REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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2023 JUL 28 5 15 10: 44

NAME OF COMMITTEE (in full)

FEC

FORM 3X

TYPE OR PRINT ▼

Example: If typing, type over the lines.

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Check if different than previously reported. (ACC)						لسلسلسك		لنسب
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2. FEC ID	ENTIFICATION NU	IMBER ▼	CITY ▲	· · · - · · · · · · · · · · · · · · · ·		STATE A	ZIP (CODE A
Co	064824	6	3. IS THIS REPOR	117	NEW (N) OR	AN (A)	MENDED	· ·
4. TYPE (Choose	OF REPORT	(b) Monthly Report Due On			May 20 (M5)		20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Qua	arterly Reports:		Mar 20 (M:	3) <u> </u>	Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report (Q	(1)	Apr 20 (M4		Jul 20 (M7)		20 (M10)	Jan 31 (YE)
	July 15 Quarterly Report (Q2) (c) 12-D PRE		E-Election	Primary (1		General	اسا	Runoff (12R)
	October 15 Quarterly Report (C	i	port for the:	Convention	1 (120)	Special (125)	
	January 31 Year-End Report (Y	E)	Election on	[MTM]	/ [DTD] /		in th Stat	ne le of
X	July 31 Mid-Year Report (Non-election Year Only) (MY)	PO	-Day OST-Election port for the:	General (3	30G)	Runoff (3	30R)	Special (30S)
	Termination Report (TER)		Election on	M	/ D D /	~ ~ ~ ~ ~	in th Stat	ne le of
5. Covering	g Period	M / 6 1	2023	through	0.6	' 3 0'	202	3
I certify that	I have examined th		•	, -		ue, correct and	d complete.	
Type or Prin	t Name of Treasure	RONA	LD D.V	VhiTI	4025			
Signature of	Treasurer	ROI	X)	(Date 🐧	7 23	2.23
NOTE: Subm	nission of false, errone	eous, or incomp	lete information may	subject the p	erson signing t	his Report to the	he penalties of	52 U.S.C. § 30109.
1 U	ffice Jse Only							ORM 3X 05/2016

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)		Page 2
Write or Type Committee Name	o & Reconarchie To	partment BAC
Specialized medicin	ic q viciponsione in	KEN INCIN IN C
Report Covering the Period: From:	20.23	To: 06 3.0 2023
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
S. (a) Cash on Hand January 1, 2 0 2 3		2,9,5,6,8,4
(b) Cash on Hand at Beginning of Reporting Period	2,950	8-41
(c) Total Receipts (from Line 19)	2,386.	9.91 2,3,86.9.9
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5,3,3.7.	8 ¹³] 5,337,6 ¹³
7. Total Disbursements (from Line 31)	42	34 42,34
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5,295	5,295,49
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a multid	candidate committee. (see FEC FORM	1 1M)
	For further information conta	ct:
•	Federal Election Commission 1050 First Street, N.E. Washington, DC 20463	1

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

NOWN OF NOW ON DOUGHOUSE

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name medicine & Resposible TREATMENT Specialized 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 (contri (i) Itemized (use Schedule A). (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.). 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))........

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Family Company Compa	Calendar Year-to-Date
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	4734	4,34
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))	•	
22. Transfers to Affiliated/Other Party		
Committees 23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures		(<u> </u>
(use Schedule E)		
(52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees(c) Other Political Committees		
(such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	• • • • • • • • • • • • • • • • • • •	
29. Other Disbursements (Including		
Non-Federal Donations)	المتعار المعالي المتعارية على المتعارية المتعارية المتعارية المتعارية المتعارية المتعارية المتعارية المتعارية	
30. Federal Election Activity (52 U.S.C. § 3010	<u>"</u>	<u> </u>
(a) Allocated Federal Election Activity	71(20))	
(from Schedule H6) (i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
•	<u> </u>	<u> </u>
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4234	4234
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	1234	4234

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		
SPECIALIZED MEDICINE	& Responsible	Le treatment PAC
Full Name of Individual (Last, First, Middle Initial) or Full CA. NATURAL PLIOUCTS ASSOCIATION	Organization Name	Date of Receipt
Mailing Address 440 15T STREET WW City 654 1 State	5 V 1 TC 5 2 0	0.3 2.7 2023
Washington OC	20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		,,,2,0,0,0,°,°°°
Name of Employer (for Individual)	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼	
Full Name of Individual (Last, First, Middle Initial) or Full (B. FÔZTORL SUSA)	Organization Name	Date of Receipt
Mailing Address 214 WYER Gainer	ZVAO.	6 y 3 0 2 0 2 3
State TA	Zip Code 38501 - 4399	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Name of Employer (for Individual) Occ	cupation (for Individual)	Memo Item
Receipt For: Primary	Year-to-Date ▼	
Full Name of Individual (Last, First, Middle Initial) or Full C.	Organization Name	Date of Receipt
Mailing Address	7in Code	MAM / DAD / AAAA
City State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		<u> </u>

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2023 JUL 28 AM 10: 44

Feary Election Commission 1050 First Street, NE 80463 Washington, OC

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No Postmark	
Overnight Delivery Service (Specify):	Shipping Date Date of Receipt Next Business Day Delivery
Received via FAX	Date of Receipt
Received via Email	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
MDO PREPARER	7/28/23 DATE PREPARED
(4/2023)	DATE FREFARED