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

COMMUNITY ONCOLOGY ALLIANCE PAC

ADDRESS (number and street) ▼ 1101 Pennsylvania Avenue SW

☐ Check if different than previously reported. (ACC)

Washington | DC | 20004 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00383976

3. IS THIS REPORT ☐ NEW (N) **OR** ☒ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2015 through 03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Diaz

Signature of Treasurer *Michael Diaz* ***[Electronically Filed]*** Date 05 / 09 / 2016

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 Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

COMMUNITY ONCOLOGY ALLIANCE PAC

Report Covering the Period: From: 01 / 01 / 2015 To: 03 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		38283.76
(b) Cash on Hand at Beginning of Reporting Period	38283.76	
(c) Total Receipts (from Line 19)	33700.00	33700.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	71983.76	71983.76
7. Total Disbursements (from Line 31)	37331.09	37331.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34652.67	34652.67
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on 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. 06/2004)

Write or Type Committee Name

COMMUNITY ONCOLOGY ALLIANCE PAC

Report Covering the Period: From: 01 / 01 / 2015 To: 03 / 31 / 2015

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)	33200.00	33200.00
(ii) Unitemized	500.00	500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	33700.00	33700.00
(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) ▶	33700.00	33700.00
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.)	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)) ▶	33700.00	33700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	33700.00	33700.00

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	6331.09	6331.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	6331.09	6331.09
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	31000.00	31000.00
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	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	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))	37331.09	37331.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	37331.09	37331.09

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	33700.00	33700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33700.00	33700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	6331.09	6331.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	6331.09	6331.09

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **F3XA**
Transaction ID :

Beginning cash balance was corrected due to error in prior years with cash balance coming into year. Filed form 99 with further explanation

Form/Schedule:
Transaction ID:

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 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)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Miriam Atkins
Mailing Address: 3696 Wheeler Road
City: Augusta State: GA Zip Code: 30909-6520
FEC ID number of contributing federal political committee: C
Name of Employer: SELF Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 02 / 28 / 2015
Transaction ID : 9934544
Amount of Each Receipt this Period: 200.00
[ ] Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Dr. Harry M. Barnes III
Mailing Address: 4145 Carmichael Road
City: Montgomery State: AL Zip Code: 36106-2803
FEC ID number of contributing federal political committee: C
Name of Employer: Montgomery Cancer Center Occupation: Oncologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934545
Amount of Each Receipt this Period: 500.00
[ ] Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Joseph S Cirrone
Mailing Address: 22 Ledgewood Circle
City: East Setauket State: NY Zip Code: 11733-1151
FEC ID number of contributing federal political committee: C
Name of Employer: self Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934546
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 2700.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Noshir DaCosta
Mailing Address: 9 Dorm Court
City: Setauket State: NY Zip Code: 11733-1081
FEC ID number of contributing federal political committee: C
Name of Employer: self Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934547
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Michael Diaz
Mailing Address: 800 S Dakota Ave 401
City: Tampa State: FL Zip Code: 33606-2853
FEC ID number of contributing federal political committee: C
Name of Employer: Self Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 02 / 08 / 2015
Transaction ID : 9934548
Amount of Each Receipt this Period: 5000.00
[ ] Memo Item
Contribution

C. Full Name (Last, First, Middle Initial): Dr. Bruce Gould
Mailing Address: 766 Tate Overlook
City: Marietta State: GA Zip Code: 30064-2078
FEC ID number of contributing federal political committee: C
Name of Employer: self Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934550
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 8000.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Regina Jablonski
Mailing Address: 8 Davids Way
City: Port Jefferson | State: NY | Zip Code: 11777-1154
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934551
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

B. Full Name (Last, First, Middle Initial): William LiPera
Mailing Address: 695 Short Beach Road
City: Saint James | State: NY | Zip Code: 11780-4111
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 02 / 11 / 2015
Transaction ID : 9934552
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Shahid Nawaz
Mailing Address: 6 Elbridge Court
City: South Setauket | State: NY | Zip Code: 11720-4621
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934553
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 6000.00

