Image# 14970094953 PAGE 1 / 31

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Committee			Office Us	se Only
NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼		mple: If typir r the lines.	ng, type	12FE4	M5	
American Academy of N	leurology Brain	PAC					
ADDRESS (number and street)	401 C St NE						
Check if different							
than previously reported. (ACC)	Washington				DC	20002	2
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦			STATE 🛦		ZIP CODE 🛦
C C00435933		3. IS THIS REPORT		NEW OR		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)	×	aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)		Jun 20 (M6)	H	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)) (c) 12-Day	Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)	PRF-Flection		Primary (12P Convention (-	ral (12G) al (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)	·		Convention	120)	Ороон	ui (120)	
January 31 Year-End Report (YE		Election on	M = M /	D D /	Y II Y II Y	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Elec		General (300	G)	Runo	ff (30R)	Special (30S)
Termination Report (TER)		Election on	M M /	D D /	Y Y Y	Y	in the State of
5. Covering Period 07		y y y 2014	through	M M M	/ 31	/ Y Y 201	14
I certify that I have examined this	Report and to the b	est of my kno	wledge and b	pelief it is tru	ie, correct	and complet	te.
Type or Print Name of Treasurer	Mr. Timothy J. Engel						
Signature of Treasurer Mr. Tin	nothy J. Engel		[Electronically	Filed]	Date 0		
NOTE: Submission of false, erroneo	us, or incomplete info	rmation may su	bject the pers	son signing th	nis Report t	the penaltic	es of 2 U.S.C. §437g.
Office Use Only							FORM 3X Rev. 12/2004

FEC	OF RE	SUMMARY PAGE ECEIPTS AND DISBURSEMENTS	Page 2
Write or Ty	pe Committee Name		
America	an Academy of Neurology Brain	PAC	
Report Cov	vering the Period: From: 07	01 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y	07 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cas	th on Hand January 1, 2014		116379.00
` '	sh on Hand at inning of Reporting Period	47899.04	
(c) Tota	al Receipts (from Line 19)	20283.34	201822.38
6(c)	ototal (add Lines 6(b) and for Column A and Lines and 6(c) for Column B)	68182.38	318201.38
7. Total Dis	sbursements (from Line 31)	35000.00	285019.00
Reportin	Hand at Close of g Period t Line 7 from Line 6(d))	33182.38	33182.38
the Com	and Obligations Owed TO Imittee (Itemize all on E C and/or Schedule D)	0.00	
the Com	and Obligations Owed BY smittee (Itemize all on e C and/or Schedule D)	0.00	
X This	committee has qualified as a multicandidat	te 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

American Academy of Neurology BrainPAC

		COLUMN A	COLUMN B
	I. Receipts	Total This Period	Calendar Year-to-Date
. Coi	ntributions (other than loans) From:		
(a)	Individuals/Persons Other		
	Than Political Committees	44402.24	136849.70
	(i) Itemized (use Schedule A)	14463.34	130049.70
	(ii) Unitomino d	5820.00	58972.68
	(ii) Unitemized	3620.00	55572.55
	Lines 11(a)(i) and (ii)▶	20283.34	195822.38
	211100 17(a)(i) and (ii)		
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees	0.00	
	(such as PACs)	0.00	0.00
(d)	Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	20202 24	195822.38
_	Totals to Line 33, page 5)	20283.34	193022.30
	nsfers From Affiliated/Other	0.00	0.00
Par	ty Committees	0.00	0.00
ΔΙΙ	Loans Received	0.00	0.00
All	Loans neceived		
Lac	n Denouments Dessived	0.00	0.00
	n Repayments Received	0.00	0.00
	sets To Operating Expenditures funds, Rebates, etc.)		
	rry Totals to Line 37, page 5)	0.00	0.00
	unds of Contributions Made		7
	Federal Candidates and Other		
	tical Committees	0.00	6000.00
Oth	er Federal Receipts	7	
(Div	ridends, Interest, etc.)	0.00	0.00
Tra	nsfers 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
	Total Transfers (add 18(a) and 18(b))	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
. Operating Expenditures: — (a) Allocated Federal/Non-Federal		Calendar Year-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non Fodeval Chara	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	0.00	0.00		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b)) ▶	0.00	0.00		
Transfers to Affiliated/Other Party	2.22	0.00		
Committees Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	34000.00	283750.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	1000.00	1269.00		
	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Tabal Combile tion Defined				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	1000.00	1269.00		
(ddd Eiriob 20(d), (b), drid (b),				
Other Disbursements	0.00	0.00		
_	, , , , , , , , , , , , , , , , , , , ,			
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	2.22	0.00		
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		
	7			
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35000.00	285019.00		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	35000.00	285019.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20283.34	195822.38	
34. Total Contribution Refunds (from Line 28(d))	1000.00	1269.00	
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19283.34	194553.38	
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

