FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **TYPE OR PRINT ▼** — Example: If typing, type over the lines. 12FE4M5

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

ADDRESS (number and street) ▼

317 Massachusetts Ave., N.E.

1st Floor

☐ Check if different than previously reported. (ACC)

Washington | DC | 20002 –

CITY ▲ | STATE ▲ | ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00343137

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

Election on M M / D D / Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

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

Type or Print Name of Treasurer: William J. Robb III, MD

Signature of Treasurer: *William J. Robb III, MD* ***[Electronically Filed]*** Date: 03 / 02 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X
Rev. 12/2004

FE6AN026

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

Report Covering the Period: From: 11/25/2014 To: 12/31/2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		977438.67
(b) Cash on Hand at Beginning of Reporting Period	611301.56	
(c) Total Receipts (from Line 19)	29241.94	1351907.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	640543.50	2329346.66
7. Total Disbursements (from Line 31)	19442.05	1708245.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	621101.45	621101.45
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

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

Write or Type Committee Name

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

Report Covering the Period: From: 11/25/2014 To: 12/31/2014

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)	26027.33	1168325.66
(ii) Unitemized	2643.00	130536.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	28670.33	1298862.32
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	28670.33	1298862.32
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	562.29	19204.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	33750.00
17. Other Federal Receipts (Dividends, Interest, etc.)	9.32	91.17
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	29241.94	1351907.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	29241.94	1351907.99

DETAILED SUMMARY PAGE
of Disbursements

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

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	692.05	19240.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	692.05	19240.03
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	18500.00	1094400.00
24. Independent Expenditures (use Schedule E)	0.00	589005.18
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(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)) ▶	250.00	250.00
29. Other Disbursements	0.00	5350.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19442.05	1708245.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	19442.05	1708245.21

DETAILED SUMMARY PAGE
of Disbursements

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

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	28670.33	1298862.32
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28420.33	1298612.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	692.05	19240.03
37. Offsets to Operating Expenditures (from Line 15, page 3)	562.29	19204.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	129.76	35.53

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3XA
Transaction ID :

Amend contribution to Ted Lieu for Congress on 11/26/14 to indicate 2014 Debt Retirement.

Form/Schedule:
Transaction ID:

Image# 15950834955

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 7 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Andre Nicolas Gay MD

Mailing Address 35550 Monterra Ter Apt 302

City: Union City | State: CA | Zip Code: 94587-8055

FEC ID number of contributing federal political committee: C

Name of Employer: Beloit Health System

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 11 / 25 / 2014

Transaction ID : 6605094

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Andrew D Bries MD

Mailing Address 3126 Westminster Rd

City: Bettendorf | State: IA | Zip Code: 52722-4792

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 750.00

Date of Receipt: 11 / 27 / 2014

Transaction ID : 6612830

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Michael A Rauh MD

Mailing Address 46 Middlebury Rd

City: Orchard Park | State: NY | Zip Code: 14127-3962

FEC ID number of contributing federal political committee: C

Name of Employer: University Orthopedic Specialists

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 425.00

Date of Receipt: 11 / 28 / 2014

Transaction ID : 6612831

Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

Image# 15950834956

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 8 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Jeffery D Angel MD

Mailing Address 501 Virginia Dr Ste C

City: Batesville | State: AR | Zip Code: 72501-7331

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 670.00

Date of Receipt: 11 / 28 / 2014

Transaction ID : 6612832

Amount of Each Receipt this Period: 84.00

B. Full Name (Last, First, Middle Initial)
Scott Edward Porter MD

Mailing Address Dept of Ortho, Acad Serv
701 Grove Rd 2nd Fl Suprt Twr

City: Greenville | State: SC | Zip Code: 29605

FEC ID number of contributing federal political committee: C

Name of Employer: Greenville Hospital System

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1256.00

Date of Receipt: 12 / 03 / 2014

Transaction ID : 6630292

Amount of Each Receipt this Period: 84.00

C. Full Name (Last, First, Middle Initial)
Steven G Wynder MD

Mailing Address 5290 W 612 N

City: Huntington | State: IN | Zip Code: 46750

FEC ID number of contributing federal political committee: C

Name of Employer: Parkview Health

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 03 / 2014

Transaction ID : 6630293

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 418.00

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

Image# 15950834957

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 9 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
John Minoru Itamura MD

