09/18/2009 00:54

Image# 29992799915

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Medical Group Association PAC 3901 Hoyt Avenue ADDRESS (number and street) Check if different than previously Everett WA 98290 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00408120 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 03 0 1 2009 03 3 1 2009 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mark E. Mantei Type or Print Name of Treasurer Electronically Filed by Mark E. Mantei 09 17 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS 2 / 32

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
i. (a) Cash on Hand January 1 2009 Y Y Y		34932.01
(b	Cash on Hand at Begining of Reporting Period	35798.58	
(c) Total Receipts (from Line 19)	45301.00	47301.00
(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	81099.58	82233.01
Тс	otal Disbursements (from Line 31)	5374.38	6507.81
Re	ash on Hand at Close of eporting Period ubtract Line 7 from Line 6(d))	75725.20	75725.20
the	ebts and Obligations owed TO e committee (Itemize all on shedule C and/or Schedule D)	0.00	
	ebts and Obligations owed BY		
	e committee (Itemize all on chedule C and/or Schedule D)	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 32

Write or Type Committee Name

American Medical Group Association PAC

Report Covering the Period:

From: 0 3

D D 1

2009

o. 03

^D 31

y y y y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	42801.00	44801.00
	(ii) Unitemized	2500.00	2500.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	45301.00	47301.00
(1	b) Political Party Committees	0.00	0.00
,	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	45301.00	47301.00
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. <i>A</i>	All Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(1	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	45301.00	47301.00
	otal Federal Receipts subtract Line 18(c) from Line 19)	45301.00	47301.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 32

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to		
	Federal Candidates/Committeesand Other Political Committees	5000.00	6000.00
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	374.38	507.81
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds (c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5374.38	6507.81
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
, <u>.</u> .	(Subtract Line 21(a)(ii) and Line So(a)(ii)	·	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 32

	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)	45301.00	47301.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	45301.00	47301.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

