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FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Cooperative of American Physicians-Mutual Protection Trust (CAP-MPT) Federal PAC 333 S. Hope Street, 8th Floor ADDRESS (number and street) Check if different than previously CA 90071 Los Angeles reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00161604 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) Х (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the 11 07 2006 CA Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2006 10 2006 18 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Kirk Alan Pessner Type or Print Name of Treasurer Electronically Filed by Kirk Alan Pessner 10 19 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

F	Repor	rt Covering the Period: From:	0 1 2 0 0 6	To: 10 18 2006
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
ô.	(a)	Cash on Hand January 1		157478.93
	(b)	Cash on Hand at Begining of Reporting Period	180609.93	
	(c)	Total Receipts (from Line 19)	16625.00	91206.00
	(d)	Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	197234.93	248684.93
7.	Tot	al Disbursements (from Line 31)	8599.00	60049.00
3.	Rep	sh on Hand at Close of porting Period btract Line 7 from Line 6(d))	188635.93	188635.93
9.	the	bts and Obligations owed TO committee (Itemize all on hedule C and/or Schedule D)	0.00	
0.	the	bts and Obligations owed BY committee (Itemize all on nedule C and/or Schedule D)	0.00	

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. 02/2003) Page 3

Write or Type Committee Name

Cooperative of American Physicians-Mutual Protection Trust (CAP-MPT) Federal PAC

0 1 1^D8 м м 1 0 м м 1 0 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 13750.00 27100.00 (i) Itemized (use Schedule A) 2875.00 64106.00 (ii) Unitemized (iii) TOTAL (add 16625.00 91206.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 16625.00 91206.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 16625.00 91206.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 16625.00 91206.00 (subtract Line 18(c) from Line 19)

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
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party	0.00	0.00
3.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	8599.00	59749.00
	Independent Expenditure	0.00	0.00
5.	(use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
ь.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	300.00
	Than Political Committees	0.00	300.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	300.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
- '	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.0
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8599.00	60049.00
^	Total Foderal Disk		
2.	Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)		
	(Jubilati Lillo Z I (a)(ii) II UII Lillo JU(a)(ii)	8599.00	60049.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contribu Expendit		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other from Line 11(d), page 	′	16625.00	91206.00
34. Total Contribution Refu (from Line 28(d))		0.00	300.00
35. Net Contributions (other (subtract Line 34 from	′	16625.00	90906.00
36. Total Federal Operatin (add Line 21(a)(i) and	· '	0.00	0.00
37. Offsets to Operating E (from Line 15, page 3)		0.00	0.00
38. Net Operating Expendi (subtract Line 37 from		0.00	0.00

S	CHEDULE A (FEC Form 3X)		l la a a su a vata a ala aluda (a)	FOR LINE NUMBER: PAGE 6 / 26
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
<u>~</u>	NAME OF COMMITTEE (In Full)	arro arro acc	areas or any political committee to	Solicit Contributions from Such Committee.
$ \rangle$	Cooperative of American Physicians-Mu	itual Protec	ction Trust (CAP-MPT) Fodo	ral PAC
	Cooperative of American Physicians Wil	itaar i Toto	Short trast (O/th Will 1) I cae	141770
_	Full Name (Last, First, Middle Initial)			
Α.				Date of Receipt
	Mailing Address 12314 Charlwood St			10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5053
	Cerritos	CA	90703	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		250.00
	Name of European	10		_
	Name of Employer Erlinda Abcede, MD	Occupation Physician		
	Receipt For:	<u> </u>	Year-to-Date ▼	-
	Primary General	7 1991 09410	Tour to Buto V	1
	Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial)			Data of Bassist
В.	Javeed Ahmed, MD Mailing Address 44835 N Date Ave			Date of Receipt
	Mailing Address 44835 N Date Ave			10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5050
	Lancaster	CA	93534	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer	Occupation	<u> </u>	7
	Javeed Ahmed, MD	Physiciar		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)		250.00	
_	Full Name (Leat First Middle Initial)			+
C.	Full Name (Last, First, Middle Initial) Florante Alejo, MD			Date of Receipt
	Mailing Address 282 E Sepulveda Blvd			M M / D D / Y Y Y Y
	-			10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5087
	Carson	CA	90745	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	rederal political committee.			
	Name of Employer Florante Alejo, MD	Occupation		
		Physiciar		4
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	250.00	
	Suite (Speeding) \		0 0 0 0 0 0 0	
Г	I			
s	UBTOTAL of Receipts This Page (optional)			750.00
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/26
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Sta	tements may	unot be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Cooperative of American Physicians-Mu	utual Prote	ction Trust (CAP-MPT) Fede	ral PAC
Full Name (Last, First, Middle Initial) M. Aslam Barra, MD			Date of Receipt
Mailing Address 930 Sunnyslope Rd Ste	E-1		10
City	State	Zip Code	Transaction ID: 11ai5095
<u>Hollister</u>	CA	95023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer M. Aslam Barra, MD	Occupation Physician		
Receipt For:		e Year-to-Date ▼	7
Primary General		450.00	1
Other (specify)	0 0	450.00	
Full Name (Last, First, Middle Initial) John Bornstein, MD			Date of Receipt
Mailing Address 4330 Meadow View Place	ce		10 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 11ai5084
<u>Encino</u>	CA	91436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer John Bornstein, MD	Occupation	n	
	Physicia		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		350.00	
Full Name (Last, First, Middle Initial)			_
Regis Britto, MD			Date of Receipt
Mailing Address 3723 Green Haven Lane)		10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 11ai5098
Redding	CA	96001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Regis Britto, MD	Occupation		7
	Physicia		
Receipt For:	Aggregate	e Year-to-Date ▼	.
Primary General Other (specify)		250.00	
Culoi (apeoliy) 🔻	0 0	0 0 0 0 0 0 0	
SUBTOTAL of Receipts This Page (optional)			750.00
TOTAL This Period (last nage this line number or	alv)		