Mailing Address 921 Monterey Rd

City: South Pasadena | State: CA | Zip Code: 91030-3106

FEC ID number of contributing federal political committee: C

Name of Employer: Kerlan-Jobe Orthopaedic Clinic

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6643508

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Michael F Schafer MD

Mailing Address 1815 W Ridgewood Lane

City: Glenview | State: IL | Zip Code: 60025

FEC ID number of contributing federal political committee: C

Name of Employer: Northwestern Univ Medical School

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6643509

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Andrew Stoeckl MD

Mailing Address 90 Fairlawn Dr

City: Amherst | State: NY | Zip Code: 14226

FEC ID number of contributing federal political committee: C

Name of Employer: Excelsior Ortho

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6643514

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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

Image# 15950834958

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 10 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Matthew P Gardner MD

Mailing Address 207 Cumberland Dr

City: Rochester | State: IL | Zip Code: 62563-9286

FEC ID number of contributing federal political committee: C

Name of Employer: Springfield Clinic

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 450.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6643515

Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Ronald W B Wyatt MD

Mailing Address 533 Carleton Way

City: Alamo | State: CA | Zip Code: 94507-2863

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 900.00

Date of Receipt: 12 / 03 / 2014

Transaction ID : 6643555

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Dominic S Carreira MD

Mailing Address 2325 Barcelona Dr

City: Fort Lauderdale | State: FL | Zip Code: 33301-1554

FEC ID number of contributing federal political committee: C

Name of Employer: Broward Health

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6646293

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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

Image# 15950834959

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 11 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Brian R Hamlin MD

Mailing Address 3169 Beechwood Drive

City: Allison Park | State: PA | Zip Code: 15101

FEC ID number of contributing federal political committee: C

Name of Employer: UPMC | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2000.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6646294

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Bryan T Edwards MD

Mailing Address 17616 River Ford Drive

City: Davidson | State: NC | Zip Code: 28036

FEC ID number of contributing federal political committee: C

Name of Employer: Novant Health | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 02 / 2014

Transaction ID : 6646295

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
David J Mansfield MD

Mailing Address 5550 Cory Dr

City: El Paso | State: TX | Zip Code: 79932-3010

FEC ID number of contributing federal political committee: C

Name of Employer: El Paso Orthopaedic Surg Group | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1150.00

Date of Receipt: 12 / 05 / 2014

Transaction ID : 6648823

Amount of Each Receipt this Period: 85.00

SUBTOTAL of Receipts This Page (optional) ▶ 1335.00

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

Image# 15950834960

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 12 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Neal D Lintecum MD

Mailing Address 789 N 1500 Rd

City: Lawrence | State: KS | Zip Code: 66049-9194

FEC ID number of contributing federal political committee: C

Name of Employer: Ortho Kansas

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 750.00

Date of Receipt: 12 / 05 / 2014

Transaction ID : 6648824

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Chad A Krueger MD

Mailing Address 14827 Forward Pass

City: San Antonio | State: TX | Zip Code: 78248-0974

FEC ID number of contributing federal political committee: C

Name of Employer: U.S. Army

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 360.00

Date of Receipt: 12 / 06 / 2014

Transaction ID : 6655117

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Patrick T McCulloch MD

Mailing Address 12 Caley Drive

City: Canonsburg | State: PA | Zip Code: 15317-5990

FEC ID number of contributing federal political committee: C

Name of Employer: Advanced Orthopaedics & Rehabilitation

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 586.00

Date of Receipt: 12 / 06 / 2014

Transaction ID : 6655118

Amount of Each Receipt this Period: 84.00

SUBTOTAL of Receipts This Page (optional) ▶ 214.00

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

Image# 15950834961

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 13 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Bruce J Sangeorzan MD

Mailing Address Dept of Ortho
325 Ninth Ave Box 359798

City: Seattle | State: WA | Zip Code: 98104-2499

FEC ID number of contributing federal political committee: C

Name of Employer: University of Washington
Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 08 / 2014
Transaction ID : 6656838

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Christopher S Raffo MD

Mailing Address 9409 Crimson Leaf Terrace

City: Potomac | State: MD | Zip Code: 20854

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed
Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 08 / 2014
Transaction ID : 6656842

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Kevin Joseph Sprague MD

Mailing Address 4573 Chelsea Ln

City: Bloomfield Hills | State: MI | Zip Code: 48301

FEC ID number of contributing federal political committee: C

Name of Employer: Henry Ford Wyandotte Hospital
Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 10 / 2014
Transaction ID : 6662361

