

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="421124.18"/>	<input type="text" value="421124.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="313043.23"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9370.98"/>	<input type="text" value="557495.03"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="322414.21"/>	<input type="text" value="978619.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="115453.45"/>	<input type="text" value="771658.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="206960.76"/>	<input type="text" value="206960.76"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee (SkinPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8090.98	485249.27
(ii) Unitemized	1280.00	72245.76
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9370.98	557495.03
(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)	9370.98	557495.03
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.).....	0.00	0.00
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))..... ▶	9370.98	557495.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9370.98	557495.03

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) 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	453.45	13528.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	453.45	13528.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	115000.00	745500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	12630.00
(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	12630.00
29. Other Disbursements	0.00	0.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	115453.45	771658.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	115453.45	771658.45

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
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9370.98	557495.03
34. Total Contribution Refunds (from Line 28(d))	0.00	12630.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9370.98	544865.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	453.45	13528.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	453.45	13528.45

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. William Abramovits
Full Name (Last, First, Middle Initial)
Mailing Address 17228 Lechlade Ln
City Dallas State TX Zip Code 75252-4208
FEC ID number of contributing federal political committee. **C**
Name of Employer Dermatology Treatment & Research Cente Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt **10 / 26 / 2012**
Transaction ID : C_999
Amount of Each Receipt this Period 250.00

B. Scott D. Bennion
Full Name (Last, First, Middle Initial)
Mailing Address 2800 Garden Creek Rd
City Casper State WY Zip Code 82601-6600
FEC ID number of contributing federal political committee. **C**
Name of Employer Central Wyoming Skin Clinic Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2300.00

Date of Receipt **11 / 15 / 2012**
Transaction ID : C_978
Amount of Each Receipt this Period 100.00

C. Diane M. Bernardi
Full Name (Last, First, Middle Initial)
Mailing Address 3613 Torch Lake Dr
City Fort Wayne State IN Zip Code 46804-6923
FEC ID number of contributing federal political committee. **C**
Name of Employer Fort Wayne Dermatology Consultants Occupation Dermatologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1600.00

Date of Receipt **10 / 30 / 2012**
Transaction ID : C_993
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)..... **550.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Clarence William Brown Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 6049 N Claremont Ave
 City Chicago State IL Zip Code 60659-5257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ Dermatology Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **550.00**

Date of Receipt **11 / 15 / 2012**
Transaction ID : C_976
 Amount of Each Receipt this Period **50.00**

B. F. William Danby
 Full Name (Last, First, Middle Initial)
 Mailing Address 860 Sugar Hill Rd
 City Hopkinton State NH Zip Code 03229-2223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Dermatologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **212.94**

Date of Receipt **11 / 15 / 2012**
Transaction ID : C_975
 Amount of Each Receipt this Period **30.42**

C. Virginia Rutledge Forney
 Full Name (Last, First, Middle Initial)
 Mailing Address 59 E Park Ln NE
 City Atlanta State GA Zip Code 30309-2725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dermatology Affiliates Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : C_991
 Amount of Each Receipt this Period **2500.00**

SUBTOTAL of Receipts This Page (optional).....	2580.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Barry C. Ginsburg
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code
AL

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2012

Transaction ID : C_992

Amount of Each Receipt this Period
100.00

B. Gary Goldenberg
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code
NY

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mount Sinai School of Medicine Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : C_1000

Amount of Each Receipt this Period
250.00

C. Barbara Greenan
Full Name (Last, First, Middle Initial)

Mailing Address 9418 Balfour Drive

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
American Academy Of Dermatology Association Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2012

Transaction ID : C_996

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional).....▶	395.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Yolanda Rosi Helfrich
 Full Name (Last, First, Middle Initial)
 Mailing Address 3100 Pittsview Dr
 City Ann Arbor State MI Zip Code 48108-2902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ of Michigan, Dermatology Occupation Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 30 / 2012
Transaction ID : C_995
 Amount of Each Receipt this Period 300.00

