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## **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 CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDE-RAL(PAC) 915 WILSHIRE BLVD SUITE 1620 ADDRESS (number and street) Check if different than previously LOS ANGELES CA 90017 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS **AMENDED** NEW C00461756 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: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) 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 Χ Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2009 12 3 1 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Donald H. Crane Type or Print Name of Treasurer Electronically Filed by Donald H. Crane 04 15 2010 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)

FE6AN026

Only

# **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/78

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC)

<sup>®</sup> D 0 1 3 1 07 2009 12 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date Cash on Hand (a) 2009° 0.00 January 1 (b) Cash on Hand at 11100.18 Begining of Reporting Period ..... 117585.57 128685.75 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 128685.75 128685.75 6(a) and 6(c) for Column B) ..... 60836.76 60836.76 Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 67848.99 67848.99 (subtract Line 7 from Line 6(d)) ..... Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

### For further information contact:

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

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 / 78

Write or Type Committee Name

CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC)

Report Covering the Period:

From:

м м 0 7 <sup>D</sup> 0 1

2009

та.

м м 1 2 <sup>D</sup> 3 1

<sup>Y</sup> 2009

	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)	105535.00	116535.00
	(ii) Unitemized	12025.00	12125.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	117560.00	128660.00
	(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)	117560.00	128660.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
10.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	25.57	25.75
8.	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	117585.57	128685.75
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	117585.57	128685.75

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 78

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	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	436.76	436.76
	Expenditures(c) Total Operating Expenditures	430.76	430.70
	(add 21(a)(i), (a)(ii) and (b))	436.76	436.76
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	60400.00	60400.00
24.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)		0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	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		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))		
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	60836.76	60836.76
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	60836.76	60836.76

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 78

II	II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) Line 11(d), page 3)	117560.00	128660.00
	Contribution Refunds Line 28(d))	0.00	0.00
	ontributions (other than loans) act Line 34 from Line 33)	117560.00	128660.00
	Federal Operating Expenditures .ine 21(a)(i) and Line 21(b))	436.76	436.76
	ts to Operating Expenditures Line 15, page 3)	0.00	0.00
	perating Expenditures act Line 37 from Line 36)	436.76	436.76

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 78 (check only one)    X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions
		GROUPS FEDERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
١.	Full Name (Last, First, Middle Initial) Nazli Ahmed, MD		Date of Receipt
	Mailing Address 29 Decente		08 05 2009
	City Irvine	State Zip Code CA 92614	Transaction ID: SA11AI.4745  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Greater Newport Physicians	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) William Allen, MD	Date of Receipt	
	Mailing Address 912 Crest Vista Dr.		08 10 2009
	City	State Zip Code	Transaction ID: SA11AI.4553
	Monterey Park FEC ID number of contributing	CA 91754	Amount of Each Receipt this Period 250.00
	federal political committee.	0	
	Name of Employer HealthCare Partners	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Kenneth Alpern, MD		Date of Receipt
	Mailing Address 1665 Scenic Avenue	07 02 2009	
	City	State Zip Code	Transaction ID: SA11AI.4589
	Costa Mesa FEC ID number of contributing federal political committee.	CA 92626	Amount of Each Receipt this Period  500.00
	Name of Employer Talbert Medical Group	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Г			1050.00

SCHEDULE A (FEC F ITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other  NAME OF COMMITTEE (In F	than using the name and addr ıll)	ess of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.  N COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle I Stan Arnold, MD Mailing Address 11301 Date	<u> </u>		Date of Receipt  0 8 0 5 2 0 0 9
City Santa Ana	State CA	Zip Code 92705	Transaction ID: SA11AI.4675
FEC ID number of contributing federal political committee.	C	92703	Amount of Each Receipt this Period  500.00
Name of Employer Edinger Medical Group	Occupation Physician		
Receipt For:  Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle I Bart Asner, MD Mailing Address 11 Techno			Date of Receipt
City	State	Zip Code	1 0 3 0 2 0 0 9 Transaction ID: SA11AI.4576
Irvine	CA	92618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Monarch Healthcare	Occupation CEO		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle I Trina Austin, MD	nitial)		Date of Receipt
Mailing Address 2590 Park	Ave # 1		08 31 2009
City	State	Zip Code	Transaction ID: SA11AI.4629
Laguna Beach FEC ID number of contributing federal political committee.	CA CA	92651	Amount of Each Receipt this Period  250.00
Name of Employer Talbert Medical Group	Occupation Physician		
Receipt For:  Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Pa	ge (optional)		1750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A or	for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Joel Axelrod		Date of Receipt
	Mailing Address 1201 Winston Ave.	State 7'in Code	08 12 2009
	City San Marino	State Zip Code CA 91108	Transaction ID: SA11AI.4539  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1250.00
	Name of Employer HealthCare Partners	Occupation Physician Assistant (PAC)	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
_	Full Name (Last, First, Middle Initial) Rama Bathala, MD	Date of Receipt	
	Mailing Address 9930 Talbert Ave		07 21 2009
	City	State Zip Code	Transaction ID: SA11AI.4681
	Fountain Valley	CA 92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Talbert Medical Group	Occupation Physician	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  250.00	
_	Full Name (Last, First, Middle Initial) Steven Beal		Date of Receipt
	Mailing Address 12524 Avocado Way		10 07 2009
	City	State Zip Code	Transaction ID: SA11AI.4559
	Riverside FEC ID number of contributing federal political committee.	CA 92503	Amount of Each Receipt this Period  1000.00
	Name of Employer Talbert Medical Group	Occupation CIO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Γ,	SURTOTAL of Receipts This Page (optional)		2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate for each cate Detailed Sum	gory of the
Any information copied from such Reports ar or for commercial purposes, other than usinc	d Statements may not be sold or u	used by any person for the purpose of soliciting contributions ical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		TICAL ACTION COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Steven Beanes, MD		Date of Receipt
Mailing Address 834 Sonora RD		07 21 2009
City	State Zip Code	Transaction ID: SA11AI.4590
Costa Mesa	CA 92626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Greater Newport Physicians	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	500.00
Full Name (Last, First, Middle Initial) Barry Behrstock, MD	Date of Receipt	
Mailing Address 1190 Baker Street S	08 10 2009	
City	State Zip Code	Transaction ID: SA11AI.4592
Costa Mesa	CA 92626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Greater Newport Physicians	Occupation Physician	
Receipt For:	Aggregate Year-to-Date	,
Primary General Other (specify) ▼		1000.00
Full Name (Last, First, Middle Initial) Ali Behzadnia, MD		Date of Receipt
Mailing Address 275 Victoria St. #1-	D	08 10 2009
City	State Zip Code	Transaction ID: SA11AI.4604
Costa Mesa	CA 92627	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Greater Newport Physicians	Occupation Physician	
Receipt For:    Primary   General	Aggregate Year-to-Date	
Other (specify)	0 0 0 0 0	300.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11:
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)	GROUPS FEDERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial)  A. Alan Beyer, MD		Date of Receipt
Mailing Address 10 Rodingham Dr		07 21 2009
City	State Zip Code	Transaction ID: SA11AI.4634
Newport Beach	CA 92660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Greater Newport Physicians	Occupation Physician	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Robert Blackman, MD	Date of Receipt	
Mailing Address 1025 W. Olympic B	vd	08 05 7 9 9 9
City	State Zip Code	Transaction ID: SA11AI.4412
Los Angeles	CA 90015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer HealthCare Partners	Occupation Physician	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Kimberly Blue		Date of Receipt
Mailing Address 1665 Scenic Avenue	e #100	08 05 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4503
Costa Mesa	CA 90755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Talbert Medical Group	Occupation Director of HCS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	)	2250.00
TOTAL This Period (last page this line numb	·	

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than  NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any per using the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
CA ASSOCIATION OF PHYSI RAL PAC)	CIAN GROUPS FEDERAL POLITICAL ACTIC	ON COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Nancy Boerner		Date of Receipt
Mailing Address 7 Technology		08 05 2009
City Irvine	State Zip Code CA 92618	Transaction ID: SA11AI.4577
FEC ID number of contributing federal political committee.	CA 92010	Amount of Each Receipt this Period 500.00
Name of Employer Monarch Healthcare	Occupation Senior Medical Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial Matthew Boone, MD		Date of Receipt
Mailing Address 9900 Talbert S	uite 302	08 / 05 / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4683
Fountain Valley	CA 92708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Edinger Medical Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial Anita Boorman, DO		Date of Receipt
Mailing Address 9071 Suva St		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.4422
<u>Downey</u>	CA 90240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Talbert Medical Group	Occupation Physician	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	otional)	1300.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 12 / 78   (check only one)		
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)					
CA ASSOCIATION OF PHYSICIAN RAL PAC)	GROUPS FEI	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-		
Full Name (Last, First, Middle Initial) Richard Boos, MD			Date of Receipt		
Mailing Address 601 Torrance Blvd.			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.4449		
Redondo Beach	CA	90277	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer HealthCare Partners Medic- al Group	Occupatio Physicia				
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General	, ,	250.00	1		
Other (specify) ▼		200.00	1		
Full Name (Last, First, Middle Initial) Elliott Brunner			Date of Receipt		
Mailing Address 19191 S. Vermont			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
City	State	Zip Code	Transaction ID: SA11AI.4465		
Torrance	CA	90502	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer HealthCare Partners	Occupatio Physicia				
Receipt For:	Aggregate	e Year-to-Date ▼			
Primary General Other (specify) ▼		250.00	]		
Full Name (Last, First, Middle Initial) Barbara Bruton, MD			Date of Receipt		
Mailing Address 502 Torrance Blvd			08 05 2009		
City	State	Zip Code	Transaction ID: SA11AI.4450		
Redondo Beach	CA	90277	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer HealthCare Partners	Occupatio Physicia				
Receipt For:		e Year-to-Date ▼			
Primary General		500.00	1		
Other (specify) ▼		300.00			
			1000.00		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 78 (check only one)    X   11a
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
	, ,	ROUPS FEDERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Zan Calhoun		Date of Receipt
	Mailing Address 63 Eastfield Dr.  City	State Zip Code	0 8 1 0 2 0 0 9  Transaction ID: SA11AI.4731
	Rolling Hills	CA 90274	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer HealthCare Partners	Occupation Sr VP IS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Catherine Campion-Ritz, MD	Date of Receipt	
	Mailing Address 29 Sweet Bay		08 / 05 / Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.4560
	Irvine	CA 92603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Greater Newport Physicians	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Shelley Chacon, MD		Date of Receipt
	Mailing Address 5952 Littlefield Dr		07 21 2009
	City	State Zip Code	Transaction ID: SA11AI.4616
	Huntington Beach	CA 92648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Edinger Medical Group	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
			1750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Reports a	and Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 14 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIA RAL PAC)  Full Name (Last, First, Middle Initial)	CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION RAL PAC)		
Mailing Address 510 Superior Ave	Suite 290		Date of Receipt    M   M   C   D   C   Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: SA11AI.4644
Newport Beach  FEC ID number of contributing federal political committee.	CA	92663	Amount of Each Receipt this Period 500.00
Name of Employer Greater Newport Physicians	Occupatio Physicial		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Ratul Chatterjee	,		
Mailing Address 19582 Beach Blvd	,		
City	State	Zip Code	Transaction ID: SA11AI.4618
Huntington Beach	CA	92648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Greater Newport Physicians	Occupatio Physicia	n n Internal Medicine	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Raymond Chicoine	<b>'</b>		Date of Receipt
Mailing Address 11 Technology Dri	ive		10 30 2009
City Irvine	State CA	Zip Code 92618	Transaction ID: SA11AI.4578  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Monarch Healthcare	Occupatio Chief Op	n erating Officer	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)		2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial)  William Chin, MD		Date of Receipt
Mailing Address 19191 S. Vermont Ave	enue; s-200 State Zip Code	07 02 2009
City Torrance	CA 90502	Transaction ID: SA11AI.4466  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer HealthCare Partners Medic- al Group Receipt For:  Primary General Other (specify) ▼	Occupation Executive Medical Director  Aggregate Year-to-Date   1250.00	]
Full Name (Last, First, Middle Initial) Ming Chong, MD		Date of Receipt
Mailing Address 1323 Vandyke Rd.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: SA11AI.4540
San Marino	CA 91108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HealthCare Partners	Occupation Physician	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Colleen Coleman, MD	<u> </u>	Date of Receipt
Mailing Address 1407 Avocado Ave #30	03	08 05 7 9 9
City	State Zip Code	Transaction ID: SA11AI.4635
Newport Beach FEC ID number of contributing federal political committee.	CA 92660	Amount of Each Receipt this Period 300.00
Name of Employer Greater Newport Physicians	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1800.00
TOTAL This Period (last page this line number	•	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIA	nd Statements may not be sold or used by any period the name and address of any political committee.  N GROUPS FEDERAL POLITICAL ACTIO	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Daniel Cusator, MD  Mailing Address 330 Placentia Ave  City Newport Beach  FEC ID number of contributing federal political committee.  Name of Employer Nautilus / Greafer Newport Physicians Receipt For:	Ste 270  State Zip Code CA 92663  C  Occupation Chief Medical Officer  Aggregate Year-to-Date	Date of Receipt  10 02 2009  Transaction ID: SA11AI.4645  Amount of Each Receipt this Period  250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Nasrin Damoui, MD  Mailing Address 9930 Talbert Ave.	250.00	Date of Receipt
City Fountain Valley FEC ID number of contributing federal political committee.  Name of Employer Talbert Medical Group  Receipt For:	State Zip Code CA 92708  C  Occupation Physician  Aggregate Year-to-Date	Transaction ID: SA11AI.4684  Amount of Each Receipt this Period  250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Raffaele Davidovich, MD  Mailing Address 19066 Magnolia Av		Date of Receipt    M
City Huntington Beach FEC ID number of contributing federal political committee.	State Zip Code CA 92646	Amount of Each Receipt this Period  250.00
Name of Employer Talbert Medical Group  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than  NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any persusing the name and address of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial John Debenham, MD  Mailing Address 540 Dalewood		Date of Receipt  0 8 0 5 2 0 0 9
City	State Zip Code	Transaction ID: SA11AI.4712
<u>Orinda</u>	CA 94563	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Berkeley Orthopaedic Medi- cal Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial Lori DeBold, MD		Date of Receipt
Mailing Address 9930 Talbert A	Ave	08 31 2009
City	State Zip Code	Transaction ID: SA11AI.4685
Fountain Valley  FEC ID number of contributing federal political committee.	CA 92708	Amount of Each Receipt this Period  300.00
Name of Employer Talbert Medical Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial Paulina De Quiroz, MD		Date of Receipt
Mailing Address 1665 Scenic A	ve. Suite 100	0 8 0 5 2 0 0 9
City	State Zip Code	Transaction ID: SA11AI.4594
Costa Mesa	CA 92626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Talbert Medical Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (c	ptional)	1050.00

EMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
y information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Karen Don, MD		Date of Receipt
		08 05 2009
	-	Transaction ID: SA11AI.4686  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32700	500.00
Name of Employer Edinger Medical Group	Occupation Physician	
Receipt For:  Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) S. lan Drew, MD		Date of Receipt
Mailing Address 8510 Balboa Blvd. #29	5	10 30 2009
City	State Zip Code	Transaction ID: SA11AI.4548
Northridge	CA 91325	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Heritage Provider Network	Occupation Physiciahn	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Thomas Duralde, MD		Date of Receipt
Mailing Address 452 27th St.		07 21 2009
City	State Zip Code	Transaction ID: SA11AI.4428
		Amount of Each Receipt this Period
federal political committee.	C	250.00
al Group	Occupation Physician	
	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
IIPTOTAL of Possints This Page (entional)		1750.00
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GI RAL PAC) Full Name (Last, First, Middle Initial) Karen Don, MD Mailing Address 9900 Talbert Ave #302 City Fountain Valley FEC ID number of contributing federal political committee.  Name of Employer Edinger Medical Group  Receipt For: Primary General Other (specify)  City Northridge FEC ID number of contributing federal political committee.  Name (Last, First, Middle Initial) S. lan Drew, MD Mailing Address 8510 Balboa Blvd. #29  City Northridge FEC ID number of contributing federal political committee.  Name of Employer Heritage Provider Network  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Thomas Duralde, MD Mailing Address 452 27th St.  City Manhattan Beach FEC ID number of contributing federal political committee.  Name of Employer HealthCare Partners Medical Group Receipt For: Primary General Other (specify)  General Other (specify)  General Other (specify)	CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION RAL PAC)  Full Name (Last, First, Middle Initial) Karen Don, MD  Mailing Address 9900 Talbert Ave #302  City State Zip Code Fountain Valley CA 92708  FEC ID number of contributing federal political committee.  Name of Employer Edinger Medical Group Physician  Receipt For: Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) S. lan Drew, MD  Mailing Address 8510 Balboa Blvd. #295  City State Zip Code CA 91325  City State Zip Code CA 90266  FUIl Name (Last, First, Middle Initial) Thomas Duralde, MD  Mailing Address 452 27th St.  City State Zip Code CA 90266  FEC ID number of contributing federal political committee.  City State Zip Code CA 90266  FEC ID number of contributing federal political committee.  City State Zip Code CA 90266  FEC ID number of contributing federal political committee.  City State Zip Code CA 90266  CA 90266  CA 90266  CA 90266  CC 90266

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 78 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and addr	ress of any political committee to	solicit contributions from such committee.
CA ASSOCIATION OF PHYSICIAN GI RAL PAC)	ROUPS FED	ERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) David Eppard, MD			Date of Receipt
Mailing Address 3565 Del Amo Blvd			08 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.4477
Torrance	CA	90503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer HealthCare Partners Medic-	Occupation		
al Group	,	/ Cardiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Robert Eppley, MD	l		Date of Receipt
Mailing Address 2999 Regent St. Suite	225		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.4726
Berkeley	CA	94705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Cal Sports and Orthopaedic Institute I	Occupation Orthopaed	dic Surgeon	
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Amelia Erickson			Date of Receipt
Mailing Address 2901 Coleridge Drive			08 18 2009
City	State	Zip Code	Transaction ID: SA11AI.4496
Los Alamitos	CA	90720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Talbert Medical Group	Occupation Physician	/Talbert BOD	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		······	1000.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 78 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
CA ASSOCIATION OF PHYSICI RAL PAC)	AN GROUPS FEDERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Tim Ferguson, MD		Date of Receipt
Mailing Address 210 S. Grand Av	e #400	08 05 2009
City	State Zip Code	Transaction ID: SA11AI.4551
Glendora	CA 91741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self	Occupation Family Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ronald Fischman, MD	I	Date of Receipt
Mailing Address 3300 E. South St	t. #308	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: SA11Al.4514
Long Beach	CA 90805	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Southland Management Group Inc.	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	]
Full Name (Last, First, Middle Initial) Austin Fite, MD	I	Date of Receipt
Mailing Address 1474 Paseo De C	Oro	08 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4431
Pacific Palisades	CA 90272	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer HealthCare Partners Med Grp	Occupation Physician / Internist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	onal)	2500.00

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 21 / 78 (check only one)	
ITEMIZED RECEIPTS		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17	
Any information copied from such Reports and Stator for commercial purposes, other than using the na	tements may ame and add	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.	
NAME OF COMMITTEE (In Full)				
CA ASSOCIATION OF PHYSICIAN GRORAL PAC)	OUPS FEL	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-	
Full Name (Last, First, Middle Initial) Tamara Fogarty, MD			Date of Receipt	
Mailing Address 24782 Red Lodge PI			$\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$	
City	State	Zip Code	Transaction ID: SA11AI.4632	
Laguna Hills	CA	92653	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		500.00	
Name of Employer Edinger Medical Group	Occupation Physician			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Baruch Fogel, MD			Date of Receipt	
Mailing Address 3333 Michelson Drive Su	uite 735		08 05 7 2009	
City	State	Zip Code	Transaction ID: SA11AI.4570	
Irvine	CA	92612	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		1000.00	
Name of Employer Western Medical Management LLC	Occupation Managing			
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General Other (specify) ▼		1000.00		
Full Name (Last, First, Middle Initial) Stewart Fordham, MD			Date of Receipt	
Mailing Address 1025 W. Olympic Blvd			10 13 2009	
City	State	Zip Code	Transaction ID: SA11AI.4413	
Los Angeles  FEC ID number of contributing federal political committee.	CA	90015	Amount of Each Receipt this Period 625.00	
Name of Employer HealthCare Partners	Occupation Physician		7	
Receipt For:  Primary General  Other (specify)		Year-to-Date ▼ 625.00		
SUBTOTAL of Receipts This Page (optional)			2125.00	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 78 (check only one)    X   11a
or for com	nmercial purposes, other than using the OF COMMITTEE (In Full) SSOCIATION OF PHYSICIAN OF	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Na	ame (Last, First, Middle Initial) el Forsling, MD g Address 3547 Burritt Way			Date of Receipt
City	rescenta	State CA	Zip Code 91214	1 0 0 7 2 0 0 9  Transaction ID: SA11AI.4543
FEC II	D number of contributing I political committee.	C	91214	Amount of Each Receipt this Period  250.00
<u>al Gro</u> Receir I		Occupation Podiatris  Aggregate		
Annem	ame (Last, First, Middle Initial) hary Franks, MD g Address 1650 Walnut St.	1		Date of Receipt  0 8 1 0 2 0 0 9
City		State	Zip Code	Transaction ID: SA11AI.4728
<u>Berke</u>	eley	CA	94709	Amount of Each Receipt this Period
	O number of contributing I political committee.	C		1000.00
Berkel <u>Group</u>	of Employer ey Pediatric Medical / ABM		sian/Assoc Med Directo	
	or For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1000.00	
	ame (Last, First, Middle Initial) iredrick, MD			Date of Receipt
Mailing	g Address 19866 Magnolia			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	wastan Danak	State	Zip Code	Transaction ID: SA11AI.4608
FEC II	ngton Beach  O number of contributing I political committee.	CA	92646	Amount of Each Receipt this Period  500.00
Name Talber	of Employer t Medical Group	Occupation Physicia		
	ot For: Primary General Other (specify) ▼	_,	e Year-to-Date ▼ 500.00	
SURTO	FAL of Receipts This Page (optional).	1		1750.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 23 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Repo or for commercial purposes, other than to NAME OF COMMITTEE (In Full)	rts and Statements may not be susing the name and address of	sold or used by any persor any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
CA ASSOCIATION OF PHYSIC RAL PAC)	CIAN GROUPS FEDERAL	POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial)  Michael Gam			Date of Receipt
Mailing Address 1665 Scenic Av	/e		08 05 2009
City	•	Code	Transaction ID: SA11AI.4595
Costa Mesa	CA 926	626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Talbert Medical Group	Occupation CFO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Vinod Ghai, MD			Date of Receipt
Mailing Address 1951 Saleroso	Dr.		10 30 7 2009
City	· ·	Code	Transaction ID: SA11AI.4552
Rowland Heights	<u>CA</u> 917	748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer HealthCare Partners	Occupation Physician		
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-	-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Jay Goland, MD			Date of Receipt
Mailing Address 600 Saint Vince	ent		07 21 2009
City <u>Irvine</u>	·	Code 618	Transaction ID: SA11AI.4580  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Talbert Medical Group	Occupation Physician		1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 250.00	
SUBTOTAL of Receipts This Page (op	otional)	<b>)</b>	1375.00

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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 24 / 78	
•	Use separate schedule(s) for each category of the	(check only one)	
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12	
	2 stands carminary r age	13 14 15 16 17	
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and according to the commercial purposes.	ay not be sold or used by any perso ddress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)			
CA ASSOCIATION OF PHYSICIAN GROUPS FE RAL PAC)	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-	
Full Name (Last, First, Middle Initial) Less Granow		Date of Receipt	
Mailing Address 955 Overland Ct		07 21 7 2009	
City State	Zip Code	Transaction ID: SA11AI.4556	
San Diego CA	91773	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		250.00	
Name of Employer Arcadian Management Services  Occupation CFO	on		
	e Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial)		2. (2	
Valerie Green-Amos, MD		Date of Receipt	
Mailing Address 35 Linden Ave Unit 507	7:- 0-4-	08 10 2009	
City State	Zip Code	Transaction ID: SA11AI.4507	
Long Beach CA	90802	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		250.00	
Name of Employer Occupation Talbert Medical Group Physicia			
Receipt For:  Primary  General  Other (specify) ▼  Aggregat	e Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Catou Greenberg, MD		Date of Receipt	
Mailing Address 1441 Avocado Ave Ste 503		0 8 0 5 2 0 0 9	
City State	Zip Code	Transaction ID: SA11AI.4636	
Newport Beach CA	92660	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		750.00	
Name of Employer Occupation Greater Newport Physicians Physicians			
	e Year-to-Date	7	
Primary General Other (specify) ▼	750.00		
SUBTOTAL of Receipts This Page (optional)		1250.00	