31

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Stanley J. Whitney Date of Receipt Mailing Address 1108 Ronds Pointe Dr. West 03 2014 City Zip Code State Transaction ID: 37307602 FL Tallahassee 32312-6788 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Tallahassee Neurology Associates Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Steven J. Holtz Date of Receipt Mailing Address 6970 Broadway Terrace 07 03 2014 City State Zip Code Transaction ID: 37307603 CA Oakland 94611-1950 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation John Muir Physical Ntwk Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Allison Brashear Date of Receipt Mailing Address 208 Hadley Ct 2014 07 03 Zip Code State Transaction ID: 37307604 NC Winston Salem 27106-4489 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Wake Forest Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

7 OF 31 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Richard E. Bird Date of Receipt Mailing Address 510 Indian Ln 08 2014 City Zip Code State Transaction ID: 37317422 21801-7015 MD Salisbury Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Riverside Neurology Associates PA Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Michael C. Graeber Date of Receipt Mailing Address 971 Lakeland Dr Ste 560 07 80 2014 City State Zip Code Transaction ID: 37325413 MS Jackson 39216-4607 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Muscle & Nerve, PA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial)

c. Dr. Maureen A. Callaghan Date of Receipt Mailing Address PO Box 6059 2014 07 10 City Zip Code State Transaction ID: 37334242 WA Olympia 98507-6059 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Madigan Army Medical Center / Self Physician Receipt For:

Aggregate Year-to-Date ▼

1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

500.00

Primary

Other (specify)

General

FOR LINE NUMBER: 31 **PAGE** 8 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. James C. Stevens Date of Receipt Mailing Address 12112 Aboite Center Rd 2014 City State Zip Code Transaction ID: 37343530 IN Fort Wayne 46814-9528 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Physician Allied Physicians, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. John W. Henson Date of Receipt Mailing Address 9420 SE 54th Street 2014 07 15 City State Zip Code Transaction ID: 37344510 Mercer Island WA 98040-5121 Amount of Each Receipt this Period FEC ID number of contributing

	federal political committee.		50.00
	Name of Employer Swedish Neuroscience Institute	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Michael R. Yochelson		Date of Receipt
	Mailing Address 3919 Commander Drive		07
	City	State Zip Code	Transaction ID: 37344513
	Hyattsville	MD 20782-1025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	83.34
	Name of Employer	Occupation	
	MedStar National Rehabilitation Hospit	Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 583.38	
1			

SUBTOTAL of Receipts This Page (optional).....