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

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Edward Samuel
Mailing Address: 12 Salt Meadow Lane
City: Stony Brook | State: NY | Zip Code: 11790-1110
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934554
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Martin Silverstein
Mailing Address: 70 Wilmington Drive
City: Melville | State: NY | Zip Code: 11747-4028
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934555
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Gurmohan Syali
Mailing Address: 235 N Belle Mead Avenue
City: East Setauket | State: NY | Zip Code: 11733-3456
FEC ID number of contributing federal political committee: C
Name of Employer: self | Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934556
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 6000.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Michael Theodorakis
Mailing Address: 19 Shore Oaks Drive
City: Stony Brook State: NY Zip Code: 11790-1422
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934557
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Dr. Mark E. Thompson
Mailing Address: 7175 Fox Lake Dr
City: Blacklick State: OH Zip Code: 43004-8559
FEC ID number of contributing federal political committee: C
Name of Employer: Mid-Ohio Onc/Hem Inc
Occupation: Oncologist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 02 / 27 / 2015
Transaction ID : 9934558
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Jeffrey Vacirca
Mailing Address: 23 Valentine Road
City: Shoreham State: NY Zip Code: 11786-1243
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934559
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contributions

SUBTOTAL of Receipts This Page (optional) ▶ 5000.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Edward Broun
Mailing Address: 3119 Lookout Court
City: Cincinnati State: OH Zip Code: 45208-3119
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 17 / 2015
Transaction ID : 9934560
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

B. Full Name (Last, First, Middle Initial): David Chu
Mailing Address: 175 Gnarled Hill Road
City: Setauket State: NY Zip Code: 11733
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 11 / 2015
Transaction ID : 9934561
Amount of Each Receipt this Period: 2000.00
[ ] Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Michael Method
Mailing Address: 62092 Carlton Drive
City: Cassopolis State: MI Zip Code: 49031-9376
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 01 / 2015
Transaction ID : 9934563
Amount of Each Receipt this Period: 500.00
[ ] Memo Item
contribution

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A.
Full Name (Last, First, Middle Initial): Peter Ruehlman
Mailing Address: 5053 Wooster Road
City: Cincinnati State: OH Zip Code: 45226-2326
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 03 / 12 / 2015
Transaction ID : 9934564
Amount of Each Receipt this Period: 1000.00
[ ] Memo Item
contribution

B.
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 / D D / Y Y Y Y
Amount of Each Receipt this Period:
[ ] Memo Item

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 / D D / Y Y Y Y
Amount of Each Receipt this Period:
[ ] Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 33200.00

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Community Oncology Alliance
Mailing Address: 1101 Pennsylvania Avenue, Suite 700
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: reimbursement of PAC travel expenses
Candidate Name:
Category/Type: 002
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 02 / 23 / 2015
Transaction ID : 10613066
Amount of Each Disbursement this Period: 5728.34
[ ] Memo Item
reimbursement of PAC travel expenses

B. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 01 / 2015
Transaction ID : 9937452
Amount of Each Disbursement this Period: 14.80
[ ] Memo Item
fee

C. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 09 / 2015
Transaction ID : 9937453
Amount of Each Disbursement this Period: 6.10
[ ] Memo Item
fee

SUBTOTAL of Disbursements This Page (optional) ▶ 5749.24

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 11 / 2015
Transaction ID : 9937454
Amount of Each Disbursement this Period: 29.30
[ ] Memo Item
fee

B. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937456
Amount of Each Disbursement this Period: 58.30
[ ] Memo Item
fee

C. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 17 / 2015
Transaction ID : 9937457
Amount of Each Disbursement this Period: 58.30
[ ] Memo Item
fee

SUBTOTAL of Disbursements This Page (optional) ▶ 145.90

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): PayPal
Mailing Address: 12312 Port Grace Blvd
City: La Vista State: NE Zip Code: 68125
Purpose of Disbursement: fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 26 / 2015
Transaction ID : 9937458
Amount of Each Disbursement this Period: 29.30
[ ] Memo Item
fee