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

Image# 15950834962

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 14 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Todd A Schmidt MD

Mailing Address 2865 Lake Park Drive

City: Jonesboro | State: GA | Zip Code: 30236-4133

FEC ID number of contributing federal political committee: C

Name of Employer: Southern Orthopaedic Specialists

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 840.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673780

Amount of Each Receipt this Period: 84.00

B. Full Name (Last, First, Middle Initial)
David R Chandler MD

Mailing Address 165 Middle Plantation Ln

City: Gulf Breeze | State: FL | Zip Code: 32561-4899

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 850.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673781

Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial)
Jeffery P Beckenbaugh DO

Mailing Address 1302 Lecy Lane NE

City: Stewartville | State: MN | Zip Code: 55976-2500

FEC ID number of contributing federal political committee: C

Name of Employer: Olmsted Medical Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 800.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673782

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 269.00

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

Image# 15950834963

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 15 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Eric Louis Smith MD

Mailing Address 1573 Beacon St

City: Waban | State: MA | Zip Code: 02468-1507

FEC ID number of contributing federal political committee: C

Name of Employer: Tufts Medical Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 620.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673783

Amount of Each Receipt this Period: 84.00

B. Full Name (Last, First, Middle Initial)
Basil R Besh MD

Mailing Address 6135 Clubhouse Dr

City: Pleasanton | State: CA | Zip Code: 94566-9864

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 425.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673784

Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial)
Paul Joseph Beauvais MD

Mailing Address 86 Cedar Grove Rd

City: Southbury | State: CT | Zip Code: 06488-1930

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673787

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 469.00

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

Image# 15950834964

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 16 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
John R Tongue MD

Mailing Address 6485 SW Borland Rd
Ste A

City: Tualatin | State: OR | Zip Code: 97062-9762

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2000.00

Date of Receipt: 12 / 21 / 2014

Transaction ID : 6673789

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Frank P Giammattei MD

Mailing Address 30 Woodbrook Rd

City: Swarthmore | State: PA | Zip Code: 19081-1234

FEC ID number of contributing federal political committee: C

Name of Employer: Premier Orthopaedics

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 333.32

Date of Receipt: 12 / 22 / 2014

Transaction ID : 6673792

Amount of Each Receipt this Period: 83.33

C. Full Name (Last, First, Middle Initial)
Daniel William Green MD

Mailing Address 535 E 70th St

City: New York | State: NY | Zip Code: 10021-4823

FEC ID number of contributing federal political committee: C

Name of Employer: Hospital for Special Surgery

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 700.00

Date of Receipt: 12 / 22 / 2014

Transaction ID : 6673793

Amount of Each Receipt this Period: 175.00

SUBTOTAL of Receipts This Page (optional) ▶ 1258.33

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

Image# 15950834965

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Paul J Duwelius MD

Mailing Address 16925 Scott Ct

City: Lake Oswego | State: OR | Zip Code: 97034

FEC ID number of contributing federal political committee: C

Name of Employer: Orthopedic & Fracture Specialists

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2000.00

Date of Receipt: 12 / 09 / 2014

Transaction ID : 6675011

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Douglas P Tewes MD

Mailing Address P.O. Box 6939

City: Lincoln | State: NE | Zip Code: 68506-0939

FEC ID number of contributing federal political committee: C

Name of Employer: Lincoln Orthopaedic Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 09 / 2014

Transaction ID : 6675013

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
John Z Edwards MD

Mailing Address 915 Dorchester Place Apt 204

City: Charlottesville | State: VA | Zip Code: 22911

FEC ID number of contributing federal political committee: C

Name of Employer: Martha Jefferson Hospital

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 09 / 2014

Transaction ID : 6675015

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

Image# 15950834966

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 18 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
John Charles Kofoed MD

Mailing Address 2619 Seminole Ct

City: Fairfield | State: CA | Zip Code: 94534-7871

FEC ID number of contributing federal political committee: C

Name of Employer: Sutter Medical Group | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 916.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675018

Amount of Each Receipt this Period: 84.00

B. Full Name (Last, First, Middle Initial)
John O Cletcher Jr, MD

Mailing Address Box 150

City: Hygiene | State: CO | Zip Code: 80533

FEC ID number of contributing federal political committee: C

Name of Employer: Retired | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675019