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

233.34

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Bruce H. Cohen Date of Receipt Mailing Address 3141 Neille Lane 2014 City Zip Code State Transaction ID: 37344514 OH Twinsburg 44087-3808 Amount of Each Receipt this Period FEC ID number of contributing 185.00 federal political committee. Name of Employer Occupation Children's Hospital and Med. Center of Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1110.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David A. Evans Date of Receipt Mailing Address 715 Kessler Woods Trail 07 15 2014 City State Zip Code Transaction ID: 37344515 Dallas TX 75208-5610 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Texas Neurology** COO Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. William S. Gilmer Date of Receipt Mailing Address 2323 Dunstan Rd 07 15 2014 City Zip Code State Transaction ID: 37344516 TX Houston 77005-2613 Amount of Each Receipt this Period FEC ID number of contributing 85.00 С federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 595.00 Other (specify) 370.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE I	NUMBER:	PAGE	E 10 O	F 3			
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for each category of the Detailed Summary Page	X 11a	11b	11c	12				
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	ne name and address of any political committee to	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Academy of Neurolo	ngy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Steven L. Lewis		Date of Receipt
Mailing Address 1725 W Harrison St Ste 1106		07 15 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 37344517
Chicago	IL 60612-3845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	167.00
Name of Employer	Occupation	1
Rush Univ. Med. Ctr.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	1169.00	
Full Name (Last, First, Middle Initial) 3. Dr. Nancy L. Mueller		Date of Receipt
Mailing Address 34 Stonybrook Road		M = M / D = D / Y = Y = Y
	Ct-t-	07 15 2014
City	State Zip Code	Transaction ID : 37344518
Tenafly	NJ 07670-1118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	415.00
Name of Employer	Occupation	1
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	2905.00	
Full Name (Last, First, Middle Initial) Dr. Gregory L. Barkley		Date of Receipt
Mailing Address 2890 Burlington St		07 15 2014
City	State Zip Code	Transaction ID: 37344519
Ann Arbor	MI 48105-1435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Henry Ford Hospital	Neurologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	700.00	
SUBTOTAL of Receipts This Page (optional)		682.00
cooopto mio rage (optional)		
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 11 OF 31 Use s for ea Detail