City State Zip Code NY 10514 FEC ID number of contributing federal political committee. Name of Employer Malling Address 11 Brian Court City State Zip Code NY 10512 B. Louis N Aurisicchio Malling Address 11 Brian Court City State Zip Code NY 10512 Carmel NY 10512 FEC ID number of contributing federal political committee. C Date of Receipt this Perit Name (Last, First, Middle Initial) PFEC ID number of contributing federal political committee. C Date of Receipt Tor: NY 10512 Amount of Each Receipt this Perit Name of Employer Mount Kisco Medical Group Name of Employer Nount Kisco Medical Group Receipt For: Primary General Other (specify) ▼ C Date of Receipt Title Perit Name (Last, First, Middle Initial) Primary General Other (specify) ▼ C Date of Receipt Title Perit Name (Last, First, Middle Initial) Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code Transaction ID: SA11Al.4983 Amount of Each Receipt this Perit Name (Last, First, Middle Initial) C State Zip Code Transaction ID: SA11Al.4983 Amount of Each Receipt this Perit Name (Last, First, Middle Initial) C State Zip Code Transaction ID: SA11Al.4983 Amount of Each Receipt this Perit Name (Last, First, Middle Initial) C State Zip Code Transaction ID: SA11Al.4983 Amount of Each Receipt this Perit Name (Last, First, Middle Initial)	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 32 (check only one) X 11a
A. American Medical Group Association PAC Full Name (Last, First, Middle Initial) Batbara Alpert Malling Address 41 Pond Hill Road City Chappaqua NY 10514 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Louis N Auristochio Malling Address 11 Brian Court City State Zip Code NY 10512 Fell IName (Last, First, Middle Initial) Louis N Auristochio Malling Address 11 Brian Court City Garmel NY 10512 FEC ID number of contributing federal political committee. C C Cupation Physician Aggregate Year-to-Date ▼ FEC ID number of contributing federal political committee. C City Garmel NY 10512 FEC ID number of contributing federal political committee. C C City State Zip Code NY 10512 FEC ID number of contributing federal political committee. C C City State Zip Code Ny 10512 Foll Name (Last, First, Middle Initial) Light Barsh Malling Address 211 Briarwood Drive City Somers NY 10589 FEC ID number of contributing federal political committee. C City State Zip Code NY 10589 FEC ID number of contributing federal political committee. C City State Zip Code NY 10589 FEC ID number of contributing federal political committee. C City Somers NY 10589 FEC ID number of contributing federal political committee. C C Cocupation Physician Aggregate Year-to-Date ▼ Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Amount of Each Receipt this Peric NY 10589 Transaction ID: SA11Al 4.983 Transaction ID: SA11Al 4.983 Transaction ID: S	or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A Barbara Alpert Mailing Address 41 Pond Hill Road City State Zip Code Transaction ID: SA11A1.5027 Chappaqua NY 10514 Amount of Each Receipt this Peric Primary General Other (specify) ▼ Cocupation Physician Receipt For: Primary General Other (specify) ▼ City State Zip Code Transaction ID: SA11A1.6027 Amount of Each Receipt this Peric Physician Pagregate Year-to-Date ▼ Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: SA11A1.6027 Amount of Each Receipt this Peric Physician Date of Receipt To: Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: SA11A1.4982 Amount of Each Receipt this Peric Physician Physician Receipt For: Primary General Other (specify) ▼ Date of Receipt this Peric Physician Aggregate Year-to-Date ▼ Date of Receipt this Peric Physician Physician Date of Receipt To: Date of Receipt Transaction ID: SA11A1.4983 Amount of Each Receipt this Peric Physician Physician City State Zip Code Physician Receipt For: Date Transaction ID: SA11A1.4983 Amount of Each Receipt this Peric Physician Physician Paggregate Year-to-Date ▼ Date of Receipt Transaction ID: SA11A1.4983 Amount of Each Receipt this Peric Physician Physician Physician Paggregate Year-to-Date ▼ Physician Physician Receipt For: Physician Paggregate Year-to-Date ▼ Physician Physician Paggregate Year-to-Date ▼	1 \	PAC	
City State Zip Code NY 10514 FEC ID number of contributing federal political committee. Name of Employer Mit Kisco Medical Group Primary General Occupation Physician Receipt For: Primary General NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10512 Full Name of Employer Mount Kisco Medical Group Physician Receipt For: Primary General NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10512 Full Name (Last, First, Middle Initial) City State Zip Code NY 10589 Full Name (Last, First, Middle Initial) City State Zip Code NY 10589 Full Name (Last, First, Middle Initial) City State Zip Code NY 10589 Amount of Each Receipt this Peric State Zip Code NY 10589 City State Zip Code NY 10580	Barbara Alpert		-
Chappaqua PEC ID number of contributing federal political committee. Name of Employer Mit Kisco Medical Group Physician Receipt For: Primary General Occupation Physician Aggregate Year-to-Date ▼ Oscupation Physician Aggregate Year-to-Date ▼ Oscupation Physician Aggregate Year-to-Date ▼ Oscupation Physician Date of Receipt Oscupation Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ Full Name (Last, First, Middle Initial) Oscupation		Stato Zin Code	03 23 2009
FEC ID number of contributing federal political committee. Name of Employer MK Kisco Medical Group Receipt For: Primary General Other (specify) ▼ Cly State Zip Code Ny 10512 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Name of Employer Mailing Address 211 Brianvood Drive City State Zip Code Ny 10512 Full Name (Last, First, Middle Initial) C Cupation Physician Receipt For: Primary General Occupation Physician Receipt For: Primary General Other (specify) ▼ Clil Name (Last, First, Middle Initial) Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code Ny 10589 FEC ID number of contributing federal political committee. City State Zip Code Ny 10589 FEC ID number of contributing federal political committee. C State Zip Code Ny 10589 FEC ID number of contributing federal political committee. C State Zip Code Ny 10589 FEC ID number of contributing federal political committee. C State Zip Code Ny 10589 FEC ID number of contributing federal political committee. C State Zip Code Ny 10589 Amount of Each Receipt this Perice State Sta	-	•	