COUEDING A (FEC Forms OV)]		FOR LINE NUMBER: PAGE 8 / 26
51	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
\rangle	Cooperative of American Physicians-Mu	utual Protec	ction Trust (CAP-MPT) Fede	ral PAC
Α.	Full Name (Last, First, Middle Initial) David Chapman, MD			Date of Receipt
	Mailing Address 1050 E Yorba Linda Blv	d #10		10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5041
	Placentia	CA	92870	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer David Chapman, MD	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		150,00	1
	Other (specify)		450.00	
В.	Full Name (Last, First, Middle Initial) Jitka Civrna, MD			Date of Receipt
	Mailing Address 74000 Country Club Dr	10 06 YYYY 10 06 2006		
	City	State	Zip Code	
	Palm Desert	CA	92260	Transaction ID: 11ai5045
		CA	92200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Jitka Civrna, MD	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		050.00	1
	Other (specify) ▼		350.00	
_	Full Name (Last, First, Middle Initial)			
C.	John Cole, MD			Date of Receipt
	Mailing Address 3801 Katella Ave #416			10 11 YYYYY 10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5106
	Los Alamitos	CA	90720	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer John Cole, MD	Occupation Physician		
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General	33 -3-11		1
	Other (specify)	1	250.00	
				4
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s	UBTOTAL of Receipts This Page (optional)			750.00
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COUEDINE A /EEC Form 2V)				FOR LINE NUMBER: PAGE 9 / 26	
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)	
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۸۰	y information copied from such Reports and Sta	tomonto mov	ract be cold or used by any person		
or	for commercial purposes, other than using the n	name and add	lress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	Cooperative of American Physicians-Mu	utual Proted	ction Trust (CAP-MPT) Fede	ral PAC	
Α.	Full Name (Last, First, Middle Initial) David Collins, MD			Date of Receipt	
	Mailing Address 4430 Arista Dr			10 06 2006	
	City	State	Zip Code	Transaction ID: 11ai5043	
	San Diego	CA	92103	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer David Collins, MD	Occupation Physician			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		050,00	1	
	Other (specify) ▼		250.00		
В.	Full Name (Last, First, Middle Initial) Harry Cozen, MD			Date of Receipt	
	Mailing Address 2644 Lakewood Pl		M M / D D / Y Y Y Y		
				10 06 2006	
	City	State	Zip Code	Transaction ID: 11ai5055	
	Westlake Village	CA	91361	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Harry Cozen, MD	Occupation Physician			
	Receipt For:		Year-to-Date ▼		
	Primary General	/ iggi ogalo	Tour to Buto V	1	
	Other (specify)		250.00		
				1	
<u>с.</u>	Full Name (Last, First, Middle Initial) Robert Cushing, MD			Date of Receipt	
	Mailing Address 25781 Tierra Grande			10 11 2006	
	City	State	Zip Code	Transaction ID: 11ai5089	
	Carmel	CA	93923	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Robert Cushing, MD	Occupation Physician		7	
	Receipt For:		Year-to-Date ▼		
	Primary General	33 13111		1	
	Other (specify)	1	450.00		
				1	
_	UBTOTAL of Receipts This Page (optional)			750.00	
hill	ODITIAL OF NECERIES THIS Page (OPHOHAI)				