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led Summary Page		Πα	_	110		110		12		
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or for commercial purposes, other than using	g the name and address of any political committee	
NAME OF COMMITTEE (In Full)	Joay BrainPAC	
American Academy of Neuro	лоуу БіангАС 	
Full Name (Last, First, Middle Initial) Dr. Dario M. Zagar		Date of Receipt
Mailing Address 201 Fairmount Terrace		07 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : 37344520
Fairfield	CT 06825-1758	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	†
Associated Neurologists of So. Ct.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) 3. Dr. Joseph Jankovic		Date of Receipt
Mailing Address 6550 Fannin St Ste 1801		M = M / D = D / Y = Y = Y
Department of Neurology		07 15 2014
City	State Zip Code	Transaction ID : 37344571
Houston	TX 77030-2744	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Baylor College Of Medicine	Neurologist	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 292 Riverford Way		07 16 2014
City	State Zip Code	07 16 2014 Transaction ID : 37348257
Lawrenceville	GA 30043-6416	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	112.00
Name of Employer	Occupation	-
Emory Clinic	Neurologist	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	336.00	
SURTOTAL of Possints This Page ("	al)	662.00
ODIVIAL OF Receipts This Page (options	al)	002.00
TOTAL This Period (last page this line num	nber only)	
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FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Mark S. Corazza Date of Receipt Mailing Address 2431 Castillo St 2014 City State Zip Code Transaction ID: 37355308 CA Santa Barbara 93105-4301 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Daniel C. Potts Date of Receipt Mailing Address 136 Covey Chase 07 19 2014 City State Zip Code Transaction ID: 37361680 ΑL Tuscaloosa 35406-1801 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation AL Neurology and Sleep Medicine, P.C. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Lily Jung Henson Date of Receipt Mailing Address 9420 SE 54th St 2014 07 19 City Zip Code State **Transaction ID: 37361681** WA Mercer Island 98040-5121 Amount of Each Receipt this Period FEC ID number of contributing 415.00 С federal political committee. Name of Employer Occupation Swedish Neurosci. Institute, Swedish H Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2905.00 Other (specify) 1515.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Preston C. Calvert Date of Receipt Mailing Address 10112 New London Dr 2014 City Zip Code State Transaction ID: 37363734 MD Potomac 20854-4849 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Retired Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. John B. Townsend Date of Receipt Mailing Address 774 Christiana Rd Ste 201 07 22 2014 City State Zip Code Transaction ID: 37363794 DE Newark 19713-4221 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Delaware Neuroscience Specialists** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Nilay R. Shah Date of Receipt Mailing Address 160 W. 66th St Apt. 22J 2014 07 22 City Zip Code State Transaction ID: 37365215 NY New York 10023-6558 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 5000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF 31 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Joseph S. Kass Date of Receipt Mailing Address 4903 Valerie 2014 City Zip Code State Transaction ID: 37365228 77401-5707 TX Bellaire Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Baylor College of Medicine** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Amy E. Sanders Date of Receipt Mailing Address 4588 Cascades Drive 2014 07 23 City State Zip Code Transaction ID: 37365230 NY Manlius 13104-2369 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Mmc Medical Center** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Bruce Sigsbee Date of Receipt Mailing Address 1199 Sennebec Rd 2014 07 23 City State Zip Code Transaction ID: 37365231 MF Union 04862-4628 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Penobscot Bay Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Academy of Neurology	∕ BrainPAC	
Full Name (Last, First, Middle Initial) Dr. Sarah Song Mailing Address 2045 W. Concord Place, #405 City Chicago FEC ID number of contributing federal political committee. Name of Employer Rush Receipt For: Primary General Other (specify)	State Zip Code IL 60647-5481 C Occupation Neurologist Aggregate Year-to-Date ▼ 596.00	Date of Receipt 07 23 2014 Transaction ID: 37365232 Amount of Each Receipt this Period 82.00
Full Name (Last, First, Middle Initial) Dr. Carolyn L. Taylor Mailing Address 4732 Lost Creek Lane City Bellingham FEC ID number of contributing federal political committee. Name of Employer Northwest Neurology Receipt For: Primary General Other (specify)	State Zip Code WA 98229-2574 C Occupation Physician Aggregate Year-to-Date ▼ 700.00	Date of Receipt 07 23 2014 Transaction ID: 37365233 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Dr. Glen R. Finney Mailing Address 9235 NW 26th Avenue City Gainesville FEC ID number of contributing federal political committee. Name of Employer Univ. of FL Dept. of Neurology Receipt For: Primary General Other (specify)	State Zip Code FL 32606-9180 C Occupation Behavioral Neurology Aggregate Year-to-Date ▼	Date of Receipt M M / 25 / 2014 Transaction ID : 37371356 Amount of Each Receipt this Period 84.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		266.00