B. Kay A. Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 606 Ashford Dr
 City San Angelo State TX Zip Code 76901-5201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bel-Ami Dermatology Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 30 / 2012
Transaction ID : C_994
 Amount of Each Receipt this Period 125.00

c. Hazle Smith Konerding
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 Cyril Ln
 City Richmond State VA Zip Code 23229-7740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonwealth Dermatology PC Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 11 / 15 / 2012
Transaction ID : C_980
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 655.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Elizabeth Shannon Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 861 Tulip Poplar Dr
 City Hoover State AL Zip Code 35244-1639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pure Dermatology & Aesthetics, PC Occupation Dermatologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 15 / 2012
Transaction ID : C_971
 Amount of Each Receipt this Period 100.00

B. Robert L. Orme
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State UT Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 11 / 06 / 2012
Transaction ID : C_990
 Amount of Each Receipt this Period 365.00

C. Eric O. Rasmussen
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 High School Rd NE Pmd 317, Ste D3
 City Bainbridge Island State WA Zip Code 98110-2648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peninsula Dermatology and Laser Clinic Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 06 / 2012
Transaction ID : C_989
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 1465.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Sandra I. Read
Full Name (Last, First, Middle Initial)

Mailing Address 6915 Radnor Rd

City Bethesda State MD Zip Code 20817-6328

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4444.48

Date of Receipt 11 / 15 / 2012
Transaction ID : C_979

Amount of Each Receipt this Period 555.56

B. Ricardo A. Romagosa
Full Name (Last, First, Middle Initial)

Mailing Address 116 S Shore Rd

City Stuart State FL Zip Code 34994-9134

FEC ID number of contributing federal political committee. **C**

Name of Employer Romagosa Dermatology Group, LLC Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 15 / 2012
Transaction ID : C_977

Amount of Each Receipt this Period 40.00

C. Elisabeth Shim
Full Name (Last, First, Middle Initial)

Mailing Address 1757 Bel Air Rd

City Los Angeles State CA Zip Code 90077-2730

FEC ID number of contributing federal political committee. **C**

Name of Employer St John's Medical Plaza Occupation Dermatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2012
Transaction ID : C_998

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 845.56

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Daniel M. Siegel
Full Name (Last, First, Middle Initial)

Mailing Address 33 Hitherbrook Rd

City State Zip Code
Saint James NY 11780-1014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Long Island Skin Cancer And Dermatolog Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 15 / 2012
Transaction ID : C_972

Amount of Each Receipt this Period
500.00

B. Patricia N. Speelman
Full Name (Last, First, Middle Initial)

Mailing Address 3362 Monroe St

City State Zip Code
Carlsbad CA 92008-2045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dermatology Specialists, Inc Dermatologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 25 / 2012
Transaction ID : C_1001

Amount of Each Receipt this Period
400.00

C. Sabra Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 242 Hidden Oaks Dr

City State Zip Code
Ridgeland MS 39157-7000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dermatology Associates, LLC Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 22 / 2012
Transaction ID : C_1005

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Dermatology Association Political Action Committee (SkinPAC)

A. Sabra Sullivan
Full Name (Last, First, Middle Initial)

Mailing Address 242 Hidden Oaks Dr

City State Zip Code
Ridgeland MS 39157-7000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dermatology Associates, LLC Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : C 973

Amount of Each Receipt this Period
100.00

B. Kevin Lynn Whaley
Full Name (Last, First, Middle Initial)

Mailing Address 9487 Wolf Pack Ter

City State Zip Code
Colorado Springs CO 80920-7679

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Summit Dermatology PC Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2012

Transaction ID : C 997

Amount of Each Receipt this Period
500.00

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	8090.98

**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Amex Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VE_29

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address PO Box 6603

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Aristotle Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VE_136

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Merchant Services

Mailing Address PO Box 6603

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
MC/VS Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : VE_110

Amount of Each Disbursement this Period

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

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

**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Alamo PAC

Mailing Address 919 Congress Ave Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement
2012 Other

011

Category/
Type

Candidate Name
Alamo PAC

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_351

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Allyson Schwartz for Congress

Mailing Address PO Box 2232

City Jenkintown State PA Zip Code 19046

Purpose of Disbursement
2012 General

011

Category/
Type

Candidate Name
Allyson Y. Schwartz

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_341

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Bob Casey for Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
2012 General

011

Category/
Type

Candidate Name
Robert P. Casey Jr

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2012			

Transaction ID : E_1333

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Carolyn's PAC

Mailing Address 24 East 93rd Street
Suite 1B

City New York State NY Zip Code 10128

Purpose of Disbursement
2012 Other

011

Candidate Name

Carolyn's PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : E_743

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Charles Boustany Jr. Md for Congress, Inc.