B. Full Name (Last, First, Middle Initial): Wells Fargo
Mailing Address: 672 Battelfield Boulevard N
City: Chesapeake State: VA Zip Code: 23320
Purpose of Disbursement: Bank fee
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 03 / 11 / 2015
Transaction ID : 9937465
Amount of Each Disbursement this Period: 49.95
[ ] Memo Item
Bank fee

C. Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 79.25

TOTAL This Period (last page this line number only) ▶ 5974.39

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): VOTE TO ELECT REPUBLICANS NOW PAC (VERN PAC)
Mailing Address: 22780 INDIAN CREEK DRIVE, STE 100
City: DULLES State: VA Zip Code: 20166
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 10612183
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Vern Buchanan For Congress
Mailing Address: P. O. Box 48928
City: Sarasota State: FL Zip Code: 34230
Purpose of Disbursement: contribution
Candidate Name: Vernon Buchanan
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 13
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937438
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Scalise For Congress
Mailing Address: PO Box 23219
City: Jefferson State: LA Zip Code: 70183
Purpose of Disbursement: contribution
Candidate Name: Steve Scalise
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: LA District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937439
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item
contribution

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Eye of the Tiger PAC
Mailing Address: PO BOX 2485
City: Springfield State: VA Zip Code: 22152
Purpose of Disbursement: contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937440
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Guthrie For Congress
Mailing Address: PO Box 9639
City: Bowling Green State: KY Zip Code: 42102
Purpose of Disbursement: contributions
Candidate Name: S. Brett Guthrie
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937441
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item
contributions

C. Full Name (Last, First, Middle Initial): Bilirakis For Congress
Mailing Address: PO Box 606
City: Tarpon Springs State: FL Zip Code: 34688
Purpose of Disbursement: contributions
Candidate Name: Gus Bilirakis
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 09
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937442
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item
contributions

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): STEVE ISRAEL FOR CONGRESS COMMITTEE
Mailing Address: P.O. BOX 1400
City: MELVILLE State: NY Zip Code: 11747
Purpose of Disbursement: contribution
Candidate Name: Steve Israel
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937443
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Tim Murphy For Congress
Mailing Address: PO Box 24551
City: Pttsburgh State: PA Zip Code: 15234
Purpose of Disbursement: contribution
Candidate Name: Tim Murphy
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 18
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 17 / 2015
Transaction ID : 9937444
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Renee Ellmers For Congress Committee
Mailing Address: PO Box 99567
City: Raleigh State: NC Zip Code: 27624
Purpose of Disbursement: contributions
Candidate Name: Renee Ellmers
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 02
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 19 / 2015
Transaction ID : 9937445
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item
contributions

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
COMMUNITY ONCOLOGY ALLIANCE PAC

A. Full Name (Last, First, Middle Initial): Diana Degette For Congress
Mailing Address: P.O. Box 61337
City: Denver State: CO Zip Code: 80206
Purpose of Disbursement: contribution
Category/Type: 011
Candidate Name: Diana Degette
Office Sought: ☒ House ☐ Senate ☐ President
State: CO District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 18 / 2015
Transaction ID : 9937446
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item
contribution

B. Full Name (Last, First, Middle Initial): Whitfield For Congress Committee
Mailing Address: P.O. Box 391
City: Hopkinsville State: KY Zip Code: 42241
Purpose of Disbursement: contribution
Category/Type: 011
Candidate Name: Edward Whitfield
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937460
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item
contribution

C. Full Name (Last, First, Middle Initial): Whitfield For Congress Committee
Mailing Address: P.O. Box 391
City: Hopkinsville State: KY Zip Code: 42241
Purpose of Disbursement: contribution
Category/Type: 011
Candidate Name: Edward Whitfield
Office Sought: ☒ House ☐ Senate ☐ President
State: KY District: 01
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2015
Transaction ID : 9937461
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item
contribution

SUBTOTAL of Disbursements This Page (optional) ▶ 6000.00

TOTAL This Period (last page this line number only) ▶ 31000.00