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Michael A. Williams Date of Receipt Mailing Address 1029 Pier Pointe Lndg 2014 26 City Zip Code State Transaction ID: 37372289 MD 21230-3975 **Baltimore** Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation LifeBridge Health Brain & Spine Instit Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Alireza Minagar Date of Receipt Mailing Address 8040 Captain Dillon Ct 2014 07 27 City State Zip Code Transaction ID: 37372294 LA Shreveport 71115-4606 Amount of Each Receipt this Period FEC ID number of contributing 56.00 federal political committee. Name of Employer Occupation LA State University Health Sciences Ct Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 224.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. David R. Greeley Date of Receipt Mailing Address 610 S Sherman # 201 2014 07 27 City Zip Code State Transaction ID: 37372295 WA Spokane 99202-1342 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Northwest Neurological Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1106.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Academy of Neurolo	ogy BrainPAC	
Full Name (Last, First, Middle Initial) Dr. John David Hixson Mailing Address 1224 3rd Ave		Date of Receipt
City	State Zip Code	07 27 2014 Transaction ID : 37372297
San Francisco	CA 94122-2705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer UCSF	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Steven J. Cavalier Mailing Address 3726 Ridgetop Dr	•	Date of Receipt
		07 28 2014
City Baton Rouge	State Zip Code LA 70809-2637	Transaction ID : 37372403 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	167.00
Name of Employer Baton Rouge Clinic, AMC	Occupation Neurologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 334.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth J. Villa		Date of Descipt
Mailing Address 4056 Saint James PI		Date of Receipt 07 28 2014
City San Diego	State Zip Code CA 92103-1630	Transaction ID : 37372404 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	334.00
Name of Employer	Occupation	-
SHARP San Diego Health Care	Neurologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 668.00	
SUBTOTAL of Receipts This Page (optional).		1001.00
TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Gregory J. Esper Date of Receipt Mailing Address 2477 Oak Grove Estates 2014 City Zip Code State Transaction ID: 37372406 GA Atlanta 30345-3899 Amount of Each Receipt this Period FEC ID number of contributing 56.00 federal political committee. Name of Employer Occupation Emory Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 224.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Jaffar Khan Date of Receipt Mailing Address 292 Riverford Way 07 28 2014 City State Zip Code Transaction ID: 37372407 GA Lawrenceville 30043-6416 Amount of Each Receipt this Period FEC ID number of contributing 112.00 federal political committee. Name of Employer Occupation **Emory Clinic** Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 448.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Faisal M. Qazi Date of Receipt Mailing Address 1240 West Valencia Mesa Drive 07 28 2014 City State Zip Code Transaction ID: 37372408 CA Fullerton 92833-2221 Amount of Each Receipt this Period FEC ID number of contributing 85.00 С federal political committee. Name of Employer Occupation Inland Neurologic Consultants Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) 253.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 19 OF 31 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Terrence L. Cascino Date of Receipt Mailing Address 2931 Stone Park Dr NE 2014 28 City Zip Code State Transaction ID: 37381254 MN Rochester 55906 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Mayo Clinic Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dr. Elliott G. Gross Date of Receipt Mailing Address 65 Horseshoe Hill Road 07 30 2014 City State Zip Code Transaction ID: 37382803 Pound Ridge NY 10576-1636 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Lawrence R. Whicker Jr Date of Receipt Mailing Address 7500 Hanover Parkway 2014 07 31 City Zip Code State Transaction ID: 37386143 MD Greenbelt 20854-4543 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Neurological Medicine PA Neurologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 20 OF 31 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Neurology BrainPAC Full Name (Last, First, Middle Initial) Dr. Michael A. Williams Date of Receipt Mailing Address 1029 Pier Pointe Lndg 2014 28 City Zip Code State Transaction ID: 37443494 21230-3975 MD **Baltimore** Amount of Each Receipt this Period FEC ID number of contributing C 0.00 federal political committee. Name of Employer Occupation LifeBridge Health Brain & Spine Instit Physician Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Refund(s) on Schedule B Totaling \$1000.00 This 1000.00 Other (specify) changes the YTD Total to \$1000.00 Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... 14463.34 TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)			