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the I	atements may not name and addres:	be sold or used by any perso s of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GF RAL PAC)	ROUPS FEDEF	RAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Elaine Grodin, MD			Date of Receipt
Mailing Address 3611 Bellflower Blvd			07 21 2009
City	State	Zip Code	Transaction ID: SA11AI.4522
Long Beach	CA	90808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Edinger Medical Group	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Guy Guarige			Date of Receipt
Mailing Address 200 Powell St. Suite 83	0		07 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.4715
Emeryville	CA	94608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Alta Bates Medical Group	Occupation Chief Operat	ting Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Cynthia Guzman			Date of Receipt
Mailing Address 4909 Lakewood Blvd			10 13 2009
City	State	Zip Code	Transaction ID: SA11AI.4488
<u>Lakewood</u>	CA	90712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Coast Healthcare Manageme- nt	Occupation CEO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		·····	1750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	λ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 26 / 78   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)		•	
Full Name (Last, First, Middle Initial) Ted Halkias			Date of Receipt
Mailing Address 2612 Vista Dr.			M M / D D / Y Y Y Y
City	State	Zip Code	08 05 2009
Manhattan Beach	CA	90266	Transaction ID: SA11AI.4429  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer HealthCare Partners	Occupation Sr. VP Fi		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ruth Hamad, MD			Date of Receipt
Mailing Address 3385 Hawthorn Ave	enue		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.4739
Chino Hills	CA	91709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self	Occupation Physician		
Receipt For:	<u> </u>	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Richard Hart, MD			Date of Receipt
Mailing Address 15275 Friends St.			10 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11Al.4432
Pacific Palisades	CA	90272	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer HealthCare Partners	Occupation Physician		
Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	-
Other (specify)		625.00	
			1375.00

or for commercia  NAME OF CO CA ASSOC RAL PAC)  Full Name (La David Hartenb Mailing Addre  City Los Angele  FEC ID numb federal politic  Name of Emp UCLA Health  Receipt For: Primary	al purposes, other than using the DMMITTEE (In Full) CIATION OF PHYSICIAN (Const., First, Middle Initial) CONTROL OF PHYSICIAN (Const., Fi	State CA  Occupation Medical D	ess of any political committee t	Date of Receipt  Date of Receipt  Transaction ID: SA11AI.4416  Amount of Each Receipt this Period
Full Name (La David Hartenberg) Mailing Addres  City Los Angele  FEC ID numb federal politic  Name of EmpuCLA Health  Receipt For: Primary	ss 11980 San Vicente  s per of contributing al committee.  sloyer Systems  General specify)	CA C Occupation Medical D	90049 irector COO	Transaction ID: SA11AI.4416  Amount of Each Receipt this Period
Los Angele FEC ID numble federal politic  Name of Empurical Health  Receipt For:  Primary	oper of contributing all committee.  olloyer Systems  General specify)	CA C Occupation Medical D	90049 irector COO	Transaction ID: SA11AI.4416  Amount of Each Receipt this Period
Name of Emp UCLA Health Receipt For:	al committee.  ployer Systems  General specify)	Occupation Medical D		250.00
Receipt For:	General specify) ▼	Medical D		
	and Final Ministra Late 19		250.00	
Full Name (La Ronald Hartmann Mailing Address	· · · · · · · · · · · · · · · · · · ·	05		Date of Receipt  0 7 2 1 2 0 0 9
City		State	Zip Code	Transaction ID: SA11AI.4515
Long Beach	า	CA	90805	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		1000.00
Name of Emp Lakewood Ey	oloyer re Physicians	Occupation Physician		
Receipt For: Primary Other (s	General General	Aggregate \	Year-to-Date ▼	
Full Name (La Cambria Hem	ast, First, Middle Initial) bree, MD	- I		Date of Receipt
Mailing Addre	ess 210 1/2 Glendora Ave	Э		08 05 YYYYY 2009
City		State	Zip Code	Transaction ID: SA11Al.4511
Long Beach FEC ID numb federal politic	per of contributing	CA	90803	Amount of Each Receipt this Period  500.00
Name of Emp Edinger Medi	oloyer cal Group	Occupation Physician		
Receipt For: Primary Other (s	General	_,	Year-to-Date ▼ 500.00	
SUBTOTAL of	Receipts This Page (optional) .			1750.00

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 78		
-	ITEMIZED RECEIPTS		for each category of the	(check only one)		
- 1			Detailed Summary Page	X 11a 11b 11c 12		
			2 staned Sammary r ago	13 14 15 16 17		
F	Any information copied from such Reports and or for commercial purposes, other than using t	Statements ma	y not be sold or used by any pers	son for the purpose of soliciting contributions		
7,	NAME OF COMMITTEE (In Full)	ne name and ad	dress of any political committee to	o solicit contributions from such committee.		
\	CA ASSOCIATION OF PHYSICIAN	GROUPS FF	DERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-		
$\angle$	RAL PAC)	G11001012	5211/121			
١.	Full Name (Last, First, Middle Initial) John Hirshleifer, MD	Date of Receipt				
	Mailing Address 2000 Powell St. Suit	e 200		08 10 2009		
	City	State	Zip Code	Transaction ID: SA11AI.4717		
	Emeryville	CA	94608	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Alta Bates Medical Group	Occupation				
	Receipt For:	Medical		_		
	Primary General	Aggregate	e Year-to-Date ▼	-		
	Other (specify)		250.00			
	Carist (openity) •	0 0	0 0 0 0 0 0 0	_		
. — s.	Full Name (Last, First, Middle Initial) James Hobbs, MD	•		Date of Receipt		
	Mailing Address 4859 W. Slauson Av	M M / D D / Y Y Y Y				
	Oit.	Ctata	Zin Onda	08 10 2009		
	City	State	Zip Code	Transaction ID: SA11AI.4417		
	Los Angeles	CA	90056	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		625.00		
	Name of Employer HealthCare Partners	Occupation				
	Receipt For:	Physicia	e Year-to-Date ▼	_		
	Primary General	Aggregate				
	Other (specify) ▼	0 0	625.00			
_	Full Name (Last, First, Middle Initial)					
<b>:</b> .	Ken Holt, MD  Mailing Address 6201 Picardie Rd.			Date of Receipt		
	Walling Address 6201 Ficaldie Nd.			07 02 2009		
	City	State	Zip Code	Transaction ID: SA11AI.4444		
	Rancho Palos Verde	CA	90275	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer HealthCare Partners (Unif- ied IPA)	Occupation Physicia				
		Aggregate	e Year-to-Date			
	Receipt For:	1 00 0				
	Primary General		250.00			
			250.00			
	Primary General		250.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 78 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to GROUPS FEDERAL POLITICAL ACTION	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) George Hong, MD Mailing Address 9930 Talbert Ave  City Fountain Valley	State Zip Code CA 92708	Date of Receipt    M M
FEC ID number of contributing federal political committee.  Name of Employer Talbert Medical Group  Receipt For:  Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date  500.00	500.00
Full Name (Last, First, Middle Initial) John Hoying, MD  Mailing Address 1524 2nd St.  City  Manhattan Beach  FEC ID number of contributing federal political committee.  Name of Employer HealthCare Partners  Receipt For:  Primary General Other (specify)	State Zip Code CA 90266  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Yenjean Hwang, MD  Mailing Address 1 Country Club Plaza  City Orinda  FEC ID number of contributing federal political committee.  Name of Employer Bay Infectious Disease Med Grp Receipt For:  Primary General Other (specify)	State Zip Code CA 94563  C  Occupation Physician Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	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 30 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GI RAL PAC)	ROUPS FEI	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) John Jacomo, MD			Date of Receipt
Mailing Address 9930 Talbert			08 05 YYYY 08 05 2009
City	State	Zip Code	Transaction ID: SA11AI.4688
Fountain Valley	CA	92708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Talbert Medical Group	Occupatio Physicial		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Hooshang Javaheri, MD			Date of Receipt
Mailing Address 1236 N. Magnolia			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.4704
<u>Anaheim</u>	CA	92801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Talbert Medical Group	Occupatio Physicial		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Vinod Jivrajka, MD			Date of Receipt
Mailing Address 6131 Orangethorpe Av	e Sute 280		07 02 YYYY 2009
City	State	Zip Code	Transaction ID: SA11AI.4427
Buena Park	CA	90260	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		5000.00
Name of Employer AppleCare Medical Managem- ent	Occupatio Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	5500.00

В.

C.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 31 / 78 (check only one)		
ITEMIZED RECEIPTS		for each category of the	(check only one)  X 11a  11b  11c  12		
		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	Inot be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,			
CA ASSOCIATION OF PHYSICIAN GERAL PAC)	ROUPS FEI	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-		
Full Name (Last, First, Middle Initial) John Johnson, MD			Date of Receipt		
Mailing Address 502 Torrance Blvd.			07 02 7 2009		
City	State	Zip Code	Transaction ID: SA11AI.4451		
Redondo Beach	CA	90277	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer HealthCare Partners Medic- al Group	Occupatio Physicia				
Receipt For:	Aggregate	Year-to-Date <b>V</b>			
Primary General Other (specify) ▼	0 0	250.00			
Full Name (Last, First, Middle Initial) Kathryn Johnson, MD			Date of Receipt		
Mailing Address 8 Deerhill Dr.			10 02 7 2009		
City	State	Zip Code	Transaction ID: SA11AI.4433		
Rolling Hills Est.	CA	90274	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		250.00		
Name of Employer HealthCare Partners	Occupatio Physicial				
Receipt For:	Aggregate	Year-to-Date <b>V</b>			
Primary General Other (specify) ▼		250.00			
Full Name (Last, First, Middle Initial) Patrick Kapsner			Date of Receipt		
Mailing Address 2742 Dow Ave.			07 02 YYYYY 2009		
City	State	Zip Code	Transaction ID: SA11AI.4697		
Tustin	CA	92780	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		1000.00		
Name of Employer Bristol Park Medical Group Inc.	Occupatio Chief Exc	n ecutive Officer			
Receipt For:	_	Year-to-Date ▼			
Primary General		1000.00	1		
Other (specify)		1000.00	1		
SUBTOTAL of Receipts This Page (optional)			1500.00		