Receipt For:	FEC ID number of contributing		250.00
Primary	Name of Employer Mt Kisco Medical Group		
Louis N Aurisicchio Mailing Address 11 Brian Court City State Zip Code NY 10512 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Primary General Other (specify) ▼ City State Zip Code NY 10512 Coccupation Physician Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Elliott Barsh Mailing Address 211 Brianwood Drive City State Zip Code NY 10589 FEC ID number of contributing federal political committee. City State Zip Code NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Physician Receipt For: Primary General Occupation Physician Aggregate Year-to-Date ▼	Primary General	250.00	
City State Zip Code NY 10512 FEC ID number of contributing federal political committee. NY 10512 C C State Zip Code NY 10512 Amount of Each Receipt this Peric Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Physician Receipt For: Occupation NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Physician Receipt For: Primary General Aggregate Year-to-Date ▼ Occupation Physician Receipt For: Primary General Aggregate Year-to-Date ▼	Louis N Aurisicchio		<u> </u>
Carmel NY 10512 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Name of Employer Mount Kisco Medical Group Name of Employer Mount Kisco Medical Group Receipt For: Primary General Occupation Physician Receipt For: Aggregate Year-to-Date ▼ 250.00	Mailing Address 11 Brian Court		
FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code NY 10589 FEC ID number of contributing federal political committee. FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Occupation Physician Receipt For: Primary General Aggregate Year-to-Date C 250.	•	·	Transaction ID: SA11AI.4962
Receipt For: Primary General Other (specify) ▼		NY 10512	Amount of Each Receipt this Period
Receipt For:	federal political committee.		500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Aggregate Year-to-Date ▼ 250.00	Name of Employer Mount Kisco Medical Group	•	
Elliott Barsh Mailing Address 211 Briarwood Drive City State Zip Code Somers NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Date of Receipt Transaction ID: SA11AI.4983 Amount of Each Receipt this Period Service of the se	Primary General		
City State Zip Code Somers NY 10589 FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General O 3 1 1 2 0 Transaction ID: SA11AI.4983 Amount of Each Receipt this Perior 250.			Date of Receipt
Somers FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary Amount of Each Receipt this Period C Aggregate Year-to-Date Aggregate Year-to-Date	Mailing Address 211 Briarwood Drive		
FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Aggregate Year-to-Date 250.00	•	•	
Receipt For: Primary General Aggregate Year-to-Date 350.00	FEC ID number of contributing		Amount of Each Receipt this Period 250.00
Primary General 350.00	Name of Employer Mount Kisco Medical Group	·	
	Primary General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional) .		1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/32 (check only one) X 11a 11b 11c 12
· · ·	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Medical Group Associatio	n PAC	
Full Name (Last, First, Middle Initial) Russell Beckley		Date of Receipt
Mailing Address 2427 56th St SW	7.0	03 23 2009
City Everett	State Zip Code WA 98203	Transaction ID: SA11AI.5032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30203	1000.00
Name of Employer The Everett Clinic	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) David Berck		Date of Receipt
Mailing Address 16 Alta Lane		03 11 2009
City	State Zip Code	Transaction ID: SA11AI.5002
<u>Chappaqua</u>	NY 10514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1001.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00	
Full Name (Last, First, Middle Initial) Dr. Warren Bromberd		Date of Receipt
Mailing Address 43 Evergreen Row		03 24 2009
City Armonk	State Zip Code NY 10504	Transaction ID: SA11AI.5039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mount Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional		2501.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 32 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Medical Group Association	n PAC		
∠ A .	Full Name (Last, First, Middle Initial) Michael Bukosky			Date of Receipt
	Mailing Address 602 West University Ave			03 23 7 2009
	City	State	Zip Code	Transaction ID: SA11AI.5029
	Urbana FEC ID number of contributing federal political committee.	C	61801	Amount of Each Receipt this Period 500.00
	Name of Employer Carle Clinic Association	Occupation Exec VP		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
– В.	Full Name (Last, First, Middle Initial) Lynda Rojas Carroll Mailing Address 180 Stebins Road			Date of Receipt
	Mailing Address 180 Stephns Road			03 13 2009
	City	State	Zip Code	Transaction ID: SA11AI.5006
	Carmel	NY	10512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Mt Kisco Medical Group	Occupation Physicia		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
_ С.	Full Name (Last, First, Middle Initial) Alan Carter			Date of Receipt
	Mailing Address 10724 58th Ave W		03 20 7 2009	
	City Mukilteo	State WA	Zip Code 98275	Transaction ID: SA11AI.5008 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer The Everett Clinic	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
F	TOTAL This Period (last page this line number			

Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) American Medical Group Association PA Full Name (Last, First, Middle Initial) I J Cehelsky Mailing Address 126 South Bedford Rd City Poundridge FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City Bayside	me and address of any political committee to s	Date of Receipt Date of Receipt
Full Name (Last, First, Middle Initial) I J Cehelsky Mailing Address 126 South Bedford Rd City Poundridge FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	State Zip Code NY 10576 C	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I J Cehelsky Mailing Address 126 South Bedford Rd City Poundridge FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	NY 10576 C Occupation	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Poundridge FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	NY 10576 C Occupation	Transaction ID: SA11AI.4979 Amount of Each Receipt this Period
Poundridge FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	NY 10576 C Occupation	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	Occupation	
federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	Occupation	1000.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	•	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	1 Hydidian	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	Aggregate Year-to-Date ▼	
Dr. Chee Chan Mailing Address One Bay Club Dr #9B City	1000.00	
Mailing Address One Bay Club Dr #9B		Date of Receipt
•		03 16 2009
Bayside	State Zip Code	Transaction ID: SA11AI.5007
	NY 11360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Dominick Chiarieri		Date of Receipt
Mailing Address 90 S. Bedford Road		03 12 2009
City	State Zip Code	Transaction ID: SA11AI.4971
Mt. Kisco	NY 10549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt. Kisco Medical Group	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 32 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Medical Group Association	nd Statements may not be sold or used by any personal the name and address of any political committee to on PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Marvin Chinitz Mailing Address 60 Jerome Ave City	State Zip Code	Date of Receipt 0 3 2 3 2 0 0 9 Transaction ID: SA11AI.5026
New Rochelle FEC ID number of contributing federal political committee.	NY 10804	Amount of Each Receipt this Period 250.00
Name of Employer Mt Kisco Medical Group Receipt For: Primary Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Richard Cooper Mailing Address 15512 27th Drive S	Date of Receipt 0 3 2 3 2 0 0 9	
City Mill Creek	State Zip Code WA 98012	Transaction ID: SA11AI.5030 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer The Everett Clinic Receipt For:	Occupation CEO	1000.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Louis A Corsaro Mailing Address 355 N Salem Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code NY 10509	Transaction ID: SA11AI.5004
Brewster FEC ID number of contributing federal political committee.	NY 10509	Amount of Each Receipt this Period 300.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SURTOTAL of Receipts This Page (ontions	d)	1550.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 32 (check only one) X 11a
0	r for commercial purposes, other than using th	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Medical Group Association	PAC	
۸.	Full Name (Last, First, Middle Initial) Harold Dash, MD		Date of Receipt
	Mailing Address 1928 151st. Street SE		03 23 2009
	City Mill Creek	State Zip Code WA 98012	Transaction ID: SA11AI.5042 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 30012	1000.00
	Name of Employer The Everett Clinic	Occupation President, Board Chairman	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
- 3.	Full Name (Last, First, Middle Initial) Sheryl Ann Dreyer		Date of Receipt
	Mailing Address 7808 171st Streer SV	03 / 23 / 2009	
	City	Transaction ID: SA11AI.5034	
	Edmonds	WA 98026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer The Everett Clinic	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Albert W. Fisk, M.D.		Date of Receipt
	Mailing Address 1027 Marine View Dri	ive	03 21 2009
	City	State Zip Code	Transaction ID: SA11AI.5009
	Mukilteo FEC ID number of contributing federal political committee.	WA 98275	Amount of Each Receipt this Period 1000.00
	Name of Employer The Everett Clinic	Occupation Medical Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Г			2500.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Medical Group Associat	and Statements may not be sold or used by any per g the name and address of any political committee ion PAC	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Beverly F Frank Mailing Address 4 Butternut Hollow		Date of Receipt
City Greenwich	State Zip Code CT 06830	Transaction ID: SA11AI.5025 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt Kisco Medical Group Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Jane M. Geders, MD Mailing Address 1 Cold Spring Cou	rt	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5024
Mt. Kisco FEC ID number of contributing federal political committee.	NY 10549	Amount of Each Receipt this Period 500.00
Name of Employer Mt. Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Regina M Giuffrida Mailing Address 5 Reynolds Lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4964
Katonah FEC ID number of contributing federal political committee.	NY 10536	Amount of Each Receipt this Period 500.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Descints This Dess (entire	al)	1500.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 32 (check only one) X
, c	any information copied from such Reports and r for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any personness of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Medical Group Association PAC			
۸.	Full Name (Last, First, Middle Initial) Dr. Jonathan Goldberg			Date of Receipt
	Mailing Address 255 Soundview Avenue			03 23 2009
	City White Plains	State NY	Zip Code 10606	Transaction ID: SA11AI.5023 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Mount Kiisco Medical Group	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) John Goodman			Date of Receipt
	Mailing Address 18420 Olympic View Drive			03 25 2009
	City State Zip Code		Transaction ID: SA11AI.5044	
	Edmonds FEC ID number of contributing federal political committee.	C	98020	Amount of Each Receipt this Period
	Name of Employer The Everett Clinic	Occupation physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
 ;.	Full Name (Last, First, Middle Initial) Jacob Handszer			Date of Receipt
	Mailing Address 8 Brady Lane			03 11 2009
	City	State NY	Zip Code	Transaction ID: SA11AI.4981
	Somers FEC ID number of contributing federal political committee.	C	10589	Amount of Each Receipt this Period 250.00
	Name of Employer Mount Kisco Medical Group	Occupation Physician		
	Receipt For: Primary General Other (specify) ▼	_,	Year-to-Date ▼ 250.00	
Γ				1750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14/32 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)		not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Medical Group Associatio Full Name (Last, First, Middle Initial)	on PAC		<u> </u>
Scott D. Hayworth, MD Mailing Address 90 South Bedford Ro	oad		Date of Receipt
City	State	Zip Code	0 3 1 0 2 0 0 9 Transaction ID: SA11AI.4986
Mount Kisco	NY	10549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Mount Disco Med. Grp.	Occupation Presiden	n t and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Nilo Herrera			Date of Receipt
Mailing Address 358 Grapehollow Ro	oad		03 23 7 2009
City	State	Zip Code	Transaction ID: SA11Al.5022
Holmes	NY	12531	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Mt Kisco Medical Group	Occupation physician		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Marc Hertz			Date of Receipt
Mailing Address 204 Country Ridge			03 10 7 9 9
City	State	Zip Code	Transaction ID: SA11AI.4995
Rye Brook	NY	10573	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Mount kisco Medical Group	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional)		2500.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 32 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Medical Group Association	e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> A.	Full Name (Last, First, Middle Initial) Martin Hickey Mailing Address 12809 W Dodge Road City Omaha	State NE	Zip Code 68154	Date of Receipt 0 3 2 3 2 0 0 9 Transaction ID: SA11AI.5038 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Alegent Health Receipt For: Primary General Other (specify) ▼	Medical		
- 3.	Full Name (Last, First, Middle Initial) Michael Horowitz Mailing Address 545 Wellington Drive			Date of Receipt 0 3 1 2 2 0 0 9
	City Wychoff	State NJ	Zip Code 07481	Transaction ID: SA11AI.4965 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mount Kisco Medical Group	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
_ ;.	Full Name (Last, First, Middle Initial) Alice Huong	1		Date of Receipt
	Mailing Address 18 Noah Bridge Place			03 / 23 / 4 9 9
	City Mt. Kisco	State NY	Zip Code 10549	Transaction ID: SA11AI.5021 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mt Kisco Medical Group	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Medical Group Association	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
A .	Full Name (Last, First, Middle Initial) Loren Ihle Mailing Address 625 9th Street City Snohomish FEC ID number of contributing federal political committee. Name of Employer The Everett Clinic Receipt For: Primary General Other (specify)	State WA C Occupatio Physicial Aggregate		Date of Receipt 0 3
 З.	Full Name (Last, First, Middle Initial) Marilyn Jacobowitz Mailing Address 212 Sunnyridge Road City Harrison FEC ID number of contributing federal political committee. Name of Employer Mt Kisco Medical Group	State NY C Occupatio Physicia		Date of Receipt M M M / D D / Y Y Y Y Y Y O 3 / 2 3 / 2 0 0 9 Transaction ID: SA11AI.5020 Amount of Each Receipt this Period 500.00
 C.	Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Steve Jacobson Mailing Address 3118 139th ave SE	Aggregate	e Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Snohomish FEC ID number of contributing federal political committee. Name of Employer The Everett Clinic Receipt For: Primary General	State WA C Occupatio Physicial Aggregate	n e Year-to-Date ▼	Transaction ID: SA11AI.5036 Amount of Each Receipt this Period 1000.00
s	Other (specify) ▼ UBTOTAL of Receipts This Page (optional)		1000.00	2000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17/32 (check only one) X 11a 11b 11c 12
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Medical Group Associati	on PAC	
Full Name (Last, First, Middle Initial) Helene Kaminski		Date of Receipt
Mailing Address 6 Hobby Lane City	State Zip Code	0 3 1 3 2 0 0 9 Transaction ID: SA11AI.5001
Bedford	NY 10506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Evan Karas		Date of Receipt
Mailing Address 5 Madison Brook F		03 / 23 / 2009
City	State Zip Code	Transaction ID: SA11AI.5019
Katonah	NY 10536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Jeffrey Keller	- 1	Date of Receipt
Mailing Address 30 Gedney Way		03 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chappaqua	State Zip Code NY 10514	Transaction ID: SA11AI.5013
FEC ID number of contributing federal political committee.	C 10314	Amount of Each Receipt this Period
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (options		2500.00

