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# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Cooperative of American Physicians Federal Political Action Committee 333 S. Hope Street, 8th Floor ADDRESS (number and street) Check if different than previously Los Angeles CA 90071 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00161604 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day Х (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the 11 04 2008 CA Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2008 10 2008 15 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Kirk Alan Pessner Type or Print Name of Treasurer Electronically Filed by Kirk Alan Pessner 10 20 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

#### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Cooperative of American Physicians Federal Political Action Committee <sup>®</sup> D <sup>b</sup> D 1.0 0 1 2008 1.0 15 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2008 140999.47 January 1 (b) Cash on Hand at 167029.47 Begining of Reporting Period ..... 12515.00 103743.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 179544.47 244742.47 6(a) and 6(c) for Column B) ..... 2000.00 67198.00 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 177544.47 177544.47 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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) Page 3

2 0 0 8

01

Write or Type Committee Name

Report Covering the Period:

Cooperative of American Physicians Federal Political Action Committee

From:

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To:

D
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	2	0 0	8	

	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)	9975.00	53775.02
	(ii) Unitemized	2540.00	47467.98
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	12515.00	101243.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	12515.00	101243.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
10.	to Federal candidates and Other Political Committees	0.00	2500.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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 Transfer (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))	12515.00	103743.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	12515.00	103743.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
22.	Transfers to Affiliated/Other Party		
23.	CommitteesContributions to	0.00	0.00
24.	Federal Candidates/Committeesand Other Political CommitteesIndependent Expenditure	2000.00	67198.00
	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
∠ŏ.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6) (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))	2000.00	67198.00
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	2000.00	67198.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	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)	12515.00	101243.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	12515.00	101243.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 20 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Cooperative of American Physicians	e name and address of any political committee t	ion for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stuart Anderson, MD  Mailing Address 11 Windham Lane  City  Laguna Niguel  FEC ID number of contributing federal political committee.  Name of Employer Stuart Anderson, MD  Receipt For: 2008  Primary General  X Other (specify)  Calendar Year	State Zip Code CA 92677  C  Occupation Physician Aggregate Year-to-Date  250.00	Date of Receipt  M M M D D D 2 2 0 0 8  Transaction ID: 11ai-72622  Amount of Each Receipt this Period  150.00
Full Name (Last, First, Middle Initial) Philip Biderman, MD  Mailing Address 13320 Riverside Drive  City Sherman Oaks  FEC ID number of contributing federal political committee.  Name of Employer Philip Biderman, MD  Receipt For: 2008 Primary General X Other (specify)  Calendar Year	State Zip Code CA 91423  C  Occupation Physician  Aggregate Year-to-Date   500.00	Date of Receipt    M   M   D   D   C   2 0 0 8
Full Name (Last, First, Middle Initial) Paul Brower, MD  Mailing Address 25200 La Paz Rd #20  City  Laguna Hills  FEC ID number of contributing federal political committee.  Name of Employer Paul Brower, MD  Receipt For: 2008  Primary General  X Other (specify)  Calendar Year	State Zip Code CA 92653  C  Occupation Physician  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		650.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 20 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Cooperative of American Physicians	s Federal Political Action Committee	
Full Name (Last, First, Middle Initial)  Bruce Burton, MD		Date of Receipt
Mailing Address 14 Rippling Stream	Charles 7 in Conde	10 14 2008
City <u>Irvine</u>	State Zip Code CA 92715	Transaction ID: 11ai-72629  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bruce Burton, MD	Occupation Physician	
Receipt For: 2008 Primary General X Other (specify)  Calendar Year	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Robert Chang, DO Mailing Address 4064 Louisiana St		Date of Receipt
		10 01 2008
City San Diego	State Zip Code CA 92104	Transaction ID: 11ai-72588  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Robert Chang, DO	Occupation Physician	
Receipt For: 2008 Primary General	Aggregate Year-to-Date ▼	1
X Other (specify) ▼ Calendar Year	250.00	
Full Name (Last, First, Middle Initial) Jitka Civrna, MD		Date of Receipt
Mailing Address 74000 Country Club	Drive, #G2	M M / D D / Y Y Y Y Y Y 1 D D / 2008
City	State Zip Code CA 92260	Transaction ID: 11ai-72604
Palm Desert  FEC ID number of contributing federal political committee.	CA 92260	Amount of Each Receipt this Period 250.00
Name of Employer Jitka Civrna, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional	)	750.00
TOTAL This Period (last page this line numb	•	

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Any information copied from such Reports and		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 20 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	NAME OF COMMITTEE (In Full)  Cooperative of American Physicians	e name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Lawrence Cutner, MD  Mailing Address 19620 Tenaja Road			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 11ai-72601
	Murrieta	CA	92562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lawrence Cutner, MD	Occupation Physicia		
	Receipt For: 2008 Primary General  X Other (specify)  Calendar Year	Aggregate	e Year-to-Date ▼ 250.00	
– В.	Full Name (Last, First, Middle Initial) Tony Deeths, MD Mailing Address 1817 Truxtun Ave.			Date of Receipt  10 0 1 2 0 0 8
	City	State	Zip Code	Transaction ID: 11ai-72584
	<u>Bakersfield</u>	CA	93301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Tony Deeths, MD	Occupation Physicia		
	Receipt For: 2008 Primary General  X Other (specify)  Calendar Year	Aggregate	e Year-to-Date ▼ 450.00	
о. С.	Full Name (Last, First, Middle Initial) Alexander Deyan, MD  Mailing Address 360 San Miguel Drive	e. #508		Date of Receipt
				10 01 2008
	City Newport Beach	State CA	Zip Code 92660	Transaction ID: 11ai-72583  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Alexander Deyan, MD	Occupation Physicial		
	Receipt For: 2008 Primary General  X Other (specify)  Calendar Year	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			800.00
	TOTAL This Period (last page this line number	er only)		

City State Zip Code La Jolla CA 92037  FEC ID number of contributing federal political committee.  Name of Employer Calendar Year Variable Initial) Joshua Feder, MD Mailing Address 415 North Hwy 101 #E  City State Zip Code Solana Beach CA 92075  FELID number of contributing federal political committee.  City State Zip Code Solana Beach CA 92075  FEC ID number of contributing federal political committee.  City State Zip Code Solana Beach CA 92075  FEC ID number of contributing federal political committee.  City State Zip Code Primary General X Other (specify) ▼ 250.00  City State Zip Code Primary General X Other (specify) ▼ 250.00  City State Zip Code Primary General X Other (specify) ▼ 250.00  City State Zip Code Primary General X Other (specify) ▼ 250.00  City State Zip Code Primary General X Other (specify) ▼ 250.00  City State Zip Code Primary General X Other (specify) ▼ 250.00  City State Zip Code Ventura CA 93003  FEC ID number of contributing federal political committee.  C. City State Zip Code Ventura CA 93003  FEC ID number of contributing federal political committee.  C. City State Zip Code Ventura CA 93003  FEC ID number of contributing federal political committee.  C. City State Zip Code Ventura CA 93003  Fer imary General X Other (specify) ▼ 250.00  City General X Other (specify) ▼ 250.00	SCHEDULE A (I	EIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 20 (check only one)  X 11a
A. Deirder Elliott, MD  Mailing Address 4130 La Jolla Village Drive,  City State Zip Code  La Jolla CA 92037  FEC ID number of contributing federal political committee.  Name of Employer Deirder Elliott, MD  Physician  Receipt For: 2008 Primary General X Other (specify) ▼ Calendar Year  Name (Last, First, Middle Initial) Joshua Feder, MD  Mailing Address 415 North Hwy 101 #E  City Solana Beach CA 92075  FEC ID number of contributing federal political committee.  Caty Solana Beach CA 92075  FEC ID number of contributing federal political committee.  Name of Employer Joshua Feder, MD  Name (Last, First, Middle Initial) Joshua Feder, MD  Name of Employer Joshua Feder, MD  Na	or for commercial purpos  NAME OF COMMITT	es, other than using the name and ac EE (In Full)	ddress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
City La Jolla CA State CA Secont FEC ID number of contributing federal political committee.  Name of Employer Derirde Elilott, MD Primary Caneral City Solana Beach FEC ID number of contributing Receipt For: Solana Beach CA Secont FEC ID number of contributing federal political committee.  City Solana Beach Primary Caneral Coccupation Physician  Receipt For: Solana Beach CA Solona Coccupation Physician  Receipt For: Solana Beach CA Solona Coccupation Physician  Receipt For: Solana Beach CA Solona Coccupation Physician  Receipt For: Solona Coccupation Physician  Receipt For: Coccupation Physician  Re	A. Deirdre Elliott, MD	, 		<b>-</b>
La Jolla  CA 92037  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Derivative Elliott, MD  Name of Employer Derivative Elliott, MD  Receipt For: Calendar Year  Cocupation Physician  Aggregate Year-to-Date ▼  250.00  Date of Receipt  Transaction ID: 11ai-72623  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  10 0 0 8 7 2 0 0  Transaction ID: 11ai-72623  Amount of Each Receipt this Period  Cocupation Physician  Receipt For: 2008 Primary General X Other (specify) ▼  Calendar Year  Cocupation Physician  Receipt For: Calendar Year  Cocupation Physician  Cocupation Physician  Receipt For: Calendar Year  Cocupation Physician	Mailing Address 41	30 La Jolla Village Drive,		
FEC ID number of contributing rederal political committee.  Name of Employer Deriver Der	•		Zip Code	Transaction ID: 11ai-72606
Name of Employer Deirdre Elliott, MD Receipt For: 2008 Primary General X Other (specify) ▼ Calendar Year  Fell Name (Last, First, Middle Initial) Joshua Feder, MD Mailing Address 415 North Hwy 101 #E  City Solana Beach CA Primary General X Other (specify) ▼ Calendar Year  Fell Name (Last, First, Middle Initial)  Date of Receipt  Transaction ID: 11ai-72623 Amount of Each Receipt this Period  Physician  Receipt For: 2008 Primary General X Other (specify) ▼ Calendar Year  Fel ID number of contributing federal political committee.  Calendar Year  Fel ID number of contributing Federal political committee.  Calendar Year  Calendar Year  Fel ID number of contributing Federal political committee.  Calendar Year  Calendar Year  Calendar Year  Aggregate Year-to-Date ▼  Transaction ID: 11ai-72573 Amount of Each Receipt this Period  Transaction ID: 11ai-72573 Amount of Each Receipt this Period  Transaction ID: 11ai-72573 Amount of Each Receipt this Period  Transaction ID: 11ai-72573 Amount of Each Receipt this Period  Transaction ID: 11ai-72573 Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Primary General X Other (specify) ▼  Calendar Year  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	<u>La Jolla</u>	CA	92037	Amount of Each Receipt this Period
Receipt For: 2008   Aggregate Year-to-Date ▼				250.00
Primary   General   Calendar Year   Calenda	Name of Employer Deirdre Elliott, MD	· · ·		
B. Full Name (Last, First, Middle Initial) Joshua Feder, MD  Mailing Address 415 North Hwy 101 #E  City State Zip Code CA 92075  FEC ID number of contributing federal political committee.  Name of Employer Joshua Feder, MD  Receipt For: 2008 Primary General X Other (specify) ▼ Calendar Year  FEC ID number of contributing FEC ID number of contributing federal political committee.  Pagregate Year-to-Date ▼  Tansaction ID: 11ai-72623  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Tansaction ID: 11ai-72573  Amount of Each Receipt Tor: 2008 Primary General X Other (specify) ▼ Calendar Year  Color State Zip Code Tansaction ID: 11ai-72573  Tansaction ID: 11ai-72573  Amount of Each Receipt Tor: 2008 Primary General X Other (specify) ▼ Calendar Year  Aggregate Year-to-Date ▼  Primary General X Other (specify) ▼ Calendar Year	Primary	General		
City State Zip Code Solana Beach CA 92075  FEC ID number of contributing federal political committee.  Name of Employer Joshua Feder, MiD  Receipt For: 2008 Primary General X Other (specify) ▼ 250.00  City State Zip Code CA 93003  Full Name (Last, First, Middle Initial) Michael Ferguson, MD  First State Zip Code CA 93003  FeC ID number of contributing federal political committee.  Name of Employer Last, First, Middle Initial)  Michael Ferguson, MD  FeC ID number of contributing federal political committee.  Name of Employer Michael Ferguson, MD  Receipt For: 2008 Primary General X Other (specify) ▼ 250.00  City State Zip Code CA 93003  Amount of Each Receipt  Transaction ID: 11ai-72573  Amount of Each Receipt  Transaction ID: 11ai-72573  Amount of Each Receipt this Period  Transaction ID: 11ai-72573  Amount of Each Receipt this Period  450.00	Full Name (Last, First Joshua Feder, MD	, Middle Initial)		
Solana Beach  CA 92075  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Joshua Feder, MD  Primary General X Other (specify) ▼ Calendar Year  Full Name (Last, First, Middle Initial)  Michael Ferguson, MD  Mailing Address 337 La Salle Ave.  City State Zip Code CA 93003  FEC ID number of contributing federal political committee.  Name of Employer Michael Ferguson, MD  Name of Employer Michael Ferguson, MD  Receipt For: 2008  Primary General X Other (specify) ▼ Calendar Year  Amount of Each Receipt this Period  Transaction ID: 11ai-72573  Amount of Each Receipt this Period  250.0				10 08 2008
FEC ID number of contributing federal political committee.    Name of Employer Joshua Feder, MD	•		•	
Physician   Receipt For:   2008   Aggregate Year-to-Date ▼   250.00	FEC ID number of co	ntributing	92075	250.00
Primary General  X Other (specify) ▼ Calendar Year  Full Name (Last, First, Middle Initial) Michael Ferguson, MD  Mailing Address 337 La Salle Ave.  City State Zip Code Ventura CA 93003  FEC ID number of contributing federal political committee.  Name of Employer Michael Ferguson, MD  Receipt For: 2008 Primary General  X Other (specify) ▼ Calendar Year  Primary General  X Other (specify) ▼ Calendar Year  Primary General  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	Name of Employer Joshua Feder, MD			
Michael Ferguson, MD  Mailing Address 337 La Salle Ave.  City State Zip Code Ventura CA 93003  FEC ID number of contributing federal political committee.  Name of Employer Michael Ferguson, MD  Receipt For: 2008 Primary General X Other (specify) ▼ Calendar Year  Date of Receipt  Transaction ID: 11ai-72573  Amount of Each Receipt this Period  250.0	Primary X Other (specify)	General		
City State Zip Code   Ventura CA 93003   Amount of Each Receipt this Period  Amount of Each Receipt this Period  C  State CA 93003  Amount of Each Receipt this Period  C  250.0  Amount of Each Receipt this Period  C  250.0  Amount of Each Receipt this Period  C  Agregation Physician  Receipt For: Primary General X Other (specify) Calendar Year  Aggregate Year-to-Date  450.00  Transaction ID: 11ai-72573  Amount of Each Receipt this Period  450.00  Aggregate Year-to-Date  450.00  Transaction ID: 11ai-72573  Amount of Each Receipt this Period  450.00  Aggregate Year-to-Date  450.00	Michael Ferguson, MD	•		M M / D D / Y Y Y Y
Ventura CA 93003   FEC ID number of contributing federal political committee. C 250.0    Amount of Each Receipt this Period  250.0  Occupation Physician  Receipt For: Primary General X Other (specify) ▼ Calendar Year  Amount of Each Receipt this Period  450.00	City	State	Zip Code	
Receipt For:  Primary  Calendar Year  Occupation Physician  Aggregate Year-to-Date  450.00	<u>Ventura</u>	CA	93003	
Michael Ferguson, MD  Receipt For: 2008 Primary General X Other (specify) ▼ Calendar Year  Physician  Aggregate Year-to-Date ▼  450.00				250.00
Primary General  X Other (specify) ▼ Calendar Year  General  450.00	Name of Employer Michael Ferguson, M	D '		
	Primary	General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts	s This Page (optional)		750.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 20 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than u	ts and Statements may not be sold or used by any paining the name and address of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Tony Feuerman, MD  Mailing Address 16133 Ventura		Date of Receipt  1 0 0 1 2 0 0 8
City	State Zip Code	Transaction ID: 11ai-72572
Encino	CA 91436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tony Feuerman, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Daniel Fortmann, MD	Capistrano C-102	Date of Receipt
Walling Address 32201 Carrillo	Capistrano C-102	10 01 2008
City	State Zip Code	Transaction ID: 11ai-72564
San Juan Capistran	CA 92675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Daniel Fortmann, MD	Occupation Physician	
Receipt For: 2008 Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Michael Friedman, MD		Date of Receipt
Mailing Address 4201 Torrance	Blvd., #660	10 01 2008
City	State Zip Code	Transaction ID: 11ai-72567
Torrance	CA 90503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Michael Friedman, MD	Occupation Physician	
Receipt For: 2008 Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (op	ional)	700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Cooperative of American Physicians	e name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Daniel Gardner, MD  Mailing Address 13725 Mar Scenic Dr  City Del Mar  FEC ID number of contributing federal political committee.  Name of Employer Daniel Gardner, MD	State Zip Code CA 92014  C Occupation	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year		50.00
Full Name (Last, First, Middle Initial) Robert Gray, MD  Mailing Address 227 W. Janss Road,	#360	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 11ai-72566
Thousand Oaks FEC ID number of contributing federal political committee.	CA 91360	Amount of Each Receipt this Period  250.00
Name of Employer Robert Gray, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Deborah Heaps, MD		Date of Receipt
Mailing Address 20659 Chatsboro Driv	/e	1 0 0 1 2 0 0 8
City	State Zip Code	Transaction ID: 11ai-72607
Woodland Hills FEC ID number of contributing	CA 91364	Amount of Each Receipt this Period 250.00
federal political committee.	0	
Name of Employer Deborah Heaps, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼	00.00
SUBTOTAL of Receipts This Page (optional)	•	550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 20 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Cooperative of American Physicians F	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Tony Hsu, MD  Mailing Address 18800 Main St., #108  City Huntington Beach  FEC ID number of contributing federal political committee.  Name of Employer Tony Hsu, MD  Receipt For: 2008 Primary General X Other (specify) Calendar Year	State Zip Code CA 92648  C  Occupation Physician  Aggregate Year-to-Date   500.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) John Ingram, MD  Mailing Address 2888 Long Beach Blvc  City Long Beach  FEC ID number of contributing federal political committee.  Name of Employer John Ingram, MD  Receipt For: 2008 Primary General X Other (specify)	State Zip Code CA 90806  C  Occupation Physician  Aggregate Year-to-Date  250.00	Date of Receipt    M M M
Calendar Year  Full Name (Last, First, Middle Initial) Kenneth Ishizue, MD  Mailing Address 12705 Corte Cordillera  City Salinas  FEC ID number of contributing federal political committee.  Name of Employer Kenneth Ishizue, MD  Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	State Zip Code CA 93908  C  Occupation Physician  Aggregate Year-to-Date  350.00	Date of Receipt    M M M
Calendar Year  SUBTOTAL of Receipts This Page (optional)		600.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 13 / 20   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Cooperative of American Physicia	ns Federal Politi	cal Action Committee	
Full Name (Last, First, Middle Initial) Bruce Joseph, MD			Date of Receipt
Mailing Address 6001 Truxtun Ave.	, Ste 220b		10 01 2008
City Bakersfield	State CA	Zip Code 93309	Transaction ID: 11ai-72595  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Bruce Joseph, MD	Occupation Physician		
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Martha Kirkpatrick, MD	I		Date of Receipt
Mailing Address 988 Bluegrass Lar	ie		M M / D D / Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City	State	Zip Code	Transaction ID: 11ai-72578
Los Angeles	CA	90049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Martha Kirkpatrick, MD	Occupation Physician		
Receipt For: 2008	Aggregate	e Year-to-Date	
Primary General  X Other (specify) ▼ Calendar Year	0 0	250.00	
Full Name (Last, First, Middle Initial) Mark Labowe, MD	<b>I</b>		Date of Receipt
Mailing Address 100 Ucla Medical I	Plaza, #747		10 02 7 2008
City	State	Zip Code	Transaction ID: 11ai-72611
Los Angeles	CA	90024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Mark Labowe, MD	Occupation Physician		
Receipt For: 2008	<u> </u>	e Year-to-Date ▼	
Primary General  X Other (specify) ▼ Calendar Year		600.00	
SUBTOTAL of Receipts This Page (option	1		850.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 20 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements manne name and add	y not be sold or used by any person dress of any political committee to	
Cooperative of American Physicians	Federal Politi	ical Action Committee	
Full Name (Last, First, Middle Initial) Inna Lamport, MD			Date of Receipt
Mailing Address 1211 Brunswick Ave.			10 09 2008
City	State	Zip Code	Transaction ID: 11ai-72624
South Pasadena	CA	91030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Inna Lamport, MD	Occupatio Physicia		
Receipt For: 2008	Aggregate	e Year-to-Date ▼	7
Primary General		225.00	1
X Other (specify) ▼ Calendar Year		225.00	
Full Name (Last, First, Middle Initial) James Liu, MD			Date of Receipt
Mailing Address 501 E. Hardy St., #4	30		10 01 2008
City	State	Zip Code	Transaction ID: 11ai-72603
Inglewood	CA	90301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer James Liu, MD	Occupatio Physicia		
Receipt For: 2008 Primary General  X Other (specify)  Calendar Year	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Richard Macias, MD	<b>-</b>		Date of Receipt
Mailing Address 1235 Osos St., #100			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 11ai-72612
San Luis Obispo	CA	93401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Richard Macias, MD	Occupatio Physicia		
Receipt For: 2008	Aggregate	e Year-to-Date 🔻	
Primary General  X Other (specify) ▼ Calendar Year		350.00	

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

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Reports a	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 20 (check only one)    X
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	g the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Bose Mandava, MD Mailing Address 4990 Caminita Lui	00	Date of Receipt
		10 01 2008
City	State Zip Code CA 93012	Transaction ID: 11ai-72602
Camarillo  FEC ID number of contributing federal political committee.	CA 93012	Amount of Each Receipt this Period 250.00
Name of Employer Bose Mandava, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Alan Marco, MD		Date of Receipt
Mailing Address 5007 Roma Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 11ai-72600
Marina Del Rey	CA 90292	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Alan Marco, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Kenneth Martinez, MD		Date of Receipt
Mailing Address 24866 Jeronimo L	ane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 11ai-72586
Lake Forest	CA 92630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kenneth Martinez, MD	Occupation Physician	
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

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

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 20 (check only one)    X   11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Cooperative of American Physicians	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <b>\</b> .	Full Name (Last, First, Middle Initial) William May, MD			Date of Receipt
	Mailing Address 9209 Colima Road, #.  City	2000  State	Zip Code	10 01 2008
	Whittier	CA	90605	Transaction ID: 11ai-72598  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer William May, MD	Occupation Physicia		
	Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	<del>, '                                   </del>	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Guiragos Minassian, MD Mailing Address 19671 Tulsa St.			Date of Receipt  1 0 0 1 2 0 0 8
	City	State	Zip Code	1 0 0 1 2 0 0 8 Transaction ID: 11ai-72589
	Chatsworth	CA	91311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Guiragos Minassian, MD	Occupation Physicia		
	Receipt For: 2008 Primary General  X Other (specify) ▼ Calendar Year	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Dennis Noesen, MD			Date of Receipt
	Mailing Address 2840 Long Beach Blvd., #230			M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
	City	State	Zip Code	Transaction ID: 11ai-72577
	Long Beach	CA	90806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Dennis Noesen, MD	Occupation Physicia		
	Receipt For: 2008 Primary General  X Other (specify)  Calendar Year	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional) .		<b>)</b>	850.00
-	TOTAL This Period (last page this line number			

A. Full John Mail City La. FEC feder X	ommercial purposes, other than using the infection of the purpose	name and address of any ederal Political Action	Committee  Committee	Date of Receipt    Date of Receipt   1 0 0 9   2 0 0 8
A. John Mail City La FEC fede Nan John Rec	Jolla CID number of contributing eral political committee. The of Employer n Otis, MD  eipt For:  2008  Primary  General	State Zip Co CA 92037  C Occupation Physician		Transaction ID: 11ai-72625  Amount of Each Receipt this Period
City La Section FEC fede Nam John Rec	Jolla C ID number of contributing eral political committee. The of Employer of Otis, MD  eipt For: 2008 Primary General	State Zip Co CA 92037  C Occupation Physician		Transaction ID: 11ai-72625  Amount of Each Receipt this Period
La FEC fede Nam John Rec	Jolla C ID number of contributing eral political committee. The of Employer of Otis, MD  eipt For: 2008 Primary General	CA 92037  C  Occupation Physician		Amount of Each Receipt this Period
Rec X	DID number of contributing eral political committee.  The of Employer of Cits, MD  The ipt For:  The primary Contributing eral contribution eral contributio	Occupation Physician		
Nam John Rec	eral political committee.  ne of Employer n Otis, MD  eipt For: 2008 Primary General	Occupation Physician		250.00
Rec	eipt For: 2008 Primary General	Physician		7
X	Primary General	Aggregate Year-to-Da		
	-		te ▼	
- Full	Calendar Year	0 0 0 0	350.00	
	Name (Last, First, Middle Initial) lo Prietto, MD			Date of Receipt
Mail 	Mailing Address 1892 Park Skyline Road			10 01 7 2008
City		State Zip Co		Transaction ID: 11ai-72605
	nta Ana	CA 92705		Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		100.00
	ne of Employer lo Prietto, MD	Occupation Physician		
Rec X	eipt For: 2008 Primary General Other (specify) ▼ Calendar Year	Aggregate Year-to-Da	350.00	
	Full Name (Last, First, Middle Initial) Arturo Quintanilla, MD			Date of Receipt
Mail	Mailing Address 35900 Bob Hope Dr Ste 140			10 02 YYYYY 2008
City		State Zip Co		Transaction ID: 11ai-72609
<u>Rar</u>	ncho Mirage	CA 92270	<u> </u>	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	C		250.00
	ne of Employer Iro Quintanilla, MD	Occupation Physician		
Rec	eipt For: 2008 Primary General Other (specify) ▼ Calendar Year	Aggregate Year-to-Da	250.00	
SUBT	OTAL of Receipts This Page (optional)			600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 20 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  Cooperative of American Physician	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mohamad Shaheedy, MD Mailing Address 5400 Balboa Blvd.	, #210		Date of Receipt
City Encino	State CA	Zip Code 91316	Transaction ID: 11ai-72599  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Mohamad Shaheedy, MD	Occupation Physician		250.00
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	<del></del>	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Michele Stewart, MD Mailing Address 4150 Regents Park	≺ Row #250		Date of Receipt  1 0 0 9 2 0 0 8
City	State	Zip Code	Transaction ID: 11ai-72626
La Jolla  FEC ID number of contributing federal political committee.	CA	92037	Amount of Each Receipt this Period 250.00
Name of Employer Michele Stewart, MD	Occupation Physician		7
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Patrick Wade, MD			Date of Receipt
Mailing Address 1016 E. Broadway	#100		10 01 2008
City Glendale	State CA	Zip Code 91205	Transaction ID: 11ai-72575  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31200	500.00
Name of Employer Patrick Wade, MD	Occupation Physician		7
Receipt For: 2008  Primary General  X Other (specify) ▼ Calendar Year	<del></del>	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)		1000.00

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В.

PAGE 19/20 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cooperative of American Physicians Federal Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Robert Wagmeister, MD Mailing Address 2001 Santa Monica Blvd., #690 0 1 2008 10 City State Zip Code Transaction ID: 11ai-72585 Santa Monica CA 90404 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Robert Wagmeister, MD Occupation Physician Receipt For: 2008 Aggregate Year-to-Date Primary General 600.00 Other (specify) 
Calendar Year Χ Full Name (Last, First, Middle Initial) Leila Zafaranchi, MD Date of Receipt Mailing Address 26522 Meadow Crest 01 2008 City State Zip Code Transaction ID: 11ai-72581 Laguna Hills CA 92653 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Leila Zafaranchi, MD Occupation Physician Receipt For: 2008 Aggregate Year-to-Date ▼ Primary General

250.00

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	<u> </u>	9975.00

Other (specify) 
Calendar Year

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ΙΤ	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS  y Information copied from such Reports and Sta	Use separate schedule(s) for each category of the Detailed Summary Page tements may not be sold or used b	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
	or commercial purposes, other than using the r			· ·
$\rangle$	NAME OF COMMITTEE (In Full)  Cooperative of American Physicians Fe	deral Political Action Commit	tee	
	Full Name (Last, First, Middle Initial) Coleman for Senate 2008  Mailing Address 11150 Santa Monica	Blvd # 450		Transaction ID: 23-501 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Los Angeles Purpose of Disbursement Political Contribution	State Zip Code CA 90025	011	Amount of Each Disbursement this Period 2000.00
	Candidate Name Norm Coleman		Category/ Type	
	Office Sought:    House   Disb     X   Senate     President     State: MN   District:	rsement For: 2008 Primary X General Other (specify)		

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