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

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 32 / 78   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)			
Full Name (Last, First, Middle Initial) Naim Kassar, MD			Date of Receipt
Mailing Address 4735 Valley Center	07 02 2009		
City	State	Zip Code	Transaction ID: SA11AI.4741
San Dimas	CA	91773	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ronald Katz			Date of Receipt
Mailing Address 11 Tiburon Bay Dr			07 22 7 2009
City	State	Zip Code	Transaction ID: SA11AI.4587
Corona Del Mar	CA	92625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Nautilus / Greater Newport	Occupation Board Se		
Physicians Receipt For:	<del></del>	Year-to-Date ▼	
Primary General Other (specify) ▼	33 13	1000.00	
Full Name (Last, First, Middle Initial) David Kaufman, DO			Date of Receipt
Mailing Address 18 Endeavor Suite 2	204		08 05 2009
City	State	Zip Code	Transaction ID: SA11AI.4582
Irvine	CA	92618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Greater Newport Physicians	Occupation Physician	า	
Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	
Other (specify)		500.00	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	(criccit drilly drie)
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any he name and address of any political commit	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Aaron Kern. MD		Date of Receipt
Mailing Address 5750 Downey Ave #	100	0 8 1 4 2 0 0 9
City	State Zip Code	Transaction ID: SA11AI.4490
Lakewood	CA 90712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Lakewood Primary Care	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.0	0
Full Name (Last, First, Middle Initial) Jason Kim, MD	<b> </b>	Date of Receipt
Mailing Address 6454 Parklynn Dr.		08 / 05 / Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4446
Rancho Palos Verde	CA 90275	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HealthCare Partners Medic- al Group	Occupation Associate Medical Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	0
Full Name (Last, First, Middle Initial) John Kirk	<b> </b>	Date of Receipt
Mailing Address 17777 Center Court	Dr. Suite 400	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: SA11Al.4487
Cerritos	CA 90703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Pioneer Medical Group	Occupation CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.0	0
SUBTOTAL of Receipts This Page (optional)		1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to N GROUPS FEDERAL POLITICAL ACTION	solicit contributions from such committee.
/ RAL PAC)	N GROOFS FEDERAL FOLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Andrius Kirsonis		Date of Receipt
Mailing Address 1025 W. Olympic B	Blvd	07 02 2009
City	State Zip Code	Transaction ID: SA11AI.4414
Los Angeles	CA 90015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer HealthCare Partners	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Mark Kislinger, MD		Date of Receipt
Mailing Address 19191 So. Vermont	Ave Ste. 200	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.4468
Torrance	CA 90502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	700.00
Name of Employer HealthCare Partners	Occupation Physician	
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Lalita Komanapalli, MD		Date of Receipt
Mailing Address 9930 Talbert Ave		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4689
Fountain Valley	CA 92708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Talbert Medical Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l)	1575.00

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 78 (check only one)    X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	o solicit contributions from such committee.
$\angle$	CA ASSOCIATION OF PHYSICIAN ( RAL PAC)	GROUPS FEI	DERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
Α.	Full Name (Last, First, Middle Initial) Renato Labog, MD			Date of Receipt
	Mailing Address 421 So. Sierra Bonita	Ave.		07 02 7 2009
	City Pasadena	State CA	Zip Code 91106	Transaction ID: SA11AI.4737  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	31100	625.00
	Name of Employer HealthCare Partners	Occupation Physician		
	Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 625.00	
— В.	Full Name (Last, First, Middle Initial) Diane Laird			Date of Receipt
	Mailing Address 330 Placentia Ave Sto	08 05 2009		
	City	State	Zip Code	Transaction ID: SA11AI.4649
	Newport Beach FEC ID number of contributing federal political committee.	CA	92663	Amount of Each Receipt this Period 260.00
	Name of Employer Nautilus/ Greater Newport Physicians	Occupation CEO	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
_ C.	Full Name (Last, First, Middle Initial) Diane Laird			Date of Receipt
	Mailing Address 330 Placentia Ave Sto	e 270		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.4648
	Newport Beach FEC ID number of contributing federal political committee.	CA	92663	Amount of Each Receipt this Period  1000.00
	Name of Employer Nautilus/ Greater Newport Physicians	Occupation CEO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1260.00	
	SUBTOTAL of Receipts This Page (optional)			1885.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 78   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)		•	
Full Name (Last, First, Middle Initial) Steven Leven			Date of Receipt
Mailing Address 2925 Palo Verde Av	M M / D D / Y Y Y Y		
City	State	Zip Code	0 8 0 5 2 0 0 9  Transaction ID: SA11Al.4523
Long Beach	CA	90815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Talbert Medical Group	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Stuart Levine, MD			Date of Receipt
Mailing Address 540 So. Helberta Av	re		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.4453
Redondo Beach	CA	90277	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer HealthCare Partners	Occupation Corporate	n e Medical Director	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Glenn Libby, MD			Date of Receipt
Mailing Address 116 14th St.			07 02 YYYY 2009
City	State	Zip Code	Transaction ID: SA11AI.4501
Seal Beach	CA	90740	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer HealthCare Partners	Occupation Physician		
Receipt For:	Aggregate	Year-to-Date ▼	_
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GI RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Richard Lipeles		Date of Receipt
Mailing Address 12062 Valley View St.		07 21 2009
City	State Zip Code	Transaction ID: SA11AI.4708
Garden Grove	CA 92845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Heritage Development Orga- nization	Occupation COO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Jeffrey Litow, MD		Date of Receipt
Mailing Address 25650 Mullholland Hwy	1	07 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4544
Calabasas	CA 91302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer HealthCare Partners	Occupation Physician	]
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) George Madanat		Date of Receipt
Mailing Address 22835 Rioge Line Road	d	08 03 2009
City	State Zip Code	Transaction ID: SA11Al.4555
Diamond Bar	CA 91765	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self	Occupation Physician	1
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	······	2125.00

SCHEDULE A (FECI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other  NAME OF COMMITTEE (In	r than using the name and ac -ull)	ddress of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.  N COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Paul Mahood, MD	Initial) te Hermosa		Date of Receipt  0 7 0 2 2 0 0 9
City	State	Zip Code	Transaction ID: SA11AI.4638
Newport Beach FEC ID number of contributin federal political committee.	g CA	92660	Amount of Each Receipt this Period 250.00
Name of Employer Talbert Medical Group	Occupati Physicia		
Receipt For:  Primary Gene  Other (specify) ▼		te Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Haig Manjikian, MD Mailing Address 1435 Old	Initial) House Rd.		Date of Receipt  0 7 0 2 2 0 0 9
City Pasadena	State CA	Zip Code 91107	Transaction ID: SA11AI.4535
FEC ID number of contributin federal political committee.		91107	Amount of Each Receipt this Period 625.00
Name of Employer HealthCare Partners	Occupati Physicia		
Receipt For:  Primary Gene  Other (specify) ▼	55 5	te Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Robert Margolis, MD	Initial)		Date of Receipt
Mailing Address 19191 S.	Vermont #200		08 05 2009
City	State	Zip Code	Transaction ID: SA11AI.4471
<u>Torrance</u>	CA	90502	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C		1250.00
Name of Employer HealthCare Partners	Occupati Physicia	an	
Receipt For:  Primary Gene  Other (specify) ▼		te Year-to-Date ▼ 1250.00	
SUBTOTAL of Receipts This P	age (optional)		2125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIA	and Statements may not be sold or used by any perso g the name and address of any political committee to N GROUPS FEDERAL POLITICAL ACTION	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Mason Mailing Address 2336 Sylvan Lane City	State Zip Code	Date of Receipt    M M M
Glendale  FEC ID number of contributing federal political committee.	CA 91208	Amount of Each Receipt this Period 1000.00
Name of Employer SynerMed  Receipt For:  Primary General Other (specify) ▼	Occupation President  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial) Frederick Mayer, MD Mailing Address 19066 Magnolia A	ve	Date of Receipt  1 0 3 0 2 0 0 9
City  Huntington Beach  FEC ID number of contributing	State Zip Code CA 92646	Transaction ID: SA11AI.4609  Amount of Each Receipt this Period  100.00
federal political committee.  Name of Employer Talbert Medical Group	Occupation Physician / DPM	100.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Matthew Mazdyasni Mailing Address 19191 S. Vermont	h Ava Suita 200	Date of Receipt
City	State Zip Code	0 7 0 2 2 0 0 9  Transaction ID: SA11AI.4473
Torrance FEC ID number of contributing federal political committee.	CA 90502	Amount of Each Receipt this Period  250.00
Name of Employer HealthCare Partners	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (option	al)	1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 78 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN	Statements may not be sold or used by any per ne name and address of any political committee GROUPS FEDERAL POLITICAL ACTIC	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Annette Mc Connaughey Mailing Address 9542 Augusta Ct		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Cypress  FEC ID number of contributing federal political committee.	State Zip Code CA 90630	Transaction ID: SA11AI.4482  Amount of Each Receipt this Period  250.00
Name of Employer Talbert Medical Group  Receipt For:  Primary General Other (specify) ▼	Occupation Nurse Midwife  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Douglas McConnaughey Mailing Address 9 Cape Danbury		Date of Receipt    M M
City  Newport Beach  FEC ID number of contributing	State Zip Code CA 92660	Transaction ID: SA11AI.4639  Amount of Each Receipt this Period  500.00
Receipt For:  Primary  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial)  Denise McCourt  Mailing Address 7842 Connie Dr		Date of Receipt
City  Huntington Beach  FEC ID number of contributing federal political committee.	State Zip Code CA 92648	Transaction ID: SA11AI.4621  Amount of Each Receipt this Period  500.00
Name of Employer Edinger Medical Group  Receipt For:  Primary General	Occupation Administrator  Aggregate Year-to-Date   500.00	
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	0 0 0 0 0 0 0 0	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 41 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A	for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Leslie McMains	070	Date of Receipt
	Mailing Address 330 Placentia Ave Ste		08 05 2009
	City Newport Beach	State Zip Code CA 92663	Transaction ID: SA11AI.4653  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Nautilus / Greater Newport Physicians	Occupation CFO	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  1000.00	
_	Full Name (Last, First, Middle Initial) Rafael Mendez, MD		Date of Receipt
	Mailing Address 543 Perugia Way	0 8 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: SA11AI.4419
	Los Angeles	CA 90077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1250.00
	Name of Employer HealthCare Partners	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
_	Full Name (Last, First, Middle Initial) Edward Merchant, MD		Date of Receipt
	Mailing Address 5164 Earl Dr		08 05 YYYYY 2009
	City	State Zip Code	Transaction ID: SA11AI.4735
	La Canada Flintrid  FEC ID number of contributing federal political committee.	CA 91011	Amount of Each Receipt this Period  1000.00
	Name of Employer HealthCare Partners	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	NUDTOTAL (D TI: D / )		3250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 16
Ar	for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
•	Full Name (Last, First, Middle Initial) Richard Merkin, MD		Date of Receipt
	Mailing Address 3115 Ocean Front Wa	IIK #301	08 05 7 4 4 9
	City	State Zip Code	Transaction ID: SA11AI.4460
	Marina del Rey	CA 90292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Heritage Provider Network	Occupation President/CEO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Jack Middlebrooks, MD		Date of Receipt
	Mailing Address 18710 Spruce Circle	08 / 05 / 7 7 7 7 9 9	
	City	State Zip Code	Transaction ID: SA11AI.4690
	Fountain Valley	CA 92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Edinger Medical Group	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Lee Ann Moore		Date of Receipt
	Mailing Address 7895 Poinsettia Dr.		10 30 7 9 2009
	City	State Zip Code	Transaction ID: SA11AI.4479
	Buena Park	CA 90620	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Talbert Medical Group	Occupation COO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 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 43 / 78 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements man	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN ( RAL PAC)	GROUPS FE	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) John Morey, MD			Date of Receipt
Mailing Address 10072 Meredith Drive	)		08 05 2009
City	State	Zip Code	Transaction ID: SA11AI.4611
Huntington Beach	CA	92646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Newport Huntington Medical Group	Occupation Physicial		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Marc Moser			Date of Receipt
Mailing Address 2936 Via Alvarado			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.4435
Palos Verdes Estat	CA	90274	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Torrance Hospital IPA	Occupatio CEO	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mohinderjit Neelam, MD			Date of Receipt
Mailing Address 2603 Via Campo			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Montebello	State CA	Zip Code 90640	Transaction ID: SA11AI.4483  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer HealthCare Partners	Occupatio Physicia		
Receipt For:  Primary General  Other (specify) ▼	_,	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1050.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sc for each categor Detailed Summa	ry of the (Check only only)
Ai	for commercial purposes, other than using the	Statements may not be sold or used e name and address of any political	d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN OF RAL PAC)	ROUPS FEDERAL POLITICA	AL ACTION COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) David Neer, MD		Date of Receipt
	Mailing Address 2210 Hill St.	State Zip Code	09 18 2009
	City Santa Monica	CA 90405	Transaction ID: SA11AI.4461  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Lakewood IPA	Occupation Medical Director	
	Receipt For:  Primary General  Other (specify) ▼	1 1	1000.00
_	Full Name (Last, First, Middle Initial) Debra Nemec		Date of Receipt
	Mailing Address 7677 Center Ave #104	0 8 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	Transaction ID: SA11AI.4614	
	Huntington Beach	CA 92647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Talbert Medical Group	Occupation Clinical Director - RN	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00
_	Full Name (Last, First, Middle Initial) Stephen Newman		Date of Receipt
	Mailing Address 930 River Lane		07 / 22 / 2009
	City	State Zip Code	Transaction ID: SA11AI.4679
	Santa Ana FEC ID number of contributing federal political committee.	CA 92706	Amount of Each Receipt this Period  1000.00
	Name of Employer Bristol Park Medical Group Inc.	Occupation General Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	1	1000.00
			2500.00