SCHEDULE A	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 32 (check only one) X 11a
Any information copied or for commercial purp	from such Reports and Statements oses, other than using the name and	may not be sold or used by any persol address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMIT American Medical	TTEE (In Full) al Group Association PAC		
Full Name (Last, Fir Ronald H. Kirkland, N			Date of Receipt
Mailing Address	07 Tuckahoe Road		03 30 2009
City	State	zip Code	Transaction ID: SA11AI.5050
<u>Jackson</u>	TN	38305	Amount of Each Receipt this Period
FEC ID number of of federal political com			1000.00
Name of Employer The Jackson Clinic	P.A. Occup	ation man of the Board	
Receipt For: Primary Other (specify	General	gate Year-to-Date ▼ 1000.00]
Full Name (Last, Fir			Date of Receipt
	Brentwood Drive		03 15 2009
City	State	<u>'</u>	Transaction ID: SA11AI.5011
<u>Poughkeepsie</u>	NY	12603	Amount of Each Receipt this Period
FEC ID number of of federal political com			500.00
Name of Employer Mount Kisco Medic	al Group MD	ation	
Receipt For: Primary Other (specify	General	gate Year-to-Date ▼ 500.00]
Full Name (Last, Fir	rst, Middle Initial)		Date of Receipt
	2503 52nd PL W		03 24 2009
City	State	'	Transaction ID: SA11AI.5043
<u>Mukilteo</u>	WA	98275	Amount of Each Receipt this Period
FEC ID number of of federal political com			1000.00
Name of Employer The Everett Clinic	Occup Physi		
Receipt For: Primary Other (specify	General	gate Year-to-Date ▼ 1000.00]
SUBTOTAL of Receip	ots This Page (optional)		2500.00