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 10 / 26
	·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, 0	13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	on for the purpose of soliciting contributions
Oi		arie ariu auc	aress or any political committee to	Solicit contributions from Such committee.
	NAME OF COMMITTEE (In Full)	ational Director	-+: T+ (OAD MDT)	I DAG
\angle	Cooperative of American Physicians-Mu	ituai Proted	ction Trust (CAP-MPT) Fede	ral PAC
Α.	Full Name (Last, First, Middle Initial) Francisco Diaz, MD			Date of Receipt
	Mailing Address 1550 Pepper Dr #D			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 11ai5104
	El Centro	CA	92243	Amount of Each Receipt this Period
			OLL IO	
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Francisco Diaz, MD	Occupation Physician		7
	Receipt For:		Year-to-Date ▼	_
	Primary General	1 999		1
	Other (specify) ▼	1	450.00	
В.	Full Name (Last, First, Middle Initial) Joshua Feder, MD			Date of Receipt
	Mailing Address 415 North Hwy 101 #E			M M / D D / Y Y Y
				10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5040
	Solana Beach	CA	92075	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.			
	Name of Employer	Occupation	1	
	Joshua Fedér, MD	Physiciar		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		450.00	
	Other (specify)			
<u> </u>	Full Name (Last, First, Middle Initial) Bernard Feldman, MD			Data of Daggint
O.	Mailing Address 351 Hospital Rd #316			Date of Receipt
	331 Hospital Nu #310			10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5094
	Newport Beach	CA	92663	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		230.00
	Name of Employer Bernard Feldman, MD	Occupation		
		Physician		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		350.00	
	Callot (opcour)) 🔻		0 0 0 0 0 0 0	1
٩	UBTOTAL of Receipts This Page (optional)			750.00
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COUEDING A (FEC Form OV)				FOR LINE NUMBER: PAGE 11 / 26
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	y information copied from such Reports and Sta	tements may	not he sold or used by any nerso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	Cooperative of American Physicians-Mu	ıtual Proteo	ction Trust (CAP-MPT) Fede	ral PAC
Α.	Full Name (Last, First, Middle Initial) Richard Fischel, MD			Date of Receipt
	Mailing Address 2601 E Chapman Ave			10 10 2006
	City	State	Zip Code	Transaction ID: 11ai5078
	Orange	CA	92869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Richard Fischel, MD	Occupation Physician		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	1050.00	1
	Other (specify) ▼		1250.00	
В.	Full Name (Last, First, Middle Initial) Michael Friedman, MD			Date of Receipt
	Mailing Address 4201 Torrance Blvd #66	0		10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5057
	Torrance	CA	90503	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Michael Friedman, MD	Occupation Physician		
	Receipt For:		Year-to-Date ▼	
	Primary General		450.00	1
	Other (specify)		450.00	
_	Full Name (Last, First, Middle Initial)			
C.	Michael Gales, MD			Date of Receipt
	Mailing Address 11847 Wilshire Ste #303	3		10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5042
	Los Angeles	CA	90025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Michael Gales, MD	Occupation Physician		7
	Receipt For:	<u> </u>	Year-to-Date ▼	\dashv
	Primary General	, iggregate	, i.d., to Date ¥	1
	Other (specify)		400.00	
		-		1
s	UBTOTAL of Receipts This Page (optional)			700.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 26
ıT	EMIZED RECEIPTS		or each category of the	(check only one)
11	II EIVIIZED NECEIP I 3		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
01	NAME OF COMMITTEE (In Full)	ine and add	aress or any political committee to	Solicit contributions from such committee.
$ \rangle$	Cooperative of American Physicians-Mut	ual Prote	ction Trust (CAP-MPT) Fede	eral PAC
\angle				
Α.	Full Name (Last, First, Middle Initial) Michael Gales, MD			Date of Receipt
	Mailing Address 11847 Wilshire Ste #303			M M / D D / Y Y Y Y
				10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5097
	Los Angeles	CA	90025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Michael Gales, MD	Occupation		7
	Receipt For:	Physician	n e Year-to-Date ▼	_
	Primary General	Aggregate	, real to Bate ¥	1
	Other (specify) ▼	l	400.00	
				Al .
В.	Full Name (Last, First, Middle Initial) Michael Gazzaniga, MD			Date of Receipt
	Mailing Address 301 W Bastanchury #180)		M M / D D / Y Y Y Y
	City	Ctoto	Zin Code	10 10 2006
	City Fullerton	State CA	Zip Code 92835	Transaction ID: 11ai5077
		CA	92833	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer	Occupatio	n	7
	Michael Gazzańiga, MD	Physicia	ı	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	
	Cuter (openity)	0 0		
_	Full Name (Last, First, Middle Initial)			1 8. 78
C.	Molly Hanson, MD Mailing Address 790 E Bonita Ave 2nd Flo			Date of Receipt
	Walling Address 790 E Bonita Ave 2nd Fit	oor		10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5086
	Pomona	CA	91767	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Molly Hanson, MD	Occupation Physician		
	Receipt For:	•	Year-to-Date ▼	_
	Primary General			1
	Other (specify) ▼		450.00	
_				
_	UDTOTAL «(Describe Till Describe Till Descri			700.00
L _s	UBTOTAL of Receipts This Page (optional))	