angle American Academy of Neurology E	BrainPAC		
Full Name (Last, First, Middle Initial)			
Friends Of Todd Young, Inc.			Date of Disbursement
Mailing Address PO Box 1053			07 09 2014
	State Zip Code		Transaction ID : 37325976
Bloomington	IN 47402		Transaction 12 1 01 02001 0
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Todd Young		Type	1000.00
Senate President	ment For: 2014 Primary		Campaign Contribution
State: IN District: 09			
Full Name (Last, First, Middle Initial) Johnson For Congress			Date of Disbursement
· Johnson For Congress			
Mailing Address PO Box 14496			07 09 2014
City Poland	State Zip Code OH 44514		Transaction ID: 37325978
Purpose of Disbursement	-	011	Amount of Each Disbursement this Period
Candidate Name			THIRD IN CITE OF LAGIN BIRD IN CITE OF
Rep. Bill Johnson		Category/ Type	1000.00
•	ment For: 2014 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) - Lynn Jenkins For Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 1441			07 09 2014
Topeka	State Zip Code KS 66601		Transaction ID: 37325979
Purpose of Disbursement Campaign Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Lynn Jenkins		Type	2500.00
Office Sought: House Disburse	ment For: 2014 Primary General Other (specify)		Campaign Contribution
			4500.00
SUBTOTAL of Disbursements This Page (optional)		·····•	4500.00
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NAME OF COMMITTEE (In Full)			
American Academy of Neurology B	rainPAC		
Full Name (Last, First, Middle Initial)			
A. David Scott For Congress			Date of Disbursement
Mailing Address P.O. Box 960821			07 09 2014
•	State Zip Code		Transaction ID : 37325980
1 11 0 1 0 1 1	GA 30296		1141154051011 15 : 01020500
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. David Albert Scott Office Sought: House Disburser	ant For: 0044	Туре	, , , , , ,
Senate President	nent For: 2014 Primary		Campaign Contribution
State: GA District: 13			
Full Name (Last, First, Middle Initial)			Data of Dishamourant
B. Lee Terry For Congress			Date of Disbursement
Mailing Address PO Box 540098			07 09 2014
,	State Zip Code NE 68154		Transaction ID: 37325983
Purpose of Disbursement	00.0.		
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Lee Terry		Туре	1000.00
Senate	nent For: 2014 Primary		Campaign Contribution
Full Name (Last, First, Middle Initial)			
C. Jim Renacci For Congress			Date of Disbursement
Mailing Address 150 Smokerise Drive			07 09 2014
•	State Zip Code OH 44281		Transaction ID : 37325985
Purpose of Disbursement Campaign Contribution	1,20,	011	
Candidate Name			Amount of Each Disbursement this Period
Rep. James B. Renacci		Category/ Type	1000.00
	nent For: 2014	21	
	Primary		Campaign Contribution
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Full Name (Last, First, Middle Initial)		T	
A. Wenstrup For Congress			Date of Disbursement
Mailing Address PO Box 9551			06 10 2014
•	State Zip Code OH 45209		Transaction ID: 37343850
Purpose of Disbursement Campaign Contribution Funds Reported On July 20	Monthly	011	Amount of Each Disbursement this Period
Candidate Name Rep. Brad Wenstrup		Category/ Type	1000.00
Office Sought: House Disbursem	nent For: 2014 Primary General Other (specify)	Турс	[MEMO ITEM] Campaign Contribution Funds Reported On July 20 Monthly
Full Name (Last, First, Middle Initial) B. Wenstrup For Congress Mailing Address PO Box 9551			Date of Disbursement 07 14 2014
Cincinnati	State Zip Code OH 45209		Transaction ID : 37343851
Purpose of Disbursement Campaign Contribution Re-designated funds for trar	ns. dated 6/10/2014	011	Amount of Each Disbursement this Period
Candidate Name Rep. Brad Wenstrup		Category/ Type	1000.00
Office Sought: House Disbursem	nent For: 2014 Primary General Other (specify)		[MEMO ITEM] Campaign Contribution Re-designated funds for trandated 6/10/2014
Full Name (Last, First, Middle Initial) C. Mike Thompson For Congress			Date of Disbursement