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Norman B Livermore III, MD

Mailing Address 120 La Casa Via Ste 206

City: Walnut Creek | State: CA | Zip Code: 94598-3007

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675020

Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ▶ 284.00

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

Image# 15950834967

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 19 OF 42

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
David S Girdany MD

Mailing Address 609 Clover Hill Rd

City: Somerset | State: PA | Zip Code: 15501

FEC ID number of contributing federal political committee: C

Name of Employer: Somerset Hospital

Occupation: Orthopaedic Surgeon

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 350.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675021

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
J Wendell Duncan MD

Mailing Address 5321 Columbia Rd

City: Grovetown | State: GA | Zip Code: 30813

FEC ID number of contributing federal political committee: C

Name of Employer: Augusta Ortho & Sports Med Specialists

Occupation: Orthopaedic Surgeon

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675022

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Simon Mears MD

Mailing Address 3825 Mapleshade Lane, #7102

City: Plano | State: TX | Zip Code: 75075

FEC ID number of contributing federal political committee: C

Name of Employer: Health Texas

Occupation: Orthopaedic Surgeon

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 400.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675025

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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

Image# 15950834968

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 20 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Kayvon S Riggi MD

Mailing Address 14536 Rocksborough Rd

City: Minnetonka | State: MN | Zip Code: 55345

FEC ID number of contributing federal political committee: C

Name of Employer: Twin Cities Orthopedics

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675027

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Victor Goldberg MD

Mailing Address

City | State | Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer: Case Western Reserve University

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 12 / 2014

Transaction ID : 6675028

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Roshan P. Shah MD, JD

Mailing Address 1 Morningside Drive Apt 515

City: New York | State: NY | Zip Code: 10025-2426

FEC ID number of contributing federal political committee: C

Name of Employer: UPenn

Occupation: Resident

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 284.00

Date of Receipt: 12 / 24 / 2014

Transaction ID : 6676612

Amount of Each Receipt this Period: 85.00

SUBTOTAL of Receipts This Page (optional) ▶ 585.00

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

Image# 15950834969

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
George V Russell Jr, MD

Mailing Address 102 Hawthorne Vale

City: Ridgeland | State: MS | Zip Code: 39157

FEC ID number of contributing federal political committee: C

Name of Employer: UMMC

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 690.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677573

Amount of Each Receipt this Period: 85.00

B. Full Name (Last, First, Middle Initial)
Andrew Philip Manista MD

Mailing Address 1909 Golden Maple Ct NW

City: Olympia | State: WA | Zip Code: 98502

FEC ID number of contributing federal political committee: C

Name of Employer: Olympia Orthopaedic Associates

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 542.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677575

Amount of Each Receipt this Period: 542.00

C. Full Name (Last, First, Middle Initial)
William Andrew Lighthart MD

Mailing Address 448 Curtis Brook Rd

City: Rutland | State: VT | Zip Code: 05701

FEC ID number of contributing federal political committee: C

Name of Employer: Rutland Regional Medical Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677576

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 877.00

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

Image# 15950834970

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 22 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
David F Apple Jr, MD

Mailing Address 660 Collier Commons Circle

City: Atlanta | State: GA | Zip Code: 30318

FEC ID number of contributing federal political committee: C

Name of Employer: Shepherd Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677577

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Michael F Sacco MD

Mailing Address 120 Norlyn Dr

City: Walnut Creek | State: CA | Zip Code: 94596-4258

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677579

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Anthony Scillia MD

Mailing Address 110 Clark Road

City: Bernardsville | State: NJ | Zip Code: 07924

FEC ID number of contributing federal political committee: C

Name of Employer: New Jersey Orthopaedic Institute

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677580

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 850.00

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

Image# 15950834971

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 23 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Sidney Premer Migliori MD

Mailing Address 40 Chief Botelho Ct.