TOTAL This Period (last page this line number only)

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate for each cate Detailed Sum	e schedule(s) gory of the	FOR LINE NUMBER: PAGE 19 / 32 (check only one) X
ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	ne name and address of any polit	ised by any person fical committee to so	or the purpose of soliciting contributions
American Medical Group Association	IPAC		
Full Name (Last, First, Middle Initial) Daniel Leonard Mailing Address 16 Bessel Lane			Date of Receipt
			03 12 2009
City	State Zip Code		Transaction ID: SA11AI.4972
Chappaqua	NY 10514		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Mount Kisco Medical Group	Occupation MD		
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Thomas J Lester			Date of Receipt
Mailing Address 111 Bedford Road			$ \begin{bmatrix} M & M \\ O & 3 \end{bmatrix} / \begin{bmatrix} D & D \\ O & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix} $
City	State Zip Code		Transaction ID: SA11AI.4994
Katonah	NY 10536		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Mt Kisco Medical Group	Occupation physician		
Receipt For:	Aggregate Year-to-Date	7	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Abe Levy			Date of Receipt
Mailing Address 15 Sarles Road			$ \begin{bmatrix} M & M & M \\ O & 3 \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix} $
City	State Zip Code		Transaction ID: SA11AI.4987
Pound Ridge	NY 10576		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Mount Kisco Medical Group	Occupation Medical Director & Chic	•	
Receipt For:	Aggregate Year-to-Date	,	
Primary General Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional)			2250.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Medical Group Association	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark E. Lieb Mailing Address 110 Bedford Road City Mt Kisco FEC ID number of contributing federal political committee. Name of Employer Mt Kisco Medical Group Receipt For: Primary General Other (specify)	State Zip Code NY 10549 C Occupation Physician Aggregate Year-to-Date 500.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Matthew Mannini Mailing Address 37 Londonderry Lane City Somers FEC ID number of contributing federal political committee. Name of Employer Mt Kisco Medical Group Receipt For: Primary General Other (specify)	State Zip Code NY 10589 C Occupation Physician Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ronen Marmur, MD Mailing Address 446 Central Park Wes Apt. 7B City New York FEC ID number of contributing federal political committee. Name of Employer Mt. Kisco Medical Group Receipt For: Primary General Other (specify)	State Zip Code NY 10025 C Occupation Physician Aggregate Year-to-Date 500.00	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional) .		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 32 (check only one) X
· · ·	d Statements may not be sold or used by any personant the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Medical Group Association	on PAC	
Full Name (Last, First, Middle Initial) Timothy D Mattison		Date of Receipt
Mailing Address 90 South Bedford R City	Oad State Zip Code	0 3 1 1 2 0 0 9 Transaction ID: SA11Al.4980
Mount Kisco	NY 10549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Mount Kisco Medical Group	Occupation MD	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Kevin McCune		Date of Receipt
Mailing Address 1775 Dempster		03 10 2009
City	State Zip Code	Transaction ID: SA11AI.4990
Park Ridge	IL 60068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Advocate Health	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Deborah M Mollo		Date of Receipt
Mailing Address 46 Fox Den road		03 11 2009
City Mt Kisco	State Zip Code NY 10549	Transaction ID: SA11AI.4973 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional		1750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Medical Group Association	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Antoinette Nigro Mailing Address 90 S. Bedford Road	Ctoto	7in Codo	Date of Receipt 0 3 1 2 2 0 0 9
	City Mount Kisco	State NY	Zip Code 10549	Transaction ID: SA11AI.4963 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10349	500.00
	Name of Employer Mount Kisco Medical Group	Occupation MD Aggregate	n e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Marshal D. Peris, MD Mailing Address 17 Cornel Drive			Date of Receipt 0 3 1 1 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.4984
	Goldens Bridge	NY	10526	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mount Kisco Med. Grp.	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	, ' · · · ·	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Maxwell B Plesset			Date of Receipt
	Mailing Address 7 Brevoort Place			03 26 2009
	City	State	Zip Code	Transaction ID: SA11AI.5047
	Chappaquq	NY	10514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Mount Kisco Medical Group	Occupatio MD	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
[SUBTOTAL of Receipts This Page (optional)			1250.00
Γ.	FOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 32 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Medical Group Association	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Emily Puntillo			Date of Receipt
Mailing Address 286 Hall Avenue City	State	Zip Code	0 3 1 2 2 0 0 9 Transaction ID: SA11AI.4998
West Harrision FEC ID number of contributing federal political committee.	C	10604	Amount of Each Receipt this Period 500.00
Name of Employer Mt Kisco Medical Group	Occupation Physician		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) John Raffalli Mailing Address 139 Pleasantville R	load		Date of Receipt
		Zin Codo	03 11 2009
City Pleasantville	State NY	Zip Code 10570	Transaction ID: SA11AI.4976 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Mount Kisco Medical Group	Occupation Hospitali		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Kismore Ranade			Date of Receipt
Mailing Address 37 Griffith Lane			03 23 2009
City	State	Zip Code	Transaction ID: SA11AI.5017