Mailing Address 5429 Madison Avenue			07 15 2014
Sacramento	State Zip Code CA 95841		Transaction ID : 37345250
Purpose of Disbursement Campaign Contribution Candidate Name Rep. Mike Thompson	011 Category/ Type	Amount of Each Disbursement this Period 1000.00	
Office Sought: House Disbursem	nent For: 2014 Primary General Other (specify)		Campaign Contribution
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or for commercial purposes, other than using the r	name and address of any poli	tical committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	. D D. A. O.		
American Academy of Neurology	BrainPAC		
Full Name (Last, First, Middle Initial)			
A. Becerra For Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. Box 71584			07 15 2014
City	State Zip Code		
Los Angeles	CA 90071		Transaction ID: 37345256
Purpose of Disbursement			
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Xavier Becerra Office Sought:	sement For: 2014	Type	1000.00
Office Sought: House Disbur	Primary Seneral		Compoint Contain the
President	Other (specify)		Campaign Contribution
State: CA District: 34			
Full Name (Last, First, Middle Initial)			
B. Richmond For Congress			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address 1631 Elysian Fields Suite 150			07 15 2014
City	State Zip Code		Transaction ID : 37345260
New Orleans Purpose of Disbursement	LA 70126		
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name			
Rep. Cedric Richmond		Category/ Type	1000.00
	sement For: 2014		
Senate	Y Primary General		Campaign Contribution
President	Other (specify) ▼		
State: LA District: 02			
Full Name (Last, First, Middle Initial)			Data of Dishurasment
C. Moran For Kansas			Date of Disbursement
Mailing Address PO Box 1151			07 15 2014
City	State Zip Code		Transaction ID : 37345266
Hays Purpose of Disbursement	KS 67601		
Campaign Contribution		011	Amount of Foot Bishomouncut this Bosist
Candidate Name			Amount of Each Disbursement this Period
Sen. Jerry Moran		Category/ Type	1000.00
•	sement For: 2016		
Senate >	Y Primary General		Campaign Contribution
President	Other (specify) ▼		
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NAME OF COMMITTEE (In Full)			
American Academy of Neurology B	rainPAC		
Full Name (Last, First, Middle Initial)			
A. Ellison For Congress			Date of Disbursement
Mailing Address PO Box 6072			07 15 2014
City	tate Zip Code		Transaction ID : 37345269
	MN 55406		11alisaction ib . 37343209
Purpose of Disbursement Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Keith Ellison	_	Туре	1000.00
	ent For: 2014 Primary General		
	Primary General Other (specify) ▼		Campaign Contribution
State: MN District: 05	Strict (opcomy)		
Full Name (Last, First, Middle Initial)			
B. Richard E Neal For Congress Com	mittee		Date of Disbursement
Mailing Address 76 Magnolia Terrace			07 15 2014
 _			
•	tate Zip Code MA 01108		Transaction ID: 37345275
Springfield Purpose of Disbursement	VIA 01106		
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Rep. Richard E. Neal		Type	1000.00
	ent For: 2014		
	Primary General Other (specify) ▼		Campaign Contribution
State: MA District: 01	Strict (apocity)		
Full Name (Last, First, Middle Initial)			
C. Pat Roberts For Us Senate Inc			Date of Disbursement
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Mailing Address PO Box 433			07 15 2014
City	tate Zip Code		Transaction ID: 37345276
	KS 67530		11d115dCtioff ID . 3/3432/6
Purpose of Disbursement Campaign Contribution		011	
Candidate Name		011	Amount of Each Disbursement this Period
Sen. Pat Roberts		Category/ Type	1000.00
	ent For: 2014	NI	
Senate X	Primary General		Campaign Contribution
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	NAME OF COMMITTEE (In Full)					
	American Academy of Neurology B	rainPAC				
<u>/</u>						
_	Full Name (Last, First, Middle Initial)					
Α.	Terri Sewell For Congress				Date of Disbursement	
					M M / D D / Y Y Y Y	
	Mailing Address P.O. Box 1964				07 15 2014	
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	,	State Zip Code	;		Transaction ID: 37345278	
	Birmingham Purpose of Disbursement	AL 35201				
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	Rep. Terri A. Sewell Office Sought: House Disbursen			Туре		٠.
		nent For: 2014				
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	State: AL District: 07	Other (specify) ▼				
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	Full Name (Last, First, Middle Initial)				Data of Dishurasment	
В.	Diane Black For Congress				Date of Disbursement	