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	AN GROUPS FEDERAL POLITICAL ACTION	<u> </u>
Lionel Ng, MD  Mailing Address 2750 E. Washing	gton Blvd #360	Date of Receipt  0 7 0 2 2 0 0 9
City Pasadena	State Zip Code CA 91107	Transaction ID: SA11AI.4538  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer HealthCare Partners	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Vincent Nguyen, DO		Date of Receipt
Mailing Address 7 Technology Dri	08 05 7 2009	
City	State Zip Code	Transaction ID: SA11AI.4583
Irvine	CA 92618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Monarch Healthcare	Occupation Medical Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Shanti Nilakanan, MD	•	Date of Receipt
Mailing Address 3122 Salmon Dr.		07 21 2009
City Los Alamitos	State Zip Code CA 90720	Transaction ID: SA11AI.4497
FEC ID number of contributing federal political committee.	CA 90720	Amount of Each Receipt this Period  250.00
Name of Employer Talbert Medical Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (ontin	onal)	1375.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A oi	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	itatements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions
	• • • • • • • • • • • • • • • • • • • •	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Joseph Oh, MD	_	Date of Receipt
	Mailing Address 3650 E. South St. #40		08 05 2009
	City Lakewood	State Zip Code CA 90712	Transaction ID: SA11AI.4491  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Lakewood Pediatrics Medic- al Grp. Inc.	Occupation Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Marcia Okawa		Date of Receipt
	Mailing Address 1665 Scenic Avenue S	08 05 2009	
	City	Transaction ID: SA11AI.4598	
	Costa Mesa	CA 92626	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Talbert Medical Group	Occupation Certified Nurse Midwife	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Richard Oken, MD		Date of Receipt
	Mailing Address 2999 Regent St. #325		07 02 2009
	City	State Zip Code	Transaction ID: SA11AI.4727
	Berkeley FEC ID number of contributing federal political committee.	CA 94705	Amount of Each Receipt this Period 500.00
	Name of Employer Self / East Bay Pediatrics	Occupation Physician/President ABMG	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	NIDTOTAL of Describe This Days (settings)		1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 78 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIAN	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Patricia Page LaPenn Mailing Address 1100 E. Willow			Date of Receipt
City Signal Hill	State CA	Zip Code 90755	Transaction ID: SA11AI.4504  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Memorial HealthCare IPA	Occupation	n	1500.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Larry Pasquali, MD Mailing Address 3300 E. South St. #	<i>‡</i> 105		Date of Receipt
City	State	Zip Code	╡
Long Beach	CA	90805	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Lakewood Eye Physicians	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Thomas Paulsen, MD	<b>'</b>		Date of Receipt
Mailing Address 19191 South Vermo	ont Ave Suite 20		08 10 7 2009
City Torrance	State CA	Zip Code	Transaction ID: SA11AI.4475
FEC ID number of contributing federal political committee.	C	90502	Amount of Each Receipt this Period  500.00
Name of Employer HealthCare Partners Medic- al Group Receipt For:		n e Medical Director CA e Year-to-Date ▼	
Primary General Other (specify) ▼	33.3340	500.00	]
SUBTOTAL of Receipts This Page (optional	al)		3000.00

SCHEDULE A (FEC F ITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 78 (check only one)    X   11a
or for commercial purposes, other  NAME OF COMMITTEE (In FI CA ASSOCIATION OF PH	than using the name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.  N COMMITTEE (CAPG FEDE-
FAL PAC) Full Name (Last, First, Middle I Harry Pellman, MD Mailing Address 16691 Gre City Huntington Beach FEC ID number of contributing federal political committee.	enview LN  State CA	Zip Code 92649	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Edinger Medical Group  Receipt For:  Primary Genera  Other (specify) ▼		'ear-to-Date ▼ 500.00	
Full Name (Last, First, Middle I George Perrine Jr, MD Mailing Address 1665 Scer	,		Date of Receipt  0 8 0 5 2 0 0 9
City Costa Mesa FEC ID number of contributing federal political committee.	State CA	Zip Code 92626	Transaction ID: SA11AI.4599  Amount of Each Receipt this Period  300.00
Name of Employer Talbert Medical Group  Receipt For:  Primary General Other (specify) ▼		rear-to-Date ▼	
Full Name (Last, First, Middle I Kathy Porter Mailing Address 1236 N. M	nitial) agnolia Ave		Date of Receipt
City Anaheim FEC ID number of contributing	State CA	Zip Code 90650	Transaction ID: SA11AI.4485  Amount of Each Receipt this Period  100.00
Name of Employer Talbert Medical Group	Occupation	enter Administrator	
Receipt For:  Primary General Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Pa	ge (optional)	······	900.00

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Ar or	for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Alan Puzarne		Date of Receipt
	Mailing Address 330 Placentia  City	State Zip Code	0 7 0 2 2 0 0 9  Transaction ID: SA11AI.4659
	Newport Beach	CA 92663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Nautilus Healthcare Manag- ement Group	Occupation COO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Steven Rapaport, MD		Date of Receipt
	Mailing Address 601 Torrance Blvd		08 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.4455
	Redondo Beach	CA 90277	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer HealthCare Partners Medic- al Group	Occupation General Surgeon	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Karl Rebay		Date of Receipt
	Mailing Address 7 Technology Drive		M M / D D / Y Y Y Y Y Y Y Y Y 2009
	City	State Zip Code	Transaction ID: SA11AI.4584
	Irvine	CA 92618	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer Monarch Healthcare	Occupation CFO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)		1000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN (	e name and addi	ress of any political committee to	o solicit contributions from such committee.
<u> </u>	RAL PAC)  Full Name (Last, First, Middle Initial)  Donald Rebhun, MD  Mailing Address 11600 Indian Hills Ro	I		Date of Receipt
	City Mission Hills	State CA	Zip Code 91345	Transaction ID: SA11AI.4549  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer HealthCare Partners  Receipt For: Primary General Other (specify)	Occupation Physician Aggregate		
 3.	Full Name (Last, First, Middle Initial) Bruce Rice, MD Mailing Address 2316 Dwight Way			Date of Receipt  0 7 0 2 2 0 0 9
	City	State	Zip Code	Transaction ID: SA11AI.4724
	Berkeley  FEC ID number of contributing federal political committee.	CA	94704	Amount of Each Receipt this Period 900.00
	Name of Employer East Bay Head & Neck Surg- ery	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	
_	Full Name (Last, First, Middle Initial) Carlos Rosales, MD			Date of Receipt
	Mailing Address 2600 Redondo Ave			07 21 YYYY 2009
	City	State	Zip Code	Transaction ID: SA11AI.4520
	Long Beach FEC ID number of contributing federal political committee.	CA	90806	Amount of Each Receipt this Period  250.00
	Name of Employer HealthCare Partners	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)	1		1400.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions
	, ,	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
۱.	Full Name (Last, First, Middle Initial) G. Thomas Ruiz, MD		Date of Receipt
	Mailing Address 1665 Scenic Ave City	State Zip Code	0 9 1 8 2 0 0 9 Transaction ID: SA11AI.4600
	Costa Mesa	CA 92626	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Talbert Medical Group	Occupation Physician	
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Wayne Sass		Date of Receipt
	Mailing Address 1601 Canyon Drive	08 10 2009	
	City	Transaction ID: SA11AI.4707	
	Fullerton	CA 92833	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Nautilus / Greater Newport Physicians	Occupation VP & CIO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Mark Schafer, MD	<u> </u>	Date of Receipt
	Mailing Address 25531 Pacific Hills Dr	07 / 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.4673
	Mission Viejo	CA 92692	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Bristol Park Medical Group	Occupation Physician/Medical Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Г			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 52 / 78 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
A	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FEDERAL POLITICAL ACTION	N COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Gordon Schaye, MD		Date of Receipt
	Mailing Address 58 Portuguese Bend F		07 02 2009
	City Rolling Hills	State Zip Code CA 90274	Transaction ID: SA11AI.4436  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer HealthCare Partners	Occupation Physician	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  250.00	
	Full Name (Last, First, Middle Initial) Gregory Schroff, MD		Date of Receipt
	Mailing Address 1721 Pablo Place	10 02 7 4 9 9	
	City	State Zip Code	Transaction ID: SA11Al.4438
	Palos Verdex Estat  FEC ID number of contributing federal political committee.	CA 90274	Amount of Each Receipt this Period  250.00
	Name of Employer HealthCare Partners Medic- al Group	Occupation Physician	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Lauri Seymour, MD	<u> </u>	Date of Receipt
	Mailing Address 23301 Via Dorado		10 02 2009
	City	State Zip Code	Transaction ID: SA11AI.4671
	Coto de Caza  FEC ID number of contributing federal political committee.	CA 92679	Amount of Each Receipt this Period  500.00
	Name of Employer Edinger Medical Group	Occupation Physician	
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	
			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 53 / 78 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may 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 solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)	I GROUPS FEI	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) Archana Shah, MD			Date of Receipt
Mailing Address 1002 N. Fairview			08 05 2009
City	State	Zip Code	Transaction ID: SA11AI.4674
Santa Ana	CA	92703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Talbert Medical Group	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mansoor Shah, MD	l l		Date of Receipt
Mailing Address 5750 Downey Ave #	07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: SA11AI.4493
Lakewood	CA	90712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2500.00
Name of Employer Lakewood Primary Medical Group	Occupation Physician		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2500.00	
Full Name (Last, First, Middle Initial) Scott Shiffman, MD			Date of Receipt
Mailing Address 2742 Dow Avenue			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.4699
Tustin	CA	92780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Bristol Park Medical Group	Occupation Associate	n e Medical Director	
Receipt For:  Primary  General  Other (specify) ▼	<del> </del>	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	)		3750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persoing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
CA ASSOCIATION OF PHYSICIA RAL PAC)	AN GROUPS FEDERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial)  Maziyar Shoaee, MD		Date of Receipt
Mailing Address 2925 N. Palo Ver	de Ave	07 02 2009
City	State Zip Code	Transaction ID: SA11AI.4524
Long Beach	CA 90815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Talbert Medical Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Judy Shubin		Date of Receipt
Mailing Address 2742 Dow Ave		07 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4700
Tustin	CA 92780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Bristol Park Medical Group	Occupation Sr. VP Contracting	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) James Slaggert		Date of Receipt
Mailing Address 2000 Powell St. #	<del>\$</del> 830	07 21 2009
City <u>Emeryville</u>	State Zip Code CA 94608	Transaction ID: SA11AI.4718  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Alta Bates Medical Group	Occupation CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optic	onal)	1850.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIA	ng the name and add	dress of any political committee to	solicit contributions from such committee.
RAL PAC)   Full Name (Last, First, Middle Initial)			· 
Douglas Smith, MD  Mailing Address 322 Whites LNDG	à		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: SA11AI.4733
Long Beach	CA	90803	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer HealthCare Partners	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Paul Smith, MD			Date of Receipt
Mailing Address 502 Torrance Blvc	d		08 05 7 9 9
City	State	Zip Code	Transaction ID: SA11AI.4456
Redondo Beach	CA	90277	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer HealthCare Partners	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) John Somers			Date of Receipt
Mailing Address 2742 Dow Avenue	Э		08 05 2009
City <u>Tustin</u>	State CA	Zip Code 92780	Transaction ID: SA11AI.4701  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Bristol Park Medical Group	Occupation Chief Op	n erating Officer	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)		1500.00