City: East Greenwich | State: RI | Zip Code: 02818

FEC ID number of contributing federal political committee: C

Name of Employer: Orthopaedic Associates | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 18 / 2014

Transaction ID : 6677583

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Kevin W Lanighan MD

Mailing Address 5527 Pine Loch Ln

City: Williamsville | State: NY | Zip Code: 14221

FEC ID number of contributing federal political committee: C

Name of Employer: Northtowns Orthopaedics | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 12 / 26 / 2014

Transaction ID : 6677584

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Mark W Zawadsky MD

Mailing Address 3460 Ordway Street NW

City: Washington | State: DC | Zip Code: 20016

FEC ID number of contributing federal political committee: C

Name of Employer: MedStar | Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 26 / 2014

Transaction ID : 6677585

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 1200.00

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

Image# 15950834972

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 24 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Charles Cannon Edwards II, MD

Mailing Address 308 N Wind Rd

City: Towson | State: MD | Zip Code: 21204

FEC ID number of contributing federal political committee: C

Name of Employer: The Maryland Spine Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 26 / 2014

Transaction ID : 6677586

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
David F Apple Jr, MD

Mailing Address 660 Collier Commons Circle

City: Atlanta | State: GA | Zip Code: 30318

FEC ID number of contributing federal political committee: C

Name of Employer: Shepherd Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 400.00

Date of Receipt: 12 / 26 / 2014

Transaction ID : 6677588

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Peter G Noordsij MD

Mailing Address Concord Orthopaedics PA
264 Pleasant St

City: Concord | State: NH | Zip Code: 03301

FEC ID number of contributing federal political committee: C

Name of Employer: Concord Orthopaedics

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 300.00

Date of Receipt: 12 / 26 / 2014

Transaction ID : 6677589

Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 650.00

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

Image# 15950834973

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 25 OF 42

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

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Michael A Rauh MD

Mailing Address 46 Middlebury Rd

City: Orchard Park | State: NY | Zip Code: 14127-3962

FEC ID number of contributing federal political committee: C

Name of Employer: University Orthopedic Specialists

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 475.00

Date of Receipt: 12 / 28 / 2014

Transaction ID : 6678897

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Jeffery D Angel MD

Mailing Address 501 Virginia Dr Ste C

City: Batesville | State: AR | Zip Code: 72501-7331

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 754.00

Date of Receipt: 12 / 28 / 2014

Transaction ID : 6678898

Amount of Each Receipt this Period: 84.00

C. Full Name (Last, First, Middle Initial)
Nicky L Leung MD

Mailing Address 88 Cedar St

City: Wellesley | State: MA | Zip Code: 02481

FEC ID number of contributing federal political committee: C

Name of Employer: Newton Wellesley Orthopaedics

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 250.00

Date of Receipt: 12 / 29 / 2014

Transaction ID : 6680873

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 384.00

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

Image# 15950834974

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Terry Younger MD
Mailing Address 5145 N. California Ave.
City: Chicago | State: IL | Zip Code: 60625-3661
FEC ID number of contributing federal political committee: C
Name of Employer: Barrington Ortho Specialists
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 12 / 29 / 2014
Transaction ID : 6680880
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
John Charles Kofoed MD
Mailing Address 2619 Seminole Ct
City: Fairfield | State: CA | Zip Code: 94534-7871
FEC ID number of contributing federal political committee: C
Name of Employer: Sutter Medical Group
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 12 / 31 / 2014
Transaction ID : 6681620
Amount of Each Receipt this Period: 84.00

C. Full Name (Last, First, Middle Initial)
David Arthur Detrisac MD
Mailing Address 3609 E Arbutus
City: Okemos | State: MI | Zip Code: 48864
FEC ID number of contributing federal political committee: C
Name of Employer: East Lansing Orthopaedic Assoc
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 12 / 31 / 2014
Transaction ID : 6681621
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1584.00

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

Image# 15950834975

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Norman B Livermore III, MD

Mailing Address 120 La Casa Via Ste 206

City: Walnut Creek | State: CA | Zip Code: 94598-3007

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681623

Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Craig A Hogan MD

Mailing Address 18023 East Peakview Place

City: Aurora | State: CO | Zip Code: 80016

FEC ID number of contributing federal political committee: C

Name of Employer: University of Colorado

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681624

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Nicky L Leung MD

Mailing Address 88 Cedar St

City: Wellesley | State: MA | Zip Code: 02481

FEC ID number of contributing federal political committee: C

Name of Employer: Newton Wellesley Orthopaedics

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681625

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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

Image# 15950834976

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 28 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Gary F Larsen MD