	Mailing Address DOD 110				M M / D D / Y Y Y Y Y	
	Mailing Address PO Box 1437				07 24 2014	
	City	State Zip Code	,			
	Gallatin	TN 37066	•		Transaction ID: 37369645	
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	Rep. Diane Black			Category/ Type	1000.00	
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_	Tom Reed For Congress				Date of Disbursement	
	Tolli Need For Congress				M M / D D / Y Y Y Y	
	Mailing Address PO Box 391				07 24 2014	
	City	State Zip Code)		Tuesday ID 0700047	
	Geneva	NY 14456			Transaction ID: 37369647	
	Purpose of Disbursement					
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	Candidate Name			Category/	4000.00	7
	Rep. Tom Reed			Type	1000.00	
	Office Sought: House Disbursen	nent For: 2014	'		,	
	Senate	Primary X Gen	eral		Campaign Contribution	
	President	Other (specify) ▼				
	State: NY District: 23					
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 27 OF 31
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🗶 23 24 25 26
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Any information copied from such Reports and Stat			
or for commercial purposes, other than using the na	ame and address of any politi	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Academy of Neurology	BrainPAC		
/			
Full Name (Last, First, Middle Initial)			B
A. Mchenry For Congress			Date of Disbursement
Mailing Address DOD 4400			M M / D D / Y Y Y Y
Mailing Address PO Box 1406			07 24 2014
City	State Zip Code		
Hickory	NC 28603		Transaction ID: 37369648
Purpose of Disbursement			
Campaign Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Patrick Timothy McHenry		Type	1000.00
Office Sought: House Disburs	ement For: 2014		
Senate	Primary General		Campaign Contribution
President	Other (specify) ▼		
State: NC District: 10			
Full Name (Last, First, Middle Initial)			
B. Roskam For Congress Committed	е		Date of Disbursement
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Mailing Address P. O. Box 713			07 29 2014
0.1	01-1- 7'- 0-1-		
City Wheaton	State Zip Code IL 60187		Transaction ID: 37382466
vincatori	12 00107		
Purpose of Disbursement			
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Campaign Contribution Candidate Name Rep. Peter Roskam Office Sought: House Senate President State: IL District: 06	Primary General	Category/	1000.00
Campaign Contribution Candidate Name Rep. Peter Roskam Office Sought: House Senate President State: IL District: 06 Full Name (Last, First, Middle Initial)	Primary General	Category/	1000.00 Campaign Contribution Date of Disbursement
Campaign Contribution Candidate Name Rep. Peter Roskam Office Sought: House Senate President State: IL District: 06 Full Name (Last, First, Middle Initial)	Primary General	Category/	1000.00 Campaign Contribution Date of Disbursement
Campaign Contribution Candidate Name Rep. Peter Roskam Office Sought: House Senate President State: IL District: 06 Full Name (Last, First, Middle Initial) C. Cain For Congress Mailing Address P.O. Box 1523	Primary	Category/	1000.00 Campaign Contribution Date of Disbursement
Campaign Contribution Candidate Name Rep. Peter Roskam Office Sought: House Senate President State: IL District: 06 Full Name (Last, First, Middle Initial) C. Cain For Congress Mailing Address P.O. Box 1523 City	Primary	Category/	1000.00 Campaign Contribution Date of Disbursement
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Full Name (Last, First, Middle Initial)				
A. Devin Nunes Campaign Committee	;		Date of Disbursement	
Mailing Address PO Box 6545			07 29 2014	
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Mailing Address PO Box 361			07 29 2014	
Christiansburg	State Zip Code VA 24068		Transaction ID: 37382474	
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C. Friends Of Erik Paulsen			Date of Disbursement	
Mailing Address P.O. Box 44369 250 Prairie Center Drive			07 29 2014	
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Eden Prairie	MN 55344		Transaction ID: 37382476	
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American Academy of Neurology B	orainPAC			
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A. Perlmutter For Congress			Date of Disbursem	ent
Mailing Address 3440 Youngfield Street			07 29	2014
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\	Academy of Neurology E	BrainPAC				
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Full Name (Las	st, First, Middle Initial)					
Dr. Micha	el A. Williams			Date of Disbursement		
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