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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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2019 JUL 15 AM 10: 28

۱.	NAMÉ OF		
	COMMITTEE	(in	full

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

SPECIALIZED MEDICINE & RESIDENSIBLE TREATMENT								
PACI								
ADDRESS (number and street) 6,2,5,0, ROUTE 9								
Check if di than previo reported. (a	uslv .	<u> </u>	<u>e</u> 44,	1 1 1 1		<u>#</u> . Y	1,25,7	<u></u>
2. FEC IDENTIFI	CATION NUMB	ER ▼	CITY 🛦	•	S	TATE A	ZIP	CODE ▲
0006	4.8.24.6	2	3. IS THIS REPORT		NEW (N) OR	(A)	1ENDED	
4. TYPE OF RE (Choose One)	EPORT (b) Monthly Report Due On:	Feb 20 (M2	(<u>Ladi</u> 1750	May 20 (M5)		20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly R	eports:	<u>i</u>	Mar20 (M3 ==		Jun 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 1 Quarte	5 rly Report (Q1)	(2)	Apr 20 (M4)	لچا	Jul 20 (M7)		20 (M10)	Jan 31 (YE)
July 15 Quarte	5 rly Report (Q2)	(c) 12-Day PRE-Ele	(Primary (12	E-st.	General	Cara	Runoff (12R)
Octobe Quarte	er 15 rly Report (Q3)	Report f	or the:	Convention	(12C)	Special (12S)	
Januar Year-E	y 31 nd Report (YE)		Election on	M W M /			in t Sta	the ate of
Report	Mid-Year (Non-election Only) (MY)	(d) 30-Day POST-E Report f	(General (30)G) []	Runoff (3	30R)	Special (30S)
Termin (TER)	ation Report	перин	Election on	M ¥ M] /		/ ** 	in t Sta	the ate of
5. Covering Period		0 ()	019	through	06	′ [3 <u>.</u> 8]′	201	1
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 RIMAD D. Whitment								
Type or Print Name of Treasurer WONATO D. Whitmant								
Signature of Treasurer QD Date Date Date Date								
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.								
Office Use Only								ORM 3X 05/2016

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name medicine & Responsible Treatment Specialized 01/01/2019 06 30 201 Report Covering the Period: From: **COLUMN A** COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 3,4.8.7.06 Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

10. Debts and Obligations Owed **BY** the Committee (Itemize all on

Schedule C and/or Schedule D)

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

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

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

NOHO ON LINE ON DONOMINON

DETAILED SUMMARY PAGE of Receipts

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Page 3

Write or Type Committee Name		
Report Covering the Period: From:	(Y (Y (Y (Y (Y (Y (Y (Y (Y (Y	To:
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)		
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)		
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	[, <u>}</u>
Totals to Line 33, page 5)▶		
12. Transfers From Affiliated/Other		
Party Committees		
·		
13. All Loans Received		
14 Loop Resource Pageived		\
14. Loan Repayments Received		
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		
	•	
to Federal Candidates and Other Political Committees		
17. Other Federal Receipts	2 6 2	
(Dividends, Interest, etc.)		
(a) Non-Federal Account	iii US	
(from Schedule H3)		
(IIOTH Schedule 115)	. [
·		
(b) Levin Funds (from Schedule H5)	·	
•		
(c) Total Transfers (add 18(a) and 18(b))		
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶		
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶		

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B		
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4).	[Total Tills Feriou	Calendar Year-to-Date		
	(i) Federal Share				
	(ii) Non-Federal Share				
	(b) Other Federal Operating				
	Expenditures	16208	162 58		
	(c) Total Operating Expenditures		[
	(add 21(a)(i), (a)(ii), and (b))▶	16208	16208		
22.	Transfers to Affiliated/Other Party				
23	Contributions to				
20.	Federal Candidates/Committees and Other Political Committees				
24.	Independent Expenditures				
25.	(use Schedule E)				
	(use schedule i)				
26.	Loan Repayments Made				
	Loans Made				
28.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees				
	man Fondai Committees		La respective and a respective section of		
	(b) Political Party Committees				
	(c) Other Political Committees				
	(such as PACs)				
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))				
00	Other Disbursements (Including	<u> </u>			
29.	Non-Federal Donations)				
	Non-rederal Donations)				
30.	Federal Election Activity (52 U.S.C. § 301010 (a) Allocated Federal Election Activity (from Schedule H6)	(20))			
	(i) Federal Share				
	(ii) "Levin" Share				
	(b) Federal Election Activity Paid				
	Entirely With Federal Funds				
	(c) Total Federal Election Activity (add				
	Lines 30(a)(i), 30(a)(ii) and 30(b))				
31.	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16208	1.620,8		
32.	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		المسلم		
	from Line 31)	16208	1.6208		
	•				

Ronald D. Whitmont, MD 6250 Route 9 Rhinebeck, NY 12572

20463 Federal Election Commission First streen d.E Washington, DC 050

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
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No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
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Received from House Records & Registration O	Date of Receipt ffice			
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Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
Ber 5	7-15-2009			
(3/2015)	DATE PREPARED			