0	CHEDIII E A (EEC Form 2V)			FOR LINE NUMBER: PAGE 13 / 26
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ΙT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any pers	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	Cooperative of American Physicians-Mo	utual Proted	ction Trust (CAP-MPT) Fede	eral PAC
_	Full Name (Last, First, Middle Initial)			
A.	James Heaps, MD			Date of Receipt
	Mailing Address 20659 Chatsboro Dr			M M / D D / Y Y Y Y
				10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5054
	Woodland Hills	CA	91364	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		250.00
	Name of Employer James Heaps, MD	Occupation		
	Pagaint For:	Physician		_
	Receipt For: Primary General	Aygregate	Year-to-Date ▼	-
	Other (specify)		250.00	
	Care (opean)) \	0 0	1 1 1 1 1 1 1	
— В.	Full Name (Last, First, Middle Initial)			Data of Descript
Ь.	David Heskiaoff, MD Mailing Address 5170 Sepulveda Blvd #	100		Date of Receipt
	Walling Address 5170 Sepulveda Bivd #	100		10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5103
	Sherman Oaks	CA	91403	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Familian	10		_
	Name of Employer David Heskiaoff, MD	Occupation		
	Receipt For:	Physician	· Year-to-Date ▼	_
	Primary General	Ayyreyale	rear-to-date V	7
	Other (specify)		450.00	
		0 0		-
<u> </u>	Full Name (Last, First, Middle Initial) Thomas Huang, MD			Date of Receipt
٥.	Mailing Address 10197 Overhill Dr			M M / D D / Y Y Y Y
	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			10 10 2006
	City	State	Zip Code	Transaction ID: 11ai5080
	Santa Ana	CA	92705	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	C		230.00
	Name of Employer Thomas Huang, MD	Occupation		
		Physiciar		
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Primary General	' '	250.00	1
	Other (specify)	0 0		1
_	UDTOTAL of December Title Day (1997)			750.00
L	UBTOTAL of Receipts This Page (optional)		 	
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 26
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Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	Cooperative of American Physicians-Mut	ual Protec	ction Trust (CAP-MPT) Fede	ral PAC
۹.	Full Name (Last, First, Middle Initial) Harold Kaplan, MD			Date of Receipt
	Mailing Address 3640 Lomita Blvd #106			10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 11ai5074
	Torrance	CA	90505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Harold Kaplan, MD	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		450.00	
3.	Full Name (Last, First, Middle Initial) Dolores Kent, MD			Date of Receipt
	Mailing Address 9201 Sunset Blvd #406			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 11ai5073
	Los Angeles	CA	90069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Dolores Kent, MD	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
).	Full Name (Last, First, Middle Initial) Neil Klein, MD			Date of Receipt
	Mailing Address 11480 Brookshire Ave #3	806		10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5102
	Downey	CA	90241	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Neil Klein, MD	Occupation Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		450.00	
s	UBTOTAL of Receipts This Page (optional)			750.00
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COUEDINE A /EEC Form 2V)				OR LINE NUMBER: PAGE 15/26						
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12						
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Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions						
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.						
\setminus	NAME OF COMMITTEE (In Full)									
	Cooperative of American Physicians-M	utual Proted	ction Trust (CAP-MPT) Fede	eral PAC						
Α.	Full Name (Last, First, Middle Initial) Inna Lamport, MD			Date of Receipt						
	Mailing Address 1211 Brunswick Ave			10 10 2006						
	City	State	Zip Code	Transaction ID: 11ai5076						
	South Pasadena	CA	91030	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Inna Lamport, MD	Occupation Physician								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		350.00							
	Other (specify)	0 0		_						
— В.	Full Name (Last, First, Middle Initial) Charles Law, MD			Date of Receipt						
	Mailing Address 3959 Laurel Canyon Blv	/d #1		M M / D D / Y Y Y Y						
				10 06 2006						
	City	State	Zip Code	Transaction ID: 11ai5064						
	Studio City	CA	91604	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		250.00						