Ridgefield	CT	06877	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Mt Kisco Medical Group	Occupation Physician	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)		1250.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 32 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Medical Group Association	PAC		
۷.	Full Name (Last, First, Middle Initial) Jill I Ratner			Date of Receipt
	Mailing Address 14 Shoshone Drive City	State	Zip Code	0 3 1 1 2 0 0 9 Transaction ID: SA11AI.4997
	<u>Katonah</u>	NY	10536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mount Kisco Medical Group	Occupatio MD	n	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Roger N Riechers	1		Date of Receipt
	Mailing Address 250 Byram lake Road			03 / 13 / 2009
	City	State	Zip Code	Transaction ID: SA11AI.5003
	mount Kisco	NM	10549	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Mount Kisco Medical Group	Occupatio Physicial		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Douglas A Roth	1		Date of Receipt
	Mailing Address 110 Bedford Road			03 / 12 / 2009
	City	State	Zip Code	Transaction ID: SA11AI.4974
	Mt. Kisco	NY	10549	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Mt Kisco Medical Group	Occupatio Physicial	า	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		2500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 32 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Medical Group Associatio	n PAC	
Full Name (Last, First, Middle Initial) Jeffrey Schachne		Date of Receipt
Mailing Address 17 Mohawk Trail City	State Zip Code	0 3 2 4 2 0 0 9 Transaction ID: SA11AI.5040
Katonah	NY 10536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt Kisco Medical Group	Occupation physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) John Scott		Date of Receipt
Mailing Address 9 Deer Creek Lane		03 / 11 / 2009
City	State Zip Code	Transaction ID: SA11AI.4978
Mt. Kisco	NY 10549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Mount Kisco Medical Group	Occupation Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Daniel E Shapiro		Date of Receipt
Mailing Address 41 Weavers Hill		03 / 24 / 2009
City <u>Mount Kisco</u>	State Zip Code NY 10549	Transaction ID: SA11AI.5041 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mt Kisco Medical Group	Occupation physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional		2000.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 32 (check only one) X 11a
or for	formation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full) merican Medical Group Association I	name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
/ Fu	Il Name (Last, First, Middle Initial)	. AO		Date of Receipt
_	ailing Address 3648 Mount Vernon La	ane		03 / 03 / 2009
Cit		State MN	Zip Code	Transaction ID: SA11AI.4993
FE	oodbury C ID number of contributing deral political committee.	C	58129	Amount of Each Receipt this Period 250.00
Na Pa	me of Employer rrk Nicollet	Occupatio Administ		
Re	ceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Sh Sh	Il Name (Last, First, Middle Initial) awn L. Slack			Date of Receipt
IVIE	ailing Address 5132 27th Avenue W.			03 23 2009
Cit	•	State	Zip Code	Transaction ID: SA11AI.5048
FE	verett C ID number of contributing deral political committee.	C	98203	Amount of Each Receipt this Period 500.00
Na Th	me of Employer e Everett Clinic	Occupatio MD	n	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	II Name (Last, First, Middle Initial) sester A. Speed			Date of Receipt
Ма	ailing Address 6004 Cobalt Road			03 10 7 2009
Cit	-	State MD	Zip Code	Transaction ID: SA11AI.4991
FE	ethesda C ID number of contributing deral political committee.	C	20816	Amount of Each Receipt this Period 1000.00
Na An oc	me of Employer nerican Medical Grp. Ass-	Occupatio Vice Pres		
	oceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
our.	TOTAL of Receipts This Page (optional)	l		1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 32 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Medical Group Association F	name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jodi A Sutton Mailing Address 6 Pipity Brook Lane City Bedford FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify)	State Zip Code NY 10506 C Occupation Physician Aggregate Year-to-Date 500.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Ronald Wallach Mailing Address 39 Laurelton Road City Mt Kisco FEC ID number of contributing federal political committee. Name of Employer Mt Kisco Medical Group Receipt For: Primary General Other (specify)	State Zip Code NY 10549 C Occupation Physician Aggregate Year-to-Date 500.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Michael S Wein Mailing Address 71 Harris Road City Katonah FEC ID number of contributing federal political committee. Name of Employer Mount Kisco Medical Group Receipt For: Primary General Other (specify)	State Zip Code NY 10536 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: SA11AI.4982 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 32 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Medical Group Association	PAC		
A.	Full Name (Last, First, Middle Initial) Gary Wenick Mailing Address 2050 route 22			Date of Receipt
	City	State	Zip Code	0 3 1 2 2 0 0 9 Transaction ID: SA11Al.4967
	Brewster	NJ	10509	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Mt Kisco Medical Group	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) David J Yasgur			Date of Receipt
	Mailing Address 11 Katonah Crossing			03 / 12 / 2009
	City	State	Zip Code	Transaction ID: SA11AI.4970
	Katanah FEC ID number of contributing federal political committee.	C	10536	Amount of Each Receipt this Period 500.00
	Name of Employer Mt Kisco Medical Group	Occupation Physicar		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- >.	Full Name (Last, First, Middle Initial) Roy Yawn			Date of Receipt
	Mailing Address 826 19th St NE			03 / 07 / 4 9 9
	City	State	Zip Code	Transaction ID: SA11AI.4985
	Rochester FEC ID number of contributing federal political committee.	C	55906	Amount of Each Receipt this Period 250.00
	Name of Employer Olmstead Medical Group	Occupation Physicia		
	Receipt For: Primary General Other (specify) ▼	_,	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1750.00
F	TOTAL This Period (last page this line numbe			