Mailing Address 7610 Caballero Dr

City: Sandy | State: UT | Zip Code: 84093

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681626

Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Rola H Rashid MD

Mailing Address 42 Delancey Ct

City: Pittsford | State: NY | Zip Code: 14534

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681627

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Cary M Guse MD

Mailing Address 6013 Turtle Bay Pkwy

City: Columbus | State: IN | Zip Code: 47201

FEC ID number of contributing federal political committee: C

Name of Employer: Southern Indiana Orthopedics

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681629

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 900.00

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

Image# 15950834977

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 29 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Michael P Grant MD

Mailing Address 75 Springdale Place

City: Longmont | State: CO | Zip Code: 80504

FEC ID number of contributing federal political committee: C

Name of Employer: Estes Park Medical Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681630

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Jefferson C Brand Jr, MD

Mailing Address 111th Ave, Suite 101

City: Alexandria | State: MN | Zip Code: 56308

FEC ID number of contributing federal political committee: C

Name of Employer: Heartland Orthopedic Specialists

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681631

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mark S Topolski MD

Mailing Address 837 Olympic Drive

City: Onalaska | State: WI | Zip Code: 54650-8237

FEC ID number of contributing federal political committee: C

Name of Employer: Gunderson Lutheran

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681632

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

Image# 15950834978

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
- [X] 11a
- [ ] 11b
- [ ] 11c
- [ ] 12
- [ ] 13
- [ ] 14
- [ ] 15
- [ ] 16
- [ ] 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Kenneth P Pohl MD

Mailing Address 5692 Far Hills Ave Ste 4

City: Dayton | State: OH | Zip Code: 45429-2202

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681633

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Humberto A Galleno MD

Mailing Address Inter-Community Prof Plaza
315 N 3rd Ave Ste 302

City: Covina | State: CA | Zip Code: 91723-1916

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681634

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Frank J Eismont MD

Mailing Address 4201 Palm Ln

City: Miami | State: FL | Zip Code: 33137

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681635

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

Image# 15950834979

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
- [X] 11a
- [ ] 11b
- [ ] 11c
- [ ] 12
- [ ] 13
- [ ] 14
- [ ] 15
- [ ] 16
- [ ] 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Thomas J Errico MD

Mailing Address 301 East 17th Street, Rm 400

City: New York | State: NY | Zip Code: 10003

FEC ID number of contributing federal political committee: C

Name of Employer: NYU Medical Center

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681636

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Pooya Javidan MD

Mailing Address 8500 Highland Plaza Dr Apt 519

City: Saint Louis | State: MO | Zip Code: 63110

FEC ID number of contributing federal political committee: C

Name of Employer: University of St. Louis

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681637

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Chad Efird MD

Mailing Address 147 Royal Dornoch Dr

City: Branson | State: MO | Zip Code: 65616-7414

FEC ID number of contributing federal political committee: C

Name of Employer: Cox Medical Center Branson

Occupation: Orthopaedic Surgeon

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681639

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1350.00

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

Image# 15950834980

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 32 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Hal S Crane MD

Mailing Address 3511 Bonfield Rd

City: Pikesville | State: MD | Zip Code: 21208-5633

FEC ID number of contributing federal political committee: C

Name of Employer: Baltimore Washington Medical Center

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681640

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Jeffrey J Lazarus MD

Mailing Address 31 S River Rd

City: Stuart | State: FL | Zip Code: 34996-6723

FEC ID number of contributing federal political committee: C

Name of Employer: Treasure Coast Ortho Assoc

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681641

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
William H Seitz Jr, MD

Mailing Address 1730 W 25th St

City: Cleveland | State: OH | Zip Code: 44113

FEC ID number of contributing federal political committee: C

Name of Employer: Cleveland Clinic

Occupation: Orthopaedic Surgeon

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 500.00

Date of Receipt: 12 / 31 / 2014

Transaction ID : 6681692

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

Image# 15950834981

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
PAGE 33 OF 42

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial)
William M Strassberg MD
Mailing Address 36 Sailors Bluff
City: Northport
State: ME
Zip Code: 04849
FEC ID number of contributing federal political committee: C
Name of Employer: Mount Desert Island Hospital
Occupation: Orthopaedic Surgeon
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 750.00

Date of Receipt: 12 / 09 / 2014
Transaction ID : 6824633
Amount of Each Receipt this Period: 0.00

[MEMO ITEM]
Refund(s) on Schedule B Totaling $250.00 This changes the YTD Total to $750.00

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

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City
State
Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 26027.33