Any information copied from such Reports and Statements may not be sold or used by any persor or for commercial purposes, other than using the name and address of any political committee to NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION RAL PAC)  Full Name (Last, First, Middle Initial)  William Somers, MD  Mailing Address 1561 Amberleaf  City State Zip Code  Costa Mesa CA 92626  FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  Malcolm Sperling, MD  Mailing Address 4661 Los Patos Avenue  City State Zip Code	
NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION RAL PAC) Full Name (Last, First, Middle Initial) William Somers, MD Mailing Address 1561 Amberleaf  City State Zip Code Costa Mesa CA 92626  FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Malcolm Sperling, MD Mailing Address 4661 Los Patos Avenue	
CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION RAL PAC)  Full Name (Last, First, Middle Initial) William Somers, MD  Mailing Address 1561 Amberleaf  City State Zip Code Costa Mesa CA 92626  FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians  Receipt For: Primary General Other (specify)  General Other (specify)  Malcolm Sperling, MD Mailing Address 4661 Los Patos Avenue	COMMITTEE (CADO FEDE
Mailing Address 1561 Amberleaf  City State Zip Code Costa Mesa CA 92626  FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians  Receipt For: Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Malcolm Sperling, MD  Mailing Address 4661 Los Patos Avenue	CONNINIT TEE (CAPG FEDE-
City Costa Mesa CA 92626  FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians  Receipt For: Primary Other (specify)  Full Name (Last, First, Middle Initial) Malcolm Sperling, MD  Mailing Address  Agir Code CA 92626  C  Occupation Physician  Aggregate Year-to-Date  300.00	Date of Receipt
Costa Mesa  CA 92626  FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Malcolm Sperling, MD  Mailing Address 4661 Los Patos Avenue	12 04 2009
FEC ID number of contributing federal political committee.  Name of Employer Greater Newport Physicians  Receipt For: Primary General Other (specify)   Full Name (Last, First, Middle Initial) Malcolm Sperling, MD  Mailing Address 4661 Los Patos Avenue	Transaction ID: SA11AI.4601
Receipt For:  Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) Malcolm Sperling, MD  Mailing Address 4661 Los Patos Avenue	Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)  Full Name (Last, First, Middle Initial)  Malcolm Sperling, MD  Mailing Address 4661 Los Patos Avenue	300.00
Primary General Other (specify)  Full Name (Last, First, Middle Initial) Malcolm Sperling, MD Mailing Address 4661 Los Patos Avenue	
Malling Address 4661 Los Patos Avenue	
Mailing Address 4661 Los Patos Avenue	Date of Receipt
City State Zin Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Transaction ID: SA11AI.4625
Huntington Beach CA 92649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	500.00
Name of Employer Occupation Edinger Medical Group Physician	
Receipt For: Primary Other (specify)   Aggregate Year-to-Date  500.00	
Full Name (Last, First, Middle Initial) Debra Spindel	Date of Receipt
Mailing Address 510 Superior Ave Suite 290	08 05 7 2009
City State Zip Code Newport Beach CA 92663	Transaction ID: SA11AI.4662  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	500.00
Name of Employer Nautilus / Greater Newport Physicians  Occupation Vice President	
Receipt For: Primary Other (specify)   Aggregate Year-to-Date  500.00	
SUBTOTAL of Receipts This Page (optional)	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separat for each cate Detailed Sur	e schedule(s) egory of the	FOR LINE NUMBER: PAGE 57 / 78 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) CA ASSOCIATION OF PHYSICIAN (RAL PAC)	e name and address of any poli	tical committee to sol	or the purpose of soliciting contributions icit contributions from such committee.
	Full Name (Last, First, Middle Initial)  Mary Straub  Mailing Address 5661 Littler Drive			Date of Receipt
	City Huntington Beach	State Zip Code CA 92649		Transaction ID: SA11AI.4626  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Edinger Medical Group  Receipt For:  Primary General  Other (specify) ▼	Occupation Office Manager Aggregate Year-to-Date	500.00	
_	Full Name (Last, First, Middle Initial) Gary Sutter, MD Mailing Address 219 Howland Canal			Date of Receipt
	City	State Zip Code		07 21 2009 Transaction ID: SA11AI.4458
	Venice	CA 90291	-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer HealthCare Partners Medic- al Group	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	750.00	
_	Full Name (Last, First, Middle Initial) Daniel Temanka, MD			Date of Receipt
	Mailing Address 710 Pinehurst Dr.			08 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code		Transaction ID: SA11AI.4533
	Pasadena FEC ID number of contributing federal political committee.	CA 91106		Amount of Each Receipt this Period  1000.00
	Name of Employer HealthCare Partners	Occupation Physician (Retired)		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	1000.00	
	SUBTOTAL of Receipts This Page (optional)			2250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 78 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  CA ASSOCIATION OF PHYSICIAN	the name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mark Thompson, MD  Mailing Address 2124 Via Estudillo			Date of Receipt
City Palos Verdes Estat FEC ID number of contributing	State CA	Zip Code 90274	Transaction ID: SA11AI.4440  Amount of Each Receipt this Period  250.00
Receipt For:  Primary  Other (specify)	Occupation Physician		]
Full Name (Last, First, Middle Initial) David Townsend Mailing Address 1717   Street			Date of Receipt    M
City Sacramento FEC ID number of contributing federal political committee.	State CA	Zip Code 95814	Transaction ID: SA11AI.4729  Amount of Each Receipt this Period  2500.00
Name of Employer Townsend Raimundo Besler & Usher Receipt For:  Primary General Other (specify) ▼	Occupation Partner Aggregate	Year-to-Date ▼ 2500.00	]
Full Name (Last, First, Middle Initial) Kenneth Tram, MD Mailing Address 9930 Talbert Ave			Date of Receipt
City Fountain Valley FEC ID number of contributing federal political committee.	State CA	Zip Code 92708	Transaction ID: SA11AI.4693  Amount of Each Receipt this Period  250.00
Name of Employer Talbert Medical Group	Occupation Physician		
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l)	<b>\</b>	3000.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e Concectionly only
or fo	information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)	ne name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
. <u> </u>	Full Name (Last, First, Middle Initial) Nga Tuyet Ha, MD Mailing Address 2258 Manning Ave.		Date of Receipt
	Dity	State Zip Code	0 8 0 5 2 0 0 9 Transaction ID: SA11AI.4418
F	Los Angeles	CA 90064	Amount of Each Receipt this Period  250.00
_	Name of Employer HealthCare Partners	Occupation Physician	
ı	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	00
<u> </u>	Full Name (Last, First, Middle Initial) Phillip Valentine, MD Mailing Address 3565 Del Amo Blvd		Date of Receipt  0 7 0 2 7 2 0 0 9
(	City	State Zip Code	Transaction ID: SA11AI.4478
-	Torrance	CA 90503	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C	250.00
	Name of Employer HealthCare Partners Medic- al Group	Occupation Dermatologist	
ı	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.0	00
	Full Name (Last, First, Middle Initial) Mark Van Houten, MD		Date of Receipt
1	Mailing Address 361 Hospital Rd # 52	7	08 05 7 2009
	City	State Zip Code	Transaction ID: SA11AI.4664
F	Newport Beach FEC ID number of contributing ederal political committee.	CA 92663	Amount of Each Receipt this Period 300.00
<u>1</u>	Name of Employer Self	Occupation Physician	
Ī	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	00
SU	BTOTAL of Receipts This Page (optional)		800.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for cor	mation copied from such Reports and State mmercial purposes, other than using the na E OF COMMITTEE (In Full) ASSOCIATION OF PHYSICIAN GRO	ame and add	lress of any political committee to	solicit contributions from such committee.
/ RAL	PAC)  lame (Last, First, Middle Initial)	JOFSTEL	DENAL POLITICAL ACTION	T
A. Clayto	on Varga	Date of Receipt		
Mailin	g Address 1035 So Fair Oaks Ave #	<del>‡</del> 104		07 02 2009
City		State	Zip Code	Transaction ID: SA11AI.4531
· · · · · · · · · · · · · · · · · · ·	adena	CA	91105	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		1000.00
Name Fusio	e of Employer on Health	Occupation CEO	1	
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	lame (Last, First, Middle Initial)			Date of Receipt
Mailin	g Address 9930 Talbert Ave.			08 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: SA11AI.4694
	ntain Valley	CA	92708	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		250.00
Name Talbe	e of Employer rt Medical Group	Occupation Physician		
Recei	pt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	lame (Last, First, Middle Initial) Wassef, MD			Date of Receipt
	ng Address 5750 Downey Avenue Su	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	ad	State	Zip Code	Transaction ID: SA11AI.4495
FEC	ewood  ID number of contributing al political committee.	CA	90712	Amount of Each Receipt this Period  1000.00
Name E.W.	e of Employer Wassef M.D Inc.	Occupation Physician		
	pt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
SUBTO	TAL of Receipts This Page (optional)		<b>&gt;</b>	2250.00

"	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Ar	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
$\rangle$	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN G RAL PAC)	ROUPS FED	PERAL POLITICAL ACTION	I COMMITTEE (CAPG FEDE-
	Full Name (Last, First, Middle Initial) Veronica Whelan, MD			Date of Receipt
	Mailing Address 1665 Scenic Ave. Ste.			08 05 2009
	City Costa Mesa	State CA	Zip Code 92626	Transaction ID: SA11AI.4603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32020	700.00
	Name of Employer Talbert Medical Group	Occupation Phys / As	soc Med Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	
. –	Full Name (Last, First, Middle Initial) J. Stephen Wikle, MD			Date of Receipt
	Mailing Address 11572 Marble Arch Dr			0 8 0 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4677
	Santa Ana	CA	92705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Greater Newport Physicians	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Lillie Williams, MD			Date of Receipt
	Mailing Address 8031 Ainsworth Lane			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4481
	La Palma FEC ID number of contributing federal political committee.	CA	90623	Amount of Each Receipt this Period 250.00
	Name of Employer Talbert Medical Group	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	, t	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may 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.
	CA ASSOCIATION OF PHYSICIAN GIRAL PAC)	ROUPS FEI	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
A.	Full Name (Last, First, Middle Initial) Burton Willis, MD Mailing Address 16074 Bonaire Cr			Date of Receipt
	Mailing Address 16074 Bonaire Cr  City	State	Zip Code	1 0 0 7 2 0 0 9  Transaction ID: SA11AI.4627
	Huntington Beach	CA	92649	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Edinger Medical Group	Occupation Physician		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	]
– В.	Full Name (Last, First, Middle Initial) Keith Wilson, MD			Date of Receipt
	Mailing Address 18402 Coltman Ave			07 02 7 2009
	City	State	Zip Code	Transaction ID: SA11Al.4502
	Carson	CA	90746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Talbert Medical	Occupation President		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General  Other (specify) ▼	0 0	1000.00	
с. С.	Full Name (Last, First, Middle Initial) Chris Wing			Date of Receipt
	Mailing Address 19191 S. Vermont			10 02 7 2009
	City	State	Zip Code	Transaction ID: SA11AI.4476
	Torrance FEC ID number of contributing federal political committee.	CA	90502	Amount of Each Receipt this Period  1000.00
	Name of Employer HealthCare Partners LLC	Occupation EVP / CO		
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			2500.00
-	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC FOITTEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 78 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other to NAME OF COMMITTEE (In Ful CA ASSOCIATION OF PH	Reports and Statements may not be sold or used by any polar using the name and address of any political committed by the name and address of address of any pol	ee to solicit contributions from such committee.
Full Name (Last, First, Middle In Kenneth Wogensen, MD		Date of Receipt
Mailing Address 665 W. Nac		07 21 2009
City <u>Arcadia</u>	State Zip Code CA 91007	Transaction ID: SA11AI.4526  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kenneth K. Wogensen MD In-	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle In Nancy Worthen, MD	<u> </u>	Date of Receipt
Mailing Address 502 Torran	ce Blvd	$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$
City	State Zip Code	Transaction ID: SA11Al.4457
Redondo Beach FEC ID number of contributing federal political committee.	CA 90277	Amount of Each Receipt this Period  250.00
Name of Employer HealthCare Partners Medic- al Group	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle In Albert Yeung, MD	itial)	Date of Receipt
Mailing Address 9882 Vicks	ourg Drive	07 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4747
Huntington Beach	CA 92646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Talbert Medical Group	Occupation Pediatrician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Pag	e (optional)	750.00

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 64 / 78 (check only one)
l	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	CA ASSOCIATION OF PHYSICIAN GF RAL PAC)	ROUPS FE	DERAL POLITICAL ACTION	COMMITTEE (CAPG FEDE-
Α.	Full Name (Last, First, Middle Initial) Mary Young			Date of Receipt
	Mailing Address 2526 Encina Way			08 05 7 9 9
	City	State	Zip Code	Transaction ID: SA11AI.4631
	Laguna Beach	CA	92651	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Monarch Healthcare	Occupation VP Netwo	n ork Management	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
- В.	Full Name (Last, First, Middle Initial) Betty Yu, MD			Date of Receipt
	Mailing Address 16525 Oak Circle			07 02 7 2009
	City	State	Zip Code	Transaction ID: SA11AI.4695
	Fountain Valley	CA	92708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Edinger Medical Group	Occupation Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
С.	Full Name (Last, First, Middle Initial) Michael Yu, MD			Date of Receipt
	Mailing Address 361 Hospital Road #322	2		07 21 2009
	City	State	Zip Code	Transaction ID: SA11AI.4665
	Newport Beach	CA	92663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Greater Newport Physicians	Occupation Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	SUBTOTAL of Receipts This Page (optional)			1300.00

 $\triangleright$ 

A.