	federal political committee.	<u> </u>								
	Name of Employer	Occupation	1	\neg						
	Charles Law, MD	Physiciar	1							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		450.00	7						
	Other (specify)		+50.00	_						
_	Full Name (Last, First, Middle Initial) Steven Lee, MD			Date of Receipt						
J .	Mailing Address 167 El Pinar			M M / D D / Y Y Y Y						
	Walling / Raises 107 ETT IIIai			10 10 2006						
	City	State	Zip Code	Transaction ID: 11ai5072						
	La Selva Beach	CA	95076	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		50.00						
	Name of Employer Steven Lee, MD	Occupation Physician								
	Receipt For:	<u> </u>	Year-to-Date ▼							
	Primary General	111		7						
	Other (specify)		250.00							
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				550.00						
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SCHEDULE A (FEC Form 3X)			Llea coparata cabadula(s)	FOR LINE NUMBER: PAGE 16 / 26						
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)						
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or	ny information copied from such Reports and Stator for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.						
Λ	NAME OF COMMITTEE (In Full)									
\angle	Cooperative of American Physicians-Mu	utual Proted	ction Trust (CAP-MPT) Fede	eral PAC						
A.	Full Name (Last, First, Middle Initial) Howard Leventhal, MD			Date of Receipt						
	Mailing Address 2200 Haggin Oaks Dr			10 11 2006						
	City	State	Zip Code	Transaction ID: 11ai5108						
	Bakersfield	CA	93311	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		250.00						
	Name of Employer Howard Leventhal, MD	Occupation Physician								
	Receipt For:		Year-to-Date ▼							
	Primary General		450.00	1						
	Other (specify) ▼		450.00							
В.	Full Name (Last, First, Middle Initial) Stephen Lindsay, MD			Date of Receipt						
	Mailing Address 447 Old Newport Blvd #	210		M M / D D / Y Y Y Y						
				10 06 2006						
City		State	Zip Code	Transaction ID: 11ai5056						
	Newport Beach	CA	92663	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		250.00						
	Name of Employer Stephen Lindsay, MD	Occupation Physician								
	Receipt For:		Year-to-Date ▼							
	Primary General	1 1	250.00	1						
	Other (specify) 🔻		250.00							
C.	Full Name (Last, First, Middle Initial) Warren Line, MD			Date of Receipt						
	Mailing Address 4418 Vineland Ave #202	2		10 06 YYYYY 10 06 2006						
	City	State	Zip Code	Transaction ID: 11ai5066						
	North Hollywood	CA	91602	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee. Name of Employer Warren Line, MD Receipt For: Occupation Physician Aggregate		C		250.00						
		Year-to-Date ▼								
Primary General				1						
	Other (specify)		250.00							
s	UBTOTAL of Receipts This Page (optional)	750.00								
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Ιт	OTAL This Period (last page this line number of	nlv)								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 26 (check only one)									
IT	EMIZED RECEIPTS		or each category of the										
TI EIMIEED TIEGEN 10			Detailed Summary Page	X 11a 11b 11c 12									
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add			not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.									
abla	NAME OF COMMITTEE (In Full)												
\rangle	Cooperative of American Physicians-Mut	tual Prote	ction Trust (CAP-MPT) Fede	ral PAC									
Α.	Full Name (Last, First, Middle Initial) Edward Littlejohn, MD			Date of Receipt									
	Mailing Address 14911 National Ave #3			10 06 7 2006									
	City	State	Zip Code	Transaction ID: 11ai5038									
	Los Gatos	CA	95032	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		250.00									
	Name of Employer Edward Littlejohn, MD	Occupation Physician		7									
	Receipt For:		e Year-to-Date ▼	_									
	Primary General	7.99.094.0		1									
	Other (specify) ▼		550.00										
В.	Full Name (Last, First, Middle Initial) Kalpana Maniktala, MD			Date of Receipt									
	Mailing Address 4419 Van Nuys Blvd #20	10 06 YYYY 2006											
	City	State	Transaction ID: 11ai5049										
	Sherman Oaks	CA	91403	Amount of Each Receipt this Period									
	FEC ID number of contributing												
	federal political committee.	C		250.00									
	Name of Employer Kalpana Maniktala, MD	Occupation Physician											
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General			1									
	Other (specify) ▼	0 0	350.00										