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598-0126

Purpose of Disbursement
2012 Runoff

011

Candidate Name

Charles W. Boustany Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Runoff**

State: LA District: 03

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2012

Transaction ID : E_830

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Charlie Dent for Congress

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement
2012 General

011

Candidate Name

Charles W. Dent

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify)

State: PA District: 15

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : E_1078

Amount of Each Disbursement this Period

2500.00

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

12500.00

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

**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Committee for a Democratic Future

Mailing Address 7240 Evans Mill Rd

City McLean State VA Zip Code 22101

Purpose of Disbursement
2012 Other

011

Candidate Name

Committee for a Democratic Future

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_655

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Common Values PAC

Mailing Address 901 N Washington St, Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2012 Other

011

Candidate Name

Common Values PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_506

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Concerned Americans for Freedom & Opportunity PAC (CAFO PAC)

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2012 Other

011

Candidate Name

Concerned Americans for Freedom & Opportunity PAC (CAFO PAC)

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_1411

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Danpac

Mailing Address 1088 Bishop Street, Suite 1009

City Honolulu State HI Zip Code 96813

Purpose of Disbursement
2012 Other

011

Candidate Name

Danpac

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_1582

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Dedicated To Establishing National Teamwork PAC (DENT PAC)

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement
2012 Other

011

Candidate Name

Dedicated To Establishing National Teamwork PAC (DENT PAC)

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : E_342

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Defending and Investing in America's New Endeavors PAC (DIANE PAC)

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066

Purpose of Disbursement
2012 Other

011

Candidate Name

Defending and Investing in America's New Endeavors PAC (DIANE PAC)

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2012			

Transaction ID : E_1461

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Fiscal Responsibility PAC

Mailing Address 470 Banfield Rd

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
2012 General

011

Category/
Type

Candidate Name

Fiscal Responsibility PAC

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : E_1239

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Friends of Bill Posey

Mailing Address PO Box 411486

City Melbourne State FL Zip Code 32941

Purpose of Disbursement
2012 General

011

Category/
Type

Candidate Name

Bill Posey

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Contribution**

State: FL District: 08

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : E_1438

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Friends of John Barrasso

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement
2012 General

011

Category/
Type

Candidate Name

John Anthony Barrasso

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Contribution**

State: WY District:

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : E_935

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Gene Green Congressional Campaign

Mailing Address PO Box 16128

City Houston State TX Zip Code 77222

Purpose of Disbursement
2012 General

011

Candidate Name

Raymond Eugene Green

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 29

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2012

Transaction ID : E_536

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Heartland Values PAC

Mailing Address PO Box 505

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
2012 Other

011

Candidate Name

Heartland Values PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : E_1463

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. M-Pac

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2012 Other

011

Candidate Name

M-Pac

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2012

Transaction ID : E_1456

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

**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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. Marsha Blackburn for Congress, Inc.

Mailing Address PO Box 3750

City State Zip Code
Brentwood TN 37024-3750

Purpose of Disbursement
2012 General

011

Category/
Type

Candidate Name

Marsha Blackburn

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2012

Transaction ID : E_327

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Marsha Blackburn for Congress, Inc.

Mailing Address PO Box 3750

City State Zip Code
Brentwood TN 37024-3750

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Marsha Blackburn

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : E_482

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. People for Patty Murray

Mailing Address PO Box 3662

City State Zip Code
Seattle WA 98124

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Patty Murray

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : E_931

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

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"/> 24	<input type="checkbox"/> 25	<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)

American Academy of Dermatology Association Political Action Committee (SkinPAC)

Full Name (Last, First, Middle Initial)

A. We the People PAC

Mailing Address PO Box 142

City State Zip Code
Jenkintown PA 19046

Purpose of Disbursement
2012 Other

011
Category/ Type

Candidate Name

We the People PAC

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2012

Transaction ID : E_525

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

5000.00

115000.00
