio	d		
	Candidate Name				-									_		
	Rep. Frank Pallone Jr.			Cate		/	Ι.					250	0.00			
	•	nent For: 2010	<u> </u>	ı yı	рс	-			,		7					
		Primary	General				Campai	ian C	ontrib	ution						
	President	Other (specify)					Campa	igii Ci	OHUID	ution						
	State: NJ District: 06	()	•													
	Full Name (Last, First, Middle Initial)															
В.	Becerra For Congress						Date o	f Disk	bursei	ment						
	Decena i or congress						M M		D	D /	V	Y Y	Y			
	Mailing Address P.O. Box 261060						03		02		Ι΄.	2010				
	City	State Zi	p Code				Trans	sactio	n ID	: 3140	16628					
	Los Angeles	CA 9	0026				man	Jactic	JII 1D	. 5170	70020					
	Purpose of Disbursement Campaign Contribution		l I	_	-	7										
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	Candidate Name			Cate		/	1000									
	Rep. Xavier Becerra			Ту	ре						7	100	0.00			
		nent For: 2010														
			K General				Campa	ign C	ontrib	ution						
	President State: CA District: 31	Other (specify)	•													
						_										
	Full Name (Last, First, Middle Initial)						Date o	f Dick	hurcoi	mont						
C.	Perlmutter For Congress							ו טוטו	Juisei	пепі						
	Mailing Address 3440 Youngfield Street					\dashv	03	/	02			y y y 2010	Y			
	#264						03		02			2010				
		State Zi	p Code													
			0033				Trans	sactio	on ID	: 3140)6807					
	Purpose of Disbursement			-	-	_										
	Campaign Contribution			01	11_	ш	Amoun	t of E	Each	Disbui	rseme	nt this	Perio	d		
	Candidate Name		-	Cate	aorv	/		-	-	_	-	400	0.00			
	Rep. Edwin Perlmutter			Ty							7	100	0.00			
		nent For: 2010														
	Senate	Primary	G eneral	Campaign Contribution												
	President	Other (specify)	▼													
	State: CO District: 07															
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IT	EMIZED DISBURSEMENTS		category of the	(check only one)			24 25 20			
			Summary Page	21b	22 28a	X 23 28b	24 25 26 30b			
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	for commercial purposes, other than using the nam									
\setminus	NAME OF COMMITTEE (In Full)									
$ \rangle$	American Academy of Neurology B	BrainPA	С							
_	Full Name (Last, First, Middle Initial)									
A.	Allyson Schwartz For Congress					f Disburse				
	Mailing Address P.O. Box 2232				03 03 2010					
	City	State	Zip Code		action ID	- 24 400042				
	Jenkintown	PA	19046		irans	action ib	: 31409912			
	Purpose of Disbursement Campaign Contribution			011	Amoun	t of Each	Disbursement this Period			
	Candidate Name			Category/			1000.00			
	Rep. Allyson Y. Schwartz Office Sought:	nent For:	2010	Туре		,				
	Senate President	Senate Primary General Car								
_	State: PA District: 13									
P	Full Name (Last, First, Middle Initial)				Doto -	f Dioberra	omont			
D.	Richard Burr Committee; The				Date o	f Disburse				
	Mailing Address Post Office Box 5928	ress Post Office Box 5928								
	Winston-Salem	State NC	Zip Code 27113		Trans	saction ID): 31436998			
	Purpose of Disbursement Campaign Contribution			011	Amount of Each Disbursement this Period					
	Candidate Name			Category/			1000.00			
	Sen. Richard M. Burr	oont Farr	0000	Type		- 7	1000.00			
		nent For: Primary	2009 General		06	an C"	hution			
		Other (spe			Campa	ign Contril	DUTION			
	State: NC District:	(-1,-	· · · ·							
	Full Name (Last, First, Middle Initial)									
C.	Democratic Congressional Campai	gn Con	nmittee		Date o	f Disburse	ement			
	Moiling Address 400.0 Octivi Ct. 1.05				M = M	/ D				
	Mailing Address 430 S. Capitol Street, SE				03		1 2010			
	City	State	Zip Code		T	notice In	. 24.427000			
	Washington	DC	20003		ırans	action ID	: 31437000			
	Purpose of Disbursement National Party Contribution			011						
	Candidate Name			011	Amoun	t of Each	Disbursement this Period			
				Category/ Type			5000.00			
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 29 OF 33								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check only	NOMBER:								
	for each category of the Detailed Summary Page	21b	22 🗶 23 🔲 24 🔲 25 🖂 26								
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NAME OF COMMITTEE (In Full)	D DAO										
American Academy of Neurology	BrainPAC										
Full Name (Last, First, Middle Initial)											
A. National Republican Congression	al Committee		Date of Disbursement								
			M M / D D / Y Y Y Y								
Mailing Address 320 First Street SE			03 11 2010								
City	State Zip Code										
Washington	DC 20002		Transaction ID: 31437003								
Purpose of Disbursement											
National Party Contribution		011	Amount of Each Disbursement this Period								
Candidate Name		Category/	5000 00								
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	ement For:										
Senate President	Primary General Other (specify) ▼		National Party Contribution								
State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)											
B. Marsha Blackburn For Congress,	Inc		Date of Disbursement								
- Warding Blackbarri For Congress,			M = M / D = D / Y = Y = Y								
Mailing Address PO Box 3750			03 15 2010								
City Brentwood	State Zip Code TN 37024		Transaction ID: 31465465								
Purpose of Disbursement	37024										
Campaign Contribution		011	Amount of Each Disbursement this Period								
Candidate Name		Category/									
Rep. Marsha Blackburn		Type	1000.00								
	ement For: 2009										
Senate	Primary General		Campaign Contribution								
President	Other (specify) ▼										
State: TN District: 07											
Full Name (Last, First, Middle Initial)			Date of Disbursement								
C. Tim Murphy For Congress			M M / D D / Y Y Y Y								
Mailing Address P.O. Box 24551			03 182010								
City	State Zip Code		Transaction ID: 31490078								
Pittsburgh Purpose of Disbursement	PA 15234										
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Candidate Name			Amount of Each Disbursement this Period								
Rep. Tim F. Murphy	Category/ Type	1500.00									