Image# 15950834982

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial)
American Association of Orthopaedic Surgeons
Mailing Address 6300 N River Road
City: Rosemont | State: IL | Zip Code: 60018
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 19204.50

Date of Receipt: 12 / 17 / 2014
Transaction ID : 6672108
Amount of Each Receipt this Period: 562.29
Refund of bank fees from affiliated organization

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 562.29

TOTAL This Period (last page this line number only) ▶ 562.29

Image# 15950834983

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 11 / 26 / 2014

Transaction ID : 6626666

Amount of Each Disbursement this Period: 81.49

Bank fees deducted from account

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 05 / 2014

Transaction ID : 6667680

Amount of Each Disbursement this Period: 211.70

Bank fees deducted from account

C. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 05 / 2014

Transaction ID : 6667681

Amount of Each Disbursement this Period: 153.47

Bank fees deducted from account

SUBTOTAL of Disbursements This Page (optional) ▶ 446.66

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

Image# 15950834984

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 09 / 2014

Transaction ID : 6667682

Amount of Each Disbursement this Period: 41.25

Bank fees deducted from account

B. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 16 / 2014

Transaction ID : 6667748

Amount of Each Disbursement this Period: 74.38

Bank fees deducted from account

C. Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name:

Category/Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 23 / 2014

Transaction ID : 6687392

Amount of Each Disbursement this Period: 64.88

Bank fees deducted from account

SUBTOTAL of Disbursements This Page (optional) ▶ 180.51

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

Image# 15950834985

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial)
Northern Trust Company

Mailing Address 50 S La Salle St

City: Chicago | State: IL | Zip Code: 60603

Purpose of Disbursement: Bank fees deducted from account

Candidate Name

Category/ Type: 001

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M 12 / D D 31 / Y Y Y Y 2014

Transaction ID : 6687393

Amount of Each Disbursement this Period: 64.88

Bank fees deducted from account

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶ 64.88

TOTAL This Period (last page this line number only) ▶ 692.05

Image# 15950834986

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Ralph Abraham for Congress

Mailing Address P.O. Box 270

City: Archibald | State: LA | Zip Code: 71218

Purpose of Disbursement: Void - Ralph Abraham for Congress

Category/Type: 011

Candidate Name: Ralph Abraham

Office Sought: [X] House [ ] Senate [ ] President
State: LA District: 05

Disbursement For: 2014
[ ] Primary [ ] General
[X] Other (specify) ▼ Runoff2014

Date of Disbursement: M M 11 / D D 25 / Y Y Y Y 2014

Transaction ID : 6607261

Amount of Each Disbursement this Period: -5000.00

Void - Ralph Abraham for Congress

B. Full Name (Last, First, Middle Initial)
Ralph Abraham for Congress

Mailing Address P.O. Box 270

City: Archibald | State: LA | Zip Code: 71218

Purpose of Disbursement:

Category/Type: 011

Candidate Name: Ralph Abraham

Office Sought: [X] House [ ] Senate [ ] President
State: LA District: 05

Disbursement For: 2014
[ ] Primary [ ] General
[X] Other (specify) ▼ Runoff2014

Date of Disbursement: M M 11 / D D 25 / Y Y Y Y 2014

Transaction ID : 6607262

Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Ted Lieu for Congress

Mailing Address 6380 Wilshire Blvd #1612

City: Los Angeles | State: CA | Zip Code: 90048

Purpose of Disbursement: 2014 Debt Retirement

Category/Type: 011

Candidate Name: Ted Lieu

Office Sought: [X] House [ ] Senate [ ] President
State: CA District: 33

Disbursement For: 2014
[ ] Primary [ ] General
[X] Other (specify) ▼ 2014 Debt Retirement

Date of Disbursement: M M 11 / D D 26 / Y Y Y Y 2014

Transaction ID : 6609050

Amount of Each Disbursement this Period: 1000.00

2014 Debt Retirement

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

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

Image# 15950834987

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
BRETTPAC

Mailing Address 608 Montgomery Ave
City: Elizabethtown State: KY Zip Code: 42701

Purpose of Disbursement: Guthrie's LPAC
Candidate Name: BRETTPAC
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Category/Type: 011

Date of Disbursement: M M 11 / D D 26 / Y Y Y Y 2014
Transaction ID : 6609066
Amount of Each Disbursement this Period: 5000.00
Guthrie's LPAC