<u>с</u> .	Full Name (Last, First, Middle Initial) Alan Marco, MD			Date of Receipt									
	Mailing Address 5007 Roma Ct			10 06 2006									
	City	State	Zip Code	Transaction ID: 11ai5058									
	Marina Del Rey	CA	90292	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		250.00									
	Name of Employer Alan Marco, MD	Occupation Physician		7									
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 450.00										
s	UBTOTAL of Receipts This Page (optional)			750.00									
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 26 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	Cooperative of American Physicians-Mu	tual Proted	ction Trust (CAP-MPT) Fede	eral PAC
Α.	Full Name (Last, First, Middle Initial) Catherine Oyejide, MD			Date of Receipt
	Mailing Address 27392 Via Santillana Dr			10 06 2006
	City	State	Zip Code	Transaction ID: 11ai5061
	Mission Viejo	CA	92692	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Catherine Oyejide, MD	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	
— В.	Full Name (Last, First, Middle Initial) Sandra Petersen, MD			Date of Receipt
	Mailing Address 2909 Brant St			10 11 2006
	City	State	Zip Code	Transaction ID: 11ai5109
	San Diego	CA	92103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Sandra Petersen, MD	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Vodur Reddy, MD			Date of Receipt
	Mailing Address 16017 Tuscola Rd #D			10 11 2006
	City Apple Valley	State CA	Zip Code 92307	Transaction ID: 11ai5107 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Vodur Reddy, MD	Occupation Physician		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 26 (check only one)						
ITEMIZED RECEIPTS			or each category of the							
II LIVIIZED NECEIF 13			Detailed Summary Page	X 11a 11b 11c 12						
			, G	13 14 15 16 17						
Ar or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
abla	NAME OF COMMITTEE (In Full)									
\rangle	Cooperative of American Physicians-Mu	tual Prote	ction Trust (CAP-MPT) Fede	ral PAC						
Α.	Full Name (Last, First, Middle Initial) Stephen Schmones, MD			Date of Receipt						
	Mailing Address 2625 W Alameda St #41	0		10 11 2006						
	City	State	Zip Code	Transaction ID: 11ai5101						
	Burbank	CA	91505	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Stephen Schmones, MD	Occupation Physician		7						
	Receipt For:	Aggregate	e Year-to-Date ▼	7						
	Primary General	33 3		1						
	Other (specify) ▼		250.00							
_	Full Name (Last, First, Middle Initial)									
В.	Ernest Schreiber, MD			Date of Receipt						
	Mailing Address 856 8th St			10 06 2006						
	City	State	Zip Code	Transaction ID: 11ai5047						
	Manhattan Beach	CA	90266	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Ernest Schreiber, MD	Occupation Physician		7						
	Receipt For:		e Year-to-Date ▼							
	Primary General	7 1991 09411	. our to but t	1						
	Other (specify) ▼	0 0	250.00							
<u> </u>	Full Name (Last, First, Middle Initial) Susan Sheridan, MD			Date of Receipt						
	Mailing Address 2037 Upland St			10 06 2006						
	City	State	Zip Code	Transaction ID: 11ai5052						
	Rancho Palos Verde	CA	90275	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.		C		100.00						
	Name of Employer Susan Sheridan, MD	Occupation Physician		7						
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 300.00							
s	UBTOTAL of Receipts This Page (optional)			600.00						
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SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 20 / 26						
•			Use separate schedule(s) or each category of the	(check only one)						
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions						
\	NAME OF COMMITTEE (In Full)	aric and add	ress of any political committee to	Solicit Contributions from Such Committee.						
	Cooperative of American Physicians-Mu	tual Proto	ation Trust (CAR MRT) Fodo	rol BAC						
	Cooperative of American Physicians-Mu	luai Fiolet	Stion Trust (CAP-MPT) Fede	Idi PAC						
<u>/</u>	Full Name (Last, First, Middle Initial)									
A.	, , , , , , , , , , , , , , , , , , , ,			Date of Receipt						
	Mailing Address 1350 West 6th St #2			10 11 2006						
	City	State	Zip Code	Transaction ID: 11ai5105						
	San Pedro	CA	90732							
		<u> </u>	90732	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
	Name of Employer Richard Smith, MD	Occupation	1	7						
	Richard Smith, MD	Physiciar	1							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		450.00							
	Other (specify) ▼		450.00							