В.

Receipt For:

Primary

Other (specify)

General

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

PAGE 65 / 78 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 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) CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC) Full Name (Last, First, Middle Initial) Date of Receipt Ronald Zent, MD Mailing Address 1100 E. Willow St. 0 8 2009 10 City State Zip Code Transaction ID: SA11AI.4505 Signal Hill CA 90755 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 C federal political committee. Name of Employer Memorial HealthCare IPA Occupation Medical Director Receipt For: Aggregate Year-to-Date Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) Kenneth Zuckerman, MD Date of Receipt Mailing Address 16300 Sand Canyon Ave #704 8 0 05 2009 City State Zip Code Transaction ID: SA11AI.4585 Irvine CA 92618 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Greater Newport Physicians Occupation Physician

		2000.00
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	2000.00
TOTAL This Period (last page this line number only)	<b>•</b>	105535.00

Aggregate Year-to-Date ▼

500.00

В.

President

District:

agon 1000000010			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUI	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 2	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
CA ASSOCIATION OF PHYSICIAN GRO	OUPS FEDERAL POLITICAL	. ACTION COM	MITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial)		Т	ransaction ID: SB21B.4852
Merrill Lynch			Date of Disbursement
Mailing Address 2442 Avenida De la Ca Suite 400	rlota	[	$ \begin{bmatrix} M & M \\ 0 & 7 \end{bmatrix} & \begin{bmatrix} D & 3 & 1 \\ 3 & 1 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City	State Zip Code	A	Amount of Each Disbursement this Period
Laguna Hills	CA 92653		424.86
Purpose of Disbursement Bank fee			424.00
Candidate Name		Category/ Type	
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			ransaction ID: SB21B.4853
Merrill Lynch			Date of Disbursement
Mailing Address 2442 Avenida De la Ca Suite 400	rlota		$ \begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} \begin{bmatrix}  & D & D \\ 0 & 3 & 1 \end{bmatrix} \begin{bmatrix}  & Y & Y & Y & Y & Y & Y & Y & Y & Y & $
City Laguna Hills	State Zip Code CA 92653	A	Amount of Each Disbursement this Period
Purpose of Disbursement Bank fee			11.90
Candidate Name		Category/ Type	
Office Sought: House Disbur	sement For: Primary General		

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	436.76
TOTAL This Period (last page this line number only)	•	436.76

Other (specify)

State:

17			parate schedule(s)	FOR LINE	( ono)
11	EMIZED DISBURSEMEN	ITS for each	n category of the d Summary Page	(check only 21b 27	y one) 22   X   23   24   25   2 28a   28b   28c   29   3
	y Information copied from such Reports for commercial purposes, other than us				for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSIC RAL PAC)				
<u> </u>	Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRES	S			Transaction ID: SB23.4378 Date of Disbursement
	Mailing Address 555 Capitol Ma	all, Suite 1425			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
	City Sacramento	State CA	Zip Code 95814		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution				1000.00
	Candidate Name ANNA ESHOO FOR CONGRES  Office Sought: X House	Disbursement For:	2010	Category/ Type	
	Senate President	X Primary	General pecify)		
	State: CA District: 14  Full Name (Last, First, Middle Initial)  ANNA ESHOO FOR CONGRES	s S			Transaction ID: SB23.4381 Date of Disbursement
				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
	Mailing Address 555 Capitol Ma	all, Suite 1425			08 28 2009
	Mailing Address 555 Capitol Ma  City Sacramento	all, Suite 1425 State CA	Zip Code 95814		
	City	State			
	City Sacramento Purpose of Disbursement	State CA		Category/ Type	Amount of Each Disbursement this Period
	City Sacramento Purpose of Disbursement Contribution Candidate Name ANNA ESHOO FOR CONGRES Office Sought:  X House Senate President	State CA  SS  Disbursement For:  X Primary			Amount of Each Disbursement this Period
	City Sacramento Purpose of Disbursement Contribution Candidate Name ANNA ESHOO FOR CONGRES Office Sought:  X House Senate	State CA  SS  Disbursement For:  X Primary	95814 2010 General		Amount of Each Disbursement this Period
	City Sacramento Purpose of Disbursement Contribution Candidate Name ANNA ESHOO FOR CONGRES Office Sought:  X House Senate President State: CA District: 14  Full Name (Last, First, Middle Initial)	State CA  S  Disbursement For:  X Primary Other (sp	95814 2010 General		Amount of Each Disbursement this Period 1400.00  Transaction ID: SB23.4813
	City Sacramento Purpose of Disbursement Contribution Candidate Name ANNA ESHOO FOR CONGRES Office Sought:  X House Senate President State: CA District: 14 Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	State CA  S  Disbursement For:  X Primary Other (sp	95814 2010 General		Amount of Each Disbursement this Period 1400.00  Transaction ID: SB23.4813 Date of Disbursement  M 7 M / D 9 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sacramento Purpose of Disbursement Contribution Candidate Name ANNA ESHOO FOR CONGRES Office Sought:  X House Senate President State: CA District: 14  Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS  Mailing Address P.O. Box 2610  City Los Angeles Purpose of Disbursement Contribution	State CA  SS  Disbursement For:  X Primary Other (sp	95814  2010 General Decify) ▼	Туре	Amount of Each Disbursement this Period 1400.00  Transaction ID: SB23.4813 Date of Disbursement  M 7 M / D 9 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	EMIZED DISBURSEMENTS	Detailed Summary Page		21k	b 22 X 23 24 25 7 28a 28b 28c 29
					son for the purpose of soliciting contributions to solicit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN RAL PAC)	GROUPS FEDERAL POLITIC	CAL A	ACTION	N COMMITTEE (CAPG FEDE-
<u>/</u>	Full Name (Last, First, Middle Initial) CITIZENS FOR HARKIN  Mailing Address P O BOX 811				Transaction ID: SB23.4810 Date of Disbursement
	City DES MOINES	State Zip Code IA 50304			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution Candidate Name		C	ategory/	1000.00
	Office Sought:    House   X   Senate   President     State: IA   District: 00	Sisbursement For: 2014  X Primary General  Other (specify) ▼		Туре	
	Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT LINDA	SANCHEZ			Transaction ID: SB23.4782 Date of Disbursement  0 9 7 2 9 7 2 0 0 9
	Mailing Address 1212 S. Victory Bl SUITE 211	vd			09 / 29 / 2009
	City BURBANK	State Zip Code CA 91502			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution				1000.00
	Candidate Name			ategory/ Type	
	Office Sought:  X House Senate President State: CA District: 39	isbursement For: 2010  X Primary General  Other (specify) ▼	•		
	Full Name (Last, First, Middle Initial) CONGRESSMAN WAXMAN CAMP	AIGN COMMITTEE			Transaction ID: SB23.4766 Date of Disbursement
	Mailing Address 6380 Wilshire Blvd	l. #1612			077 / 22 / 2009
	City Los Angeles	State Zip Code CA 90048			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution				2000.00
	Candidate Name HENRY A. WAXMAN			ategory/ Type	
	Office Sought:  X House Senate President State: CA District: 30	isbursement For: 2010  X Primary General  Other (specify) ▼			
Г					4000.00

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	X 23 28b	24 28c	25 29	26 30
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NAME OF COMMITTEE (In Full)							
CA ASSOCIATION OF PHYSICIAN GRORAL PAC)	DUPS FEDERAL POLITIC	CAL ACTION	COMMITT	EE (CAF	PG FEDI	E-	
Full Name (Last, First, Middle Initial)  DEMOCRATIC CONGRESSIONAL CAN	IPAIGN COMMITTEE			ction ID: Disburser		1387	
Mailing Address 430 South Capitol Stre	et, SE		11	/ D1(	D / Y	ž 0 0 9	Y
City Washington	State Zip Code DC 20003		Amoun	t of Each [	Disburser	ment this F	Period
Purpose of Disbursement Contribution		0 0	T L.			5000.00	
Candidate Name DEMOCRATIC CONGRESSIONAL CAN	MPAIGN COMMITTEE	Category/ Type					
Senate President	rsement For: 2010 Primary General X Other (specify)						
State: District: Othe							
Full Name (Last, First, Middle Initial)  DEMOCRATIC SENATORIAL CAMPAIC	N COMMITTEE		Date of	ction ID: Disburser	ment		V
Mailing Address 120 MARYLAND AVE		0 9	<sup>/</sup> 28	8 / _ `	ž 0 ŏ 9	<u> </u>	
City WASHINGTON	State Zip Code DC 20002		Amoun	t of Each [	Disburser		
Purpose of Disbursement Contribution						5000.00	
Candidate Name DEMOCRATIC SENATORIAL CAMPAIC	N COMMITTEE	Category/ Type					
Office Sought:  Senate  President  State:  District:  Othe	rsement For: 2010 Primary General  X Other (specify) ▼						
Full Name (Last, First, Middle Initial) - EARL POMEROY FOR CONGRESS			110111001	ction ID: Disburser	ment	1752	
Mailing Address Post Office Box 9336	Mailing Address Post Office Box 9336					ž 0 ŏ 9	Y
City Fargo	State Zip Code ND 58106		Amoun	t of Each [	Disburser	ment this F	Period
Purpose of Disbursement Contribution						1000.00	
Candidate Name EARL R. POMEROY		Category/ Type					
Office Sought:  X House Senate President Disbu	x Primary 2010  X Primary General Other (specify)						
State: ND District: 00							
SUBTOTAL of Disbursements This Page (optional	 l)	<b>&gt;</b>			1	1000.00	
TOTAL This Period (last page this line number or	 ly)	<b>&gt;</b>					