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 30 C						
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NAME OF COMMITTEE (In Full)								
American Academy of Neurology E	BrainPAC							
Full Name (Last, First, Middle Initial)								
A. Berkley For Congress			Date of Disbursement					
Mailing Address 3077 E Warm Springs Rd Suite 30)		03 18 2010					
•	State Zip Code		Transaction ID : 31490080					
Las Vegas	NV 89120		Transaction is . 0140000					
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name		Category/	2000.00					
Rep. Shelley Berkley Office Sought: House Disburser	nont Fore 2000	Туре	100000					
Senate President	nent For: 2009 Primary General Other (specify)		Campaign Contribution					
State: NV District: 01								
Full Name (Last, First, Middle Initial) B. Volunteers For Shimkus			Date of Disbursement					
Mailing Address PO Box 661		03 / 18 / 2010						
Collinsville	State Zip Code IL 62234		Transaction ID : 31490082					
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period					
Candidate Name	,	Category/	1000.00					
Rep. John M. Shimkus		Туре	1000.00					
	nent For: 2010 Primary General Other (specify)		Campaign Contribution					
Full Name (Last, First, Middle Initial)			Date of Disbursement					
C. Dave Camp For Congress			M M / D D / Y Y Y Y					
Mailing Address 5915 Eastman Avenue Suite 100			03 18 2010					
	State Zip Code MI 48640		Transaction ID : 31490083					
Purpose of Disbursement Campaign Contribution		011	Amount of Fook Dishursoment this Device					
Candidate Name	l		Amount of Each Disbursement this Period					
Rep. David Lee Camp		Category/ Type	1000.00					
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	American Academy of Neurology B	srain PAC	<i>;</i>											
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_	Full Name (Last, First, Middle Initial)						- .							
Α.	Friends Of Ginny Brown-Waite						Date of	of Dis	sburse	ment				
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	Mailing Address PO Box 865						03	_	2	4		2010		
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	Brooksville	FL	34605					ouot.	0					
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	Rep. Virginia Brown-Waite				/pe				7		7	100	00.00	
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	President	Other (spec	cify) 🔻				Gampo	aigii (20111110	ation				
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	Full Name (Last, First, Middle Initial)													
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٠.	Charles Boustany Jr. Md For Cong	ress, m	C.				Date	JI DI	buise	meni				
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	Mailing Address PO Box 80126						03	_	2	4		2010	_	
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	,	State	Zip Code				Tran	sacti	ion ID	: 315	10885			
	Lafayette Purpose of Disbursement	LA	70598											
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	Candidate Name			Cate		//	Ι.					100	00.00	
	Rep. Charles W. Boustany Jr.			Ту	/pe				7		7			
	Office Sought: House Disbursem		2009											
		Primary	General				Campa	aign (Contrib	ution	í			
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	State: LA District: 07													
	Full Name (Last, First, Middle Initial)													
C.	Braley For Congress						Date of	of Dis	sburse	ment				
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	Mailing Address PO Box 390						03	,	2	_		2010	- '	
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	City	State	Zip Code											
	Waterloo	IA	50704				Tran	sacti	ion ID	: 315	510889			
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	Rep. Bruce Braley			Cate	egory /pe	//	1.					100	0.00	
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 32 OF 33								
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NAME OF COMMITTEE (In Full)										
American Academy of Neurology B	rainPAC									
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Full Name (Last, First, Middle Initial)			Data of Diahuraamant							
A. Wyoming Values PAC			Date of Disbursement							
Mailing Address 406 Virgina Ave.			03 25 2010							
The state of the s			0 20 20 20 20 20 20 20 20 20 20 20 20 20							
City	tate Zip Code		Transaction ID - 24547764							
Alexandria	VA 22302		Transaction ID: 31517761							
Purpose of Disbursement Leadership PAC										
<u></u>		011	Amount of Each Disbursement this Pe	riod						
Candidate Name		Category/	2500.0	0						
Office Sought: House Disbursen	pont For:	Туре		_						
	Primary General		Landardia BAO							
	Other (specify)		Leadership PAC							
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Full Name (Last, First, Middle Initial)										
3. Andy Harris For Congress			Date of Disbursement							
Andy hams for congress				-						
Mailing Address PO Box 426			03 25 2010	oo.oo						
•	tate Zip Code		Transaction ID: 31517845	e of Disbursement 25						
	MD 21666									
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Rep. Andy Harris		Category/	1000.0	0						
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 33 OF 33							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)						
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NAME OF COMMITTEE (In Full)									
American Academy of Neurology E	BrainPAC								
Full Name (Last, First, Middle Initial)									
A. AAN/PA Transfer Account	Date of Disbursement								
Mailing Address 1080 Montreal Ave			03 02 2010						
,	State Zip Code		Transaction ID : 31570006						
Saint Paul Purpose of Disbursement	MN 55116								
Accidental Internal Fund Transfer on 3/2/2010		008	Amount of Each Disbursement this Po	eriod					
Candidate Name		Category/	4447.	62					
Office Sought: House Disburser	ment For:	Туре		02					
Senate	Primary General		Accidental Internal Fund Transfer on 3/	/2/2010					
President	Other (specify) ▼								
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