	Full Name (Last, First, Middle Initial)									
В.				Date of Receipt						
	Mailing Address 5443 Snyder Lane			10 06 2006						
	City	State	Zip Code							
	Rohnert Park	CA	94928	Transaction ID: 11ai5037 Amount of Each Receipt this Period						
			34320	Amount of Each Receipt this Feriod						
	FEC ID number of contributing federal political committee.	C		250.00						
		0 11								
	Name of Employer Helene Spivak, MD	Occupation								
	Receipt For:	Physician	ı Year-to-Date ▼	_						
	Primary General	Aggregate	rear-to-Date V							
	Other (specify)		250.00							
С.	Full Name (Last, First, Middle Initial) Shakuntala Swaminathan, MD			Date of Receipt						
	Mailing Address 3011 Nichols Canyon Ro	l		M M / D D / Y Y Y Y						
	,			10 11 2006						
	City	State	Zip Code	Transaction ID: 11ai5092						
	Los Angeles	CA	90046	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.00						
rederal political committee.										
	Name of Employer Shakuntala Swaminathan,	Occupation								
	<u>MD</u>	Physician		4						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		250.00							
	Chici (opcoii) \		0 0 0 0 0 0 0							
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s	UBTOTAL of Receipts This Page (optional)			750.00						
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 26							
	EMIZED RECEIPTS		or each category of the	(check only one)							
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_				13 14 15 16 17							
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	on not be sold or used by any person Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.							
abla	NAME OF COMMITTEE (In Full)										
\rangle	Cooperative of American Physicians-Mu	tual Proted	ction Trust (CAP-MPT) Fede	ral PAC							
Α.	Full Name (Last, First, Middle Initial) Hoong-yee Tang, MD			Date of Receipt							
	Mailing Address 20405 Covina Hills Rd.			10 06 7 2006							
	City	State	Zip Code	Transaction ID: 11ai5060							
	Covina	CA	91724	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.00							
	Name of Employer Hoong-Yee Tang, MD	Occupation Physician									
	Receipt For:		Year-to-Date ▼	_							
	Primary General			1							
	Other (specify) ▼		1000.00								
В.	Full Name (Last, First, Middle Initial) Rodney Teichner, MD			Date of Receipt							
	Mailing Address 11847 Gorham Ave #20.	10 11 2006									
	City	State	Zip Code	Transaction ID: 11ai5111							
	Los Angeles		90049	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		100.00							
	Name of Employer Rodney Teichner, MD	Occupation Physician									
	Receipt For:		Year-to-Date ▼								
	Primary General Other (specify) ▼		300.00								
_	Full Name (Last, First, Middle Initial)										
C.	Ivan Thomas, MD			Date of Receipt							
	Mailing Address 2080 Century Park East	#501		10 11 2006							
	City	State	Zip Code	Transaction ID: 11ai5093							
	Los Angeles	CA	90067	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.			250.00							
	Name of Employer Ivan Thomas, MD	Occupation Physician									
	Receipt For:		Year-to-Date ▼								
	Primary General			1							
	Other (specify) ▼		250.00								
Г											
s	UBTOTAL of Receipts This Page (optional)		······	850.00							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may not be sold or used by any perso ame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Cooperative of American Physicians-Mu	tual Protection Trust (CAP-MPT) Fede	ral PAC
Full Name (Last, First, Middle Initial) Jeffrey Trop, MD Mailing Address 12401 Wilshire Blvd #30 City Los Angeles	6 State Zip Code CA 90025	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Jeffrey Trop, MD Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Eduardo Vergara, MD Mailing Address 2039 Forest Ave #205 A City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
San Jose FEC ID number of contributing federal political committee.	CA 95128	Amount of Each Receipt this Period 250.00
Name of Employer Eduardo Vergara, MD Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Patrick Wade, MD Mailing Address 1461 E Chevy Chase Dr	#101	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Glendale FEC ID number of contributing federal political committee. Name of Employer Patrick Wade, MD Receipt For: Primary General	State Zip Code CA 91206 C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: 11ai5067 Amount of Each Receipt this Period 500.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)		1000.00