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			Detaile	d Summary Page	21 27	28a 28	3b 28c 29
	y Information copied from for commercial purposes,						
$\rangle$	NAME OF COMMITTEE CA ASSOCIATION C RAL PAC)	(In Full)					
	Full Name (Last, First, M FEINSTEIN FOR SE	•				Date of Disb	
	Mailing Address 121	2 S VICTORY	BLVD			08 /	12 / 2009
	City BURBANK		State CA	Zip Code 91502		Amount of E	ach Disbursement this Perio
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	Candidate Name DIANNE FEINSTEIN				Category, Type		
	X S	enate resident	Disbursement For:  X Primary  Other (sp	2012 General pecify)			
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	FEINSTEIN FOR SEI	,				Date of Disb	
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	Candidate Name DIANNE FEINSTEIN				Category Type		
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_	State: CA Distri Full Name (Last, First, M FEINSTEIN FOR SE	liddle Initial)				Transaction Date of Disb	ID: SB23.4403 ursement
	Mailing Address 121	2 S VICTORY	BLVD			11 1	<sup>D</sup> 16
	City BURBANK		State CA	Zip Code 91502		Amount of E	ach Disbursement this Perio
	Purpose of Disbursement Contribution	t			•	7	2300.00
	Candidate Name DIANNE FEINSTEIN				Category Type		
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Transaction (D: SB23.4382  Amount of Each Disbursement Contribution  Cardidate Name HARRY REID  Office Sought:  State: NV  District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address  PO BOX 411176  City Cardidate Name BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Senate President State: CA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name Category' Salate Spicode Category' Type  Office Sought:  Category' Type  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Office Sought:  Name (Last,	SCHEDOLL B (I LO I OIIII 5X)	Use separate schedule(s)	(check o	NE NUMBEF Inlv one)	١.	FA	GE /1/	70
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)  CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC)  Full Name (Last, First, Middle Initial)  FRIENDS FOR HARRY REID  Mailing Address P,O, BOX 19163  City LAS VEGAS  NV 89132  Purpose of Disbursement Contribution Candidate Name HARRY REID  Other (specify) ▼  State NV District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address PO BOX 411176  City City Contribution Candidate Name BARBARA BOXER  Office Sought:   House   Disbursement For: 2010   Note of the president   Note of the pr	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22	<u> </u>	_	$\square$	26
Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID  Mailing Address P.O. BOX 19163  City LAS VEGAS NV 89132  Purpose of Disbursement Contribution Candidate Name HARRY REID  Office Sought: House President State: NV District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address PO BOX 411176  City LOS ANGELES CA 90041  Purpose of Disbursement Contribution Candidate Name ARRARA BOXER  Office Sought: House President State: CA Disbursement Contribution Candidate Name BARBARA BOXER  Office Sought: House President State: CA Disbursement Contribution Candidate Name BARBARA BOXER  Office Sought: House President State: CA Disbursement Contribution Candidate Name SARBARA BOXER  Office Sought: House President State: CA District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City Marced CA 95340  Purpose of Disbursement Contribution Candidate Name DENNIS CARDOZA  Mailing Address PO Box 2749  City Merced CA 95340  Purpose of Disbursement Contribution Candidate Name DENNIS CARDOZA  Office Sought: X House President V Pinnary President V Pinnary President V Prinnary Category/ Type  Amount of Each Disbursement Transaction ID: SB23, 4393 Date of Disbursement Off 7 1 2 2 2 1 7 2 0 0 9 9  Amount of Each Disbursement Transaction ID: SB23, 4393 Date of Disbursement Off 7 1 2 2 2 1 7 2 0 0 9 9  Amount of Each Disbursement Transaction ID: SB23, 4393 Date of Disbursement Transaction ID: SB23, 4393 Date of Disbursement Off 7 1 2 2 2 1 7 2 0 0 9 9  City Marrian General Disbursement Office Sought: X House President V Prinnary Office Sought: X House President V Prinnary Office Sought: X House President V Prinnary Office Sought: X House President V President V Prinnary Office Sought: X House President V President V Prinnary Office Sought: X House President V President V President V President V President V President V Prinnary Office Sought V President V Prinnary Office Sought V Prinnary Office Sought V President V President V President V Presi	or for commercial purposes, other than using the n							3
FRIENDS FOR HARRY REID  Mailing Address P.O. BOX 19163  City State Zip Code NV 89132  Purpose of Disbursement Contribution Candidate Name HARRY REID  Office Sought: X Senate President President State: NV District: 00 District: 00 District: 00 District: 00 Category/ Type  Transaction ID: SB23.4382  Disbursement For: 2010  Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address PO BOX 411176  City State Zip Code CA 90041  Purpose of Disbursement Contribution Candidate Name BARBARA BOXER  Office Sought: House Disbursement For: 2010  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State Zip Code CA 95340  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State Zip Code CA 95340  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State Zip Code CA 95340  Purpose of Disbursement Contribution Candidate Name DENNIS CARDOZA  Mailing Address PO Box 2749  City State Zip Code CA 95340  Purpose of Disbursement Contribution Candidate Name DENNIS CARDOZA  Office Sought: X House Senate President Sen		OUPS FEDERAL POLITIC	AL ACTION	COMMITT	EE (CAF	PG FED	E-	
City LAS VEGAS				Date of	Disburser	ment	_	
Purpose of Disbursement Contribution  Candidate Name HARRY REID  Office Sought: House X Senate President State: NV District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address PO BOX 411176  City LOS ANGELES CA 90041  Purpose of Disbursement Contribution Candidate Name BARBARA BOXER  Office Sought: House Y Senate President State: CA District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State: CA District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State: CA District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State: CA 95340  Purpose of Disbursement Category/ Type  Transaction ID: SB23.4393 Date of Disbursement Initial)  Transaction ID: SB23.4393 Date of Disbursement Category/ Type  Amount of Each Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement  Other (specify) ▼  Category/ Type  City  Amount of Each Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement  Other (specify) ▼  City  Amount of Each Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement Initial  Transaction ID: SB23.4393 Date of Disbursement Initial  Transaction ID: SB23.4382  Date of Disbursement Initial  Transaction ID: SB23.4382  Date of	Mailing Address P.O. BOX 19163			07	/ DO:	9 / L	ŽOŎS	) Y
Contribution Candidate Name HARRY REID  Office Sought:				Amoun	t of Each [	Disburse		-
HARRY REID  Office Sought:	Contribution						2400.00	)
State: NV   District: 00   District: 00     Transaction ID: SB23.4382   Date of Disbursement this Per   Disbursement   Disb	HARRY REID	waamant Fav. 2010						
Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address PO BOX 411176  City LOS ANGELES CA 90041  Purpose of Disbursement Contribution Candidate Name BARBARA BOXER  Mailing Address PO Box 2749  City State Zip Code CA 90041  Amount of Each Disbursement this Per Category/ Type  Category/ Type  Category/ Type  Category/ Type  Transaction ID: SB23.4382  Date of Disbursement  D 7 M / P 2 D / Y 2 0 0 9 Y  Amount of Each Disbursement this Per Category/ Type  Transaction ID: SB23.4382  Date of Disbursement this Per Category/ Type  Transaction ID: SB23.4393  Date of Disbursement this Per Category/ Type  City State Zip Code CA 95340  Purpose of Disbursement Contribution Candidate Name DENNIS CARDOZA  Office Sought: X House Senate President  Disbursement For: 2010  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Office Sought: X House Senate President  Disbursement For: 2010  Category/ Type  Category/ Type  Category/ Type  Office Sought: X House Senate President  Other (specify) ▼ General Other (specify) ▼  Category/ Type	X Senate President	X Primary General						
City LOS ANGELES CA 90041  Purpose of Disbursement Contribution  Candidate Name BARBARA BOXER  Office Sought: President State: CA District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City Merced CA State CA	Full Name (Last, First, Middle Initial)			Date of	Disburser	ment		V
LÓS ANGELES  CA  90041  Purpose of Disbursement Contribution  Candidate Name BARBARA BOXER  Office Sought:  I house  I senate  I president I presiden	Mailing Address PO BOX 411176		2:	2 / _ 1	200s	)		
Contribution  Candidate Name BARBARA BOXER  Office Sought: House X Senate President State: CA District: 00  Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State Zip Code CA 95340  Purpose of Disbursement Contribution  Candidate Name DENNIS CARDOZA  Disbursement For: 2010 X Primary General Other (specify) ▼  Transaction ID: SB23.4393 Date of Disbursement  0 7 M / 0 2 D / 2 0 0 9 4  Amount of Each Disbursement this Per  Category/ Type  Office Sought: X House Senate President  Office Sought: X House General Other (specify) ▼  Other (specify) ▼  Transaction ID: SB23.4393 Date of Disbursement  Category/ Type  Office Sought: X House General Other (specify) ▼  Other (specify) ▼	LÓS ANGELES	•		Amoun	t of Each [	Disburse		
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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)  CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERIUN PRIENDS OF DENNIS CARDOZA  Mailing Address PO Box 2749  City State Zip Code	TEMIZED DIS	BURSEMENT			21b	22 X 23 :	
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nor 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)  CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL PAC)  Full Name (Last, First, Middle Initial) MCNERNEY FOR CONGRESS  Mailing Address  6520 Village Parkway Second Floor  City State Zip Code CA 94568  Purpose of Disbursement Contribution  Candidate Name  City State: Zip Code Category/ Type  Office Sought: X House Senate President State: CA District: 11  Full Name (Last, First, Middle Initial) MIKE THOMPSON FOR CONGRESS  Mailing Address  S429 Madison Avenue  City State: Zip Code CA 95841  Purpose of Disbursement Contribution  Candidate Name  Office Sought: X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS  Mailing Address  Mailing Address  677 14th Street, NW Suite 800  City Washington  City State Zip Code Category/ Type  Transaction ID: SB23.4789 Date of Disbursement Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior Category/ Type  Transaction ID: SB23.4789 Date of Disbursement To Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior Category/ Type  Transaction ID: SB23.4789 Date of Disbursement To Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior Transaction ID: SB23.4789 Date of Disbursement this Perior  Amount of Each Disbursement To Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior  Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior  Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior  Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior  Category/ Type  Transaction ID: SB23.4789 Date of Disbursement this Perior  Category/ Type  Transaction ID: SB23.4789 Date of Disbursement To Category/ Type  Transaction ID		EMIZED DISBURSEMENTS			21b	22 X 23 24 25
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Senate President Other (specify) ▼  Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS  Mailing Address 607 14th Street, NW Suite 800  City State Zip Code Washington DC 20005  Purpose of Disbursement Contribution  Candidate Name  Office Sought: X House Senate President  X Primary General Other (specify) ▼  Transaction ID: SB23.4792 Date of Disbursement  Transaction ID: SB23.4792 Date of Disbursement  Amount of Each Disbursement this Perior Disbursement For: 2010 Senate Primary General Other (specify) ▼					0.1	
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Suite 800  City State Zip Code Washington DC 20005  Purpose of Disbursement Contribution  Candidate Name  Category/ Type  Office Sought: X House Senate President  President  State Zip Code 20005  Amount of Each Disbursement this Perio 2400.00  Category/ Type  Other (specify)   Other (specify)   Other (specify)		Candidate Name  Office Sought: X House Senate President  Disbut	X Primary	General		
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Contribution  Candidate Name  Category/ Type  Office Sought: X House Senate X Primary General President  President  Other (specify)		Candidate Name  Office Sought:  X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS  Mailing Address 607 14th Street, NW	X Primary	General		Date of Disbursement
Office Sought:    X   House   Disbursement For: 2010     Senate   X   Primary   General     President   Other (specify)		Candidate Name  Office Sought: X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS  Mailing Address 607 14th Street, NW Suite 800  City Washington	X Primary Other (spe	General ecify) ▼  Zip Code		Date of Disbursement  M M M / D 3 D / Y 2 0 0 9  Amount of Each Disbursement this Perio
Senate X Primary General President Other (specify) ▼		Candidate Name  Office Sought: X House Senate President State: CA District: 01  Full Name (Last, First, Middle Initial) NANCY PELOSI FOR CONGRESS  Mailing Address 607 14th Street, NW Suite 800  City Washington  Purpose of Disbursement Contribution	X Primary Other (spe	General ecify) ▼  Zip Code	Туре	Date of Disbursement  M M M / D 3 D / Y 2 0 0 9  Amount of Each Disbursement this Perio
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 77 / 78 (check only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
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NAME OF COMMITTEE (In Full) CA ASSOCIATION OF PHYSICIAN GRORAL PAC)	OUPS FEDERAL POLITICAL	ACTION COMMITTEE (CAPG FEDE-
Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY  Mailing Address PO BOX 3662		Transaction ID: SB23.4795 Date of Disbursement
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SEATTLE	WA 98124	1000.00
Purpose of Disbursement Contribution Candidate Name	C	Category/
, H	sement For: 2010  K Primary General  Other (specify)	Туре
Full Name (Last, First, Middle Initial) PETE STARK RE-ELECTION COMMITT	EE	Transaction ID: SB23.4798 Date of Disbursement
Mailing Address P.O. Box 8331		$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix} / \begin{bmatrix} D & D & D \\ 2 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & 0 & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$
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Purpose of Disbursement Contribution		2400.00
Candidate Name	С	Category/ Type
9 7	sement For: 2010  X Primary General  Other (specify)	
Full Name (Last, First, Middle Initial) SOLIDARITY PAC		Transaction ID: SB23.4808 Date of Disbursement
Mailing Address 607 14th Street, NW, S Suite 800	uite 800	M 2 M / D D / Y 2 0 0 9 Y
City Washington	State Zip Code DC 20005	Amount of Each Disbursement this Perio
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Office Sought:  X House Senate President State: VT District: 00	x Primary General Other (specify)	,					
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