

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 America's Physician Groups PAC

ADDRESS (number and street) 915 WILSHIRE BLVD SUITE 1620 Check if different than previously reported. (ACC) LOS ANGELES CA 90017

2. FEC IDENTIFICATION NUMBER C C00461756 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 09 / 01 / 2020 through 09 / 30 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Robinette, Shelley, Ms., Type or Print Name of Treasurer

Signature of Treasurer Robinette, Shelley, Ms., [Electronically Filed] Date 10 / 20 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

America's Physician Groups PAC

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2020"/>  |                         | 174643.47                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 163489.39               |                                   |
| (c) Total Receipts (from Line 19) .....  | 1.68                    | 61.60                             |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 163491.07               | 174705.07                         |
| 7. Total Disbursements (from Line 31).....   | 6486.75                 | 17700.75                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 157004.32               | 157004.32                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**America's Physician Groups PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 09 / 01 / 2020 To: M M / D D / Y Y Y Y 09 / 30 / 2020

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 0.00                          | 0.00                              |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 0.00                          | 0.00                              |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 1.68                          | 61.60                             |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 1.68                          | 61.60                             |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 1.68                          | 61.60                             |

**DETAILED SUMMARY PAGE**

of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 486.75                        | 1700.75                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 486.75                        | 1700.75                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 6000.00                       | 16000.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 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 (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(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                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 6486.75                       | 17700.75                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 6486.75                       | 17700.75                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 0.00                                  | 0.00                                      |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 0.00                                  | 0.00                                      |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 486.75                                | 1700.75                                   |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 486.75                                | 1700.75                                   |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)  
**America's Physician Groups PAC**

**A. Merrill Lynch**

Full Name (Last, First, Middle Initial)

Mailing Address 100 Spectrum Center Dr  
Ste 1100

City Irvine State CA Zip Code 92618-4978

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 09 / 03 / 2020

FEC Identification Number C

Transaction ID : BFFCD7F51C

Amount of Each Disbursement this Period 26.75

Memo Item

**B. IRS**

Full Name (Last, First, Middle Initial)

Mailing Address 1111 Constitution Avenue NW

City Washington State DC Zip Code 20224-0001

Purpose of Disbursement 2019 Tax Payment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 09 / 18 / 2020

FEC Identification Number C

Transaction ID : BCC1CF16DE

Amount of Each Disbursement this Period 460.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 486.75 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 486.75 |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

**A. PEOPLE FOR PATTY MURRAY**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1602 Belle View Boulevard #510  
Attn: Tracey Buckman

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 23    |   | 2020      |

City Alexandria State VA Zip Code 22307-6531

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

|   |           |
|---|-----------|
| C | C00257642 |
|---|-----------|

Candidate Name  
**Murray, Patty, , Sen.,**

**Transaction ID : B97F7A5B6E**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: WA District:

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

**B. MCCONNELL SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1496

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 21    |   | 2020      |

City LOUISVILLE State KY Zip Code 40201

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

|   |           |
|---|-----------|
| C | C00193342 |
|---|-----------|

**Transaction ID : B6614544583**

Amount of Each Disbursement this Period

Candidate Name  
**Mcconnell, Mitch, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: KY District:

|         |
|---------|
| 2500.00 |
|---------|

Memo Item

**C. MARCO RUBIO FOR SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 661537

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 21    |   | 2020      |

City MIAMI State FL Zip Code 33266

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

|   |           |
|---|-----------|
| C | C00620518 |
|---|-----------|

**Transaction ID : BA1225CC2E**

Amount of Each Disbursement this Period

Candidate Name  
**Rubio, Marco, , Sen.,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District:

|         |
|---------|
| 1500.00 |
|---------|

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

|         |
|---------|
| 5000.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**America's Physician Groups PAC**

**A. TEAM RICK SCOTT**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 76024

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement Contribution to Committee

Candidate Name **TEAM RICK SCOTT**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) Other

Date of Disbursement: 09 / 21 / 2020

FEC Identification Number: C00692343  
Transaction ID : B7F9E8674D  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify)

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify)

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 6000.00 |