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) Cooperative of American Physicians-Mu	ıtual Prote	ction Trust (CAP-MPT) Fede	ral PAC
Α.	Full Name (Last, First, Middle Initial) Robert Watts, MD			Date of Receipt
	Mailing Address 3001 High St #D			10
	City Oakland	State CA	Zip Code 94619	Transaction ID: 11ai5085 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Robert Watts, MD	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Tay Weinman, MD			Date of Receipt
	Mailing Address PO Box 1071			10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 11ai5110
	San Pedro	CA	90733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Tay Weinman, MD	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
<u> </u>	Full Name (Last, First, Middle Initial) Joel Widelitz, MD			Date of Receipt
	Mailing Address 10861 Cherry St #305			10 06 YYYYY 2006
	City	State	Zip Code	Transaction ID: 11ai5046
	Los Alamitos	CA	90740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Joel Widelitz, MD	Occupation Physician		
	Receipt For:	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)			600.00

TOTAL This Period (last page this line number only)

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

PAGE 24 / 26 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 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) Cooperative of American Physicians-Mutual Protection Trust (CAP-MPT) Federal PAC Full Name (Last, First, Middle Initial) Richard Yadley, MD Date of Receipt Mailing Address 256 S Marengo Ave 10 12 2006 City State Zip Code Transaction ID: 11ai5112 Pasadena CA 91101 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Richard Yadley, MD Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert Yun, MD Date of Receipt Mailing Address 22353 N Summit Ridge Cir 06 2006 City Zip Code State Transaction ID: 11ai5069 Chatsworth CA 91311 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Robert Yun, MD Occupation Physician Receipt For: Aggregate Year-to-Date ▼

250.00

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	•	13750.00

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X)					FOR LINE NUMBER: PAGE 25 / 26								26			
ITEMIZED DISBURSEMENTS		Use seperate schedule(s) for each category of the						y one)								
"	EMIZED DISBURSEMENTS		Summary Page			211	· [22	Х	23		24		25		26
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L	Cooperative of American Physicians-Mutua	ai Protectio	on trust (CAP	-IVIF	- 1) rea	erai	PAC								
Α.	Full Name (Last, First, Middle Initial) Brian Bilbray for Congress							Trans		-	_		85			
	Brian Bilbray for Congress							Date of	_				Y	YY	Υ	
	Mailing Address PO Box 455							1 0	_	L	0 6		2	žοŏ	6	
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	Brian Bilbray				T	ype										
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	State: CA District: 50] (-	, / ∀													
_	Full Name (Last, First, Middle Initial)							Trans	acti	ion ΙΣ): B	2339	90			
В.	Dreier for Congress Committee							Date	of D	isburs	sem	ent				
	Mailing Address P.O. Box 505							1 ^M 0	М	/ D	0 4		Y 2	žοŏ	6 Y	
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	City Upland	State CA	Zip Code 91785					Amou	ınt o	f Eacl	h Di	isbur	semer	nt this	Perio	d
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C.	Full Name (Last, First, Middle Initial)							Trans					87			
Ο.	Friends for Mike McGavick							Date of	of Di				V ,	v • v	V	
	Mailing Address Post Office Box 9247							1 0	IVI		0 6		, 2	ŽOĎ	6 '	
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SCHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)	FOR LINE N (check only		26 / 26
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 28a 28b 28c	25 26 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Cooperative of American Physicians-Mutua	•••			
Full Name (Last, First, Middle Initial) Madrid for Congress Mailing Address Post Office Box 25626			Transaction ID: B23389 Date of Disbursement	Ž 0 0 6 °
•	State Zip Code NM 87125		Amount of Each Disbursemen	nt this Period
Purpose of Disbursement Political Contribution Candidate Name		011 Category/		99.00
Patricia Madrid Office Sought: X House Senate President State: NM District: 01	ment For: 2006 Primary X General Other (specify)	Туре		
Full Name (Last, First, Middle Initial) 3. Pombo for Congress			Transaction ID: B23388 Date of Disbursement	
Mailing Address 1707 Prince Street, #5			10	2006
,	State Zip Code VA 22314		Amount of Each Disbursemen	nt this Period
Political Contribution Candidate Name Richard Pombo	C	011 Category/ Type		
Office Sought: X House Senate President State: CA District: 11	ment For: 2006 Primary X General Other (specify)	,,		
Full Name (Last, First, Middle Initial) Tom Kean for U S Senate			Transaction ID: B23386 Date of Disbursement	V V
Mailing Address 187 Mill Lane			10 O 6 Y 2	2006
•	State Zip Code NJ 07092		Amount of Each Disbursemen	
Purpose of Disbursement Political Contribution		011		2000.00
Candidate Name Tom Kean		Category/ Type		
Office Sought: House Disburse	nent For: 2006 Primary X General Other (specify)			
SUBTOTAL of Disbursements This Page (optional) .		<u></u>		3599.00
TOTAL This Period (last page this line number only)				3599.00