B. Full Name (Last, First, Middle Initial)
Ann Wagner for Congress

Mailing Address P.O. Box 50
City: Ballwin State: MO Zip Code: 63022

Purpose of Disbursement:
Candidate Name: Rep. Ann Wagner
Office Sought: [X] House [ ] Senate [ ] President
State: MO District: 02
Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)
Category/Type: 011

Date of Disbursement: M M 11 / D D 26 / Y Y Y Y 2014
Transaction ID : 6609068
Amount of Each Disbursement this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
Who Dat PAC

Mailing Address 499 S. Capitol St. SW Suite 422
City: Washington State: DC Zip Code: 20003

Purpose of Disbursement: Richmond's LPAC
Candidate Name: Who Dat PAC
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Category/Type: 011

Date of Disbursement: M M 11 / D D 26 / Y Y Y Y 2014
Transaction ID : 6609080
Amount of Each Disbursement this Period: 2500.00
Richmond's LPAC

SUBTOTAL of Disbursements This Page (optional) ▶ 9000.00

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

Image# 15950834988

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
Peace Through Strength PAC

Mailing Address 499 S. Capitol St. SW
Suite 420

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Hunter's LPAC

Category/Type: 011

Candidate Name: Peace Through Strength PAC

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 12 / 2014

Transaction ID : 6663637

Amount of Each Disbursement this Period: 2500.00

Hunter's LPAC

B. Full Name (Last, First, Middle Initial)
BRETTPAC

Mailing Address 504 DEREK AVENUE

City: Elizabethtown | State: KY | Zip Code: 42701

Purpose of Disbursement: Guthrie's LPAC

Category/Type: 011

Candidate Name: BRETTPAC

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 12 / 2014

Transaction ID : 6663647

Amount of Each Disbursement this Period: 5000.00

Guthrie's LPAC

C. Full Name (Last, First, Middle Initial)
Luke Messer for Congress

Mailing Address P.O. Box 917

City: Shelbyville | State: IN | Zip Code: 46176

Purpose of Disbursement:

Category/Type: 011

Candidate Name: Rep. Luke Messer

Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 06

Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 12 / 2014

Transaction ID : 6663649

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 8500.00

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

Image# 15950834989

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A. Full Name (Last, First, Middle Initial)
GOP Generation Y Fund

Mailing Address P.O. Box 9055

City: Peoria | State: IL | Zip Code: 61612

Purpose of Disbursement: Schock's LPAC

Category/Type: 011

Candidate Name: GOP Generation Y Fund

Office Sought: [ ] House [ ] Senate [ ] President

District:

State:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 12 / 2014

Transaction ID : 6663655

Amount of Each Disbursement this Period: 2500.00

Schock's LPAC

B. Full Name (Last, First, Middle Initial)
Capito for West Virginia

Mailing Address P.O. Box 11519

City: Charleston | State: WV | Zip Code: 25339

Purpose of Disbursement: Void - Capito For West Virginia

Category/Type: 011

Candidate Name: Shelley Capito

Office Sought: [ ] House [X] Senate [ ] President

District:

State: WV

Disbursement For: 2014 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 12 / 15 / 2014

Transaction ID : 6667799

Amount of Each Disbursement this Period: -5000.00

Void - Capito For West Virginia

C. Full Name (Last, First, Middle Initial)
Brad Ashford for Congress

Mailing Address P.O. Box 24023

City: Omaha | State: NE | Zip Code: 68124

Purpose of Disbursement:

Category/Type: 011

Candidate Name: Brad Ashford

Office Sought: [X] House [ ] Senate [ ] President

District: 02

State: NE

Disbursement For: 2016 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 23 / 2014

Transaction ID : 6675735

Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 18500.00

Image# 15950834990

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
21b 22 23 24 25 26
27 X 28a 28b 28c 29 30b

NAME OF COMMITTEE (In Full)
Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

A.
Full Name (Last, First, Middle Initial)
William M Strassberg MD

Mailing Address 36 Sailors Bluff

City: Northport | State: ME | Zip Code: 04849

Purpose of Disbursement: Refund contribution

Category/Type: 010

Candidate Name:

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: M M 12 / D D 09 / Y Y Y Y 2014

Transaction ID : 6657760

Amount of Each Disbursement this Period: 250.00

Refund contribution

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

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/Type:

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

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

Mailing Address

City | State | Zip Code

Purpose of Disbursement

Candidate Name

Category/Type:

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶ 250.00