A.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 29/32 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 14 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) American Medical Group Association PAC Full Name (Last, First, Middle Initial) Date of Receipt Maria Linda Zapson Mailing Address 111 Bedford Road 03 12 2009 City State Zip Code Transaction ID: SA11AI.4969 Katanah NY 10536 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Mt Kisco Medical Group Occupation Physician Receipt For: Aggregate Year-to-Date Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	•	42801.00

TEMPTED DIODUDOEMENTO		Use separate schedule(s)		(check on		E NUMBER: PAGE 30 / 32 ily one)							
<u>п</u>	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	Х	23 28b	$\mathbf{\Box}$	24 28c	$\boldsymbol{\sqcup}$	25 29	26 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American Medical Group Association PAC	e and address of any politication											
<u>∠</u> •	Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS Mailing Address BOX 586					Trans Date		sburs) ŏ 9	Y
	City HELENA	State Zip Code MT 59624				Amou	int o	f Each	n Disb	urser	-	this Pe	eriod
	Purpose of Disbursement Candidate Name			ateg			•				100	0.00	
	• 🗎 –	ement For: 2014 Primary General Other (specify)		. , ,									
3.	Full Name (Last, First, Middle Initial) MIKE THOMPSON FOR CONGRESS Mailing Address 5429 Madison Avenue					Trans Date		-	emen) ŏ 9	Y
	City Sacramento Purpose of Disbursement cash contribution Candidate Name	State Zip Code CA 95841	Ca	ateg	orv/	Amou	int of	f Each	n Disb	urser		this Pe	eriod
	X III	ement For: 2010 Primary General Other (specify)		Тур	-								
	Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SEN	ATE CAMPAIGN				Trans Date	of Di	sburs	emen				
	Mailing Address PO BOX 3662					0 ^M 3	М	2	26	/ L	ž) ŏ 9	Y
	City SEATTLE	State Zip Code WA 98124				Amou	int o	f Each	n Disb	urser			eriod
	Purpose of Disbursement Cash contribution Candidate Name			ateg		L.		•			150	0.00	
		ement For: 2010 Primary General Other (specify)	•										

Image# 29992799945

S	CHEDULE B (FEC Form 3X)	\	FOD LIVE	NUMBER. DAGE 04 / CO
	`	Use separate schedule(s)	(check onl	NUMBER: PAGE 31/32
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and for commercial purposes, other than using th	•		· ·
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
/	American Medical Group Association	n PAC		
	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.5056
	WYDEN FOR SENATE			Date of Disbursement
				03 23 7 2009
	Mailing Address PO BOX 3498			03 23 2009
	City	State Zip Code		Amount of Each Disbursement this Period
	PORTLAND	OR 97208		
	Purpose of Disbursement			1000.00
	Candidate Name		Category/	
			Туре	
		isbursement For: 2010		
	X Senate	X Primary General		
	President	Other (specify)		
	State: OR District: 00			

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	—	5000.00

A.

В.

District:

ago# 200021000 10		
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page FOR LIN (check of the page) 21b	PAGE 32 / 32 IE NUMBER: PAGE 32 / 32 Inly one) 22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Medical Group Association PAC		
Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 1206		Transaction ID: SB29.4900 Date of Disbursement M M M / D 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code CA 92822-8713	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Fees Candidate Name	Category/	54.36
Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) Chester A. Speed		Transaction ID: SB29.5051 Date of Disbursement
Mailing Address 6004 Cobalt Road		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	State Zip Code MD 20816	Amount of Each Disbursement this Period
Purpose of Disbursement postage reimbursement Candidate Name	Category/ Type	320.02
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	

SUPTOTAL of Dishursements This Page (entional)		374.38
SUBTOTAL of Disbursements This Page (optional)		91 1109
TOTAL This Period (last page this line number only)	•	374.38

State: