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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	. • • • • • • • • • • • • • • • • • • •	All Additionized				Office Use Onl	у	
1. NAME OF TY COMMITTEE (in full)	/PE OR PRINT ¶		mple: If typir r the lines.	ıg, type	12FE4M5			
Political Action Committee	ee of the Am	erican Assoc	iation of C	Orthopae	dic Surge	onsPAC	of AAOS	
ADDRESS (number and street)	317 Massachuse	tts Ave., N.E.						
Check if different	1st Floor							
than previously reported. (ACC)	Washington DC 20002							
2. FEC IDENTIFICATION NUM	IBER ▼	CITY		;	STATE A	ZIP (CODE A	
C C00343137		3. IS THIS REPORT		IEW N) OR	× (A)	MENDED		
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:	Due On.	Mar 20 (M3)		lun 20 (M6)	H	20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
April 15 Quarterly Report (Q1)		Apr 20 (M4)		lul 20 (M7)	. —	20 (M10)	Jan 31 (YE)	
July 15 Quarterly Report (Q2)	(c) 12-Day PRE -E		Primary (12P Convention (-	General Special (Runoff (12R)	
October 15 Quarterly Report (Q3)		ior the.	Convention (120)	Special (120)		
X January 31 Year-End Report (YE)		Election on	M M /	D D /	Y Y Y Y	in th State		
July 31 Mid-Year Report (Non-election Year Only) (MY)		Election for the:	General (30G	i)	Runoff (3	80R)	Special (30S)	
Termination Report (TER)	Tiopon	Election on	M = M /	D D /	Y . Y . Y . Y	in th State		
5. Covering Period 11	25	2014	through	M M 12	/ D D /	2014		
I certify that I have examined this	•		wledge and b	pelief it is tru	e, correct and	d complete.		
Type or Print Name of Treasurer	William J. Robb I	II, WID						
Signature of Treasurer William	J. Robb III, MD		[Electronically	<i>Filed]</i>	vate 03	12	2015	
NOTE: Submission of false, erroneou	us, or incomplete	information may su	bject the pers	son signing th	nis Report to the	ne penalties of	2 U.S.C. §437g.	
Office Use Only						FEC FC Rev. 12		

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

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

25 2014 Report Covering the Period: 2014 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 977438.67 January 1. 2014 (b) Cash on Hand at 611301.56 Beginning of Reporting Period..... 1351907.99 29241.94 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 640543.50 2329346.66 6(a) and 6(c) for Column B)..... 19442.05 1708245.21 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 621101.45 621101.45 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY 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)

Write or Type Committee Name

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	26027.33	1168325.66
(i) Itemized (use Schedule A)	20021.33	11002530
(ii) Unitemized	2643.00	130536.66
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	28670.33	1298862.32
(1) 5 10 15 15 15 15	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 Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	28670.33	1298862.32
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
. All Loans neceived		
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	562.29	19204.50
6. Refunds of Contributions Made	,	
to Federal Candidates and Other		20752.00
Political Committees	0.00	33750.00
Other Federal Receipts (Dividende Interest etc.)	0.00	01.17
(Dividends, Interest, etc.)	9.32	91.17
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(11011111111111111111111111111111111111		0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i unus (iioiii ochedule 110)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
_		
). Total Receipts (add Lines 11(d),	20044.04	4354007.00
12, 13, 14, 15, 16, 17, and 18(c))▶	29241.94	1351907.99
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	29241.94	1351907.99

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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				
(i) Federal Share	7					
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating	692.05	19240.03				
Expenditures(c) Total Operating Expenditures	032.03	13240.03				
(add 21(a)(i), (a)(ii), and (b))▶	692.05	19240.03				
Transfers to Affiliated/Other Party	0.00	0.00				
Contributions to	0.00	0.00				
Federal Candidates/Committees and Other Political Committees	18500.00	1094400.00				
Independent Expenditures	0.00	500005 40				
(use Schedule E) Coordinated Party Expenditures	0.00	589005.18				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
(400 0010440 1 /1111111111111111111111111		7 7 7				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other						
Than Political Committees	250.00	250.00				
(b) Political Party Committees	0.00	0.00				
(b) Political Party Committees						
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))▶	250.00	250.00				
ř						
Other Disbursements	0.00	5350.00				
Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6) (i) Federal Share	0.00	0.00				
(i) redetal Strate						
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely	0.00	0.00				
With Federal Funds(c) Total Federal Election Activity (add	0.00	0.00				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
Total Dishuramente (add Lines 01/s) 00						
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19442.05	1708245.21				
, , , , , , , , , , , , , , , , , , , ,	13 112.00	1700243.21				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	19442.05	1708245.21				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

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: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3XA

Transaction ID:

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

Form/Schedule: Transaction ID:

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

FOR LINE NUMBER:					PAGE	7	OF	42
(check only one)								
$\mid \; \mid \times$	11a		11b		11c	12		
	13		14		15	16	;	17

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) Political Action Committee of	the American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Andre Nicolas Gay MD		Date of Receipt
Mailing Address 35550 Monterra Ter Apt 30)2	11 25 2014
City Union City	State Zip Code CA 94587-8055	Transaction ID : 6605094
FEC ID number of contributing federal political committee.	C 34387-0033	Amount of Each Receipt this Period 100.00
Name of Employer Beloit Health System	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Andrew D Bries MD Mailing Address 3126 Westminster Rd	1	Date of Receipt
City Bettendorf	State Zip Code IA 52722-4792	11 27 2014 Transaction ID : 6612830 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) C. Michael A Rauh MD		Date of Receipt
Mailing Address 46 Middlebury Rd		11 282014
City Orchard Park	State Zip Code NY 14127-3962	Transaction ID : 6612831 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer University Orthopedic Specialists	Occupation Orthopaedic Surgeon	
Receipt For: Primary Other (specify)	Aggregate Year-to-Date ▼ 425.00	
SUBTOTAL of Receipts This Page (optional)		400.00
TOTAL This Period (last page this line numb	er only)	

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

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or for commercial purposes, other than usi	ng the name and address of any political committee t	to solicit contributions from such committee.				
/	of the American Association of Orthop	paedic SurgeonsPAC of AAOS				
Full Name (Last, First, Middle Initial) A. Jeffery D Angel MD		Date of Receipt				
Mailing Address 501 Virginia Dr Ste C		1.1 28 2014				
City Batesville	State Zip Code AR 72501-7331	Transaction ID : 6612832 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	84.00				
Name of Employer	Occupation	1				
Self Employed	Orthopaedic Surgeon					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	670.00					
Full Name (Last, First, Middle Initial) 3. Scott Edward Porter MD		Date of Receipt				
Mailing Address Dept of Ortho, Acad Ser 701 Grove Rd 2nd FI St	uprt Twr	12 03 / 2014				
City	State Zip Code	Transaction ID: 6630292				
Greenville	SC 29605	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	84.00				
Name of Employer	Occupation	1				
Greenville Hospital System	Orthopaedic Surgeon	_				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1256.00					
Full Name (Last, First, Middle Initial) C. Steven G Wynder MD		Date of Receipt				
Mailing Address 5290 W 612 N		12 03 2014				
City	State Zip Code	Transaction ID : 6630293				
Huntington	IN 46750-8964	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	1				
Parkview Health	Orthopaedic Surgeon]				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	500.00					
SUBTOTAL of Receipts This Page (option	nal)	418.00				
TOTAL This Period (last page this line nu	imber only)					

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

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or for commercial purposes, other than using	g the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	f the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) John Minoru Itamura MD Mailing Address 921 Monterey Rd		Date of Receipt
City South Pasadena	State Zip Code CA 91030-3106	Transaction ID : 6643508 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kerlan-Jobe Orthopaedic Clinic	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. Michael F Schafer MD Mailing Address 1815 W Ridgewood Lane	Date of Receipt	
City Glenview	State Zip Code IL 60025	Transaction ID : 6643509 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Northwestern Univ Medical School Receipt For:	Occupation Orthopaedic Surgeon	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Andrew Stoeckl MD		Date of Receipt
Mailing Address 90 Fairlawn Dr		12 02 2014
City Amherst	State Zip Code NY 14226	Transaction ID : 6643514 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Excelsior Ortho	Occupation Orthopaedic Surgeon	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	11)	2250.00
TOTAL This Period (last page this line num	nber only)	

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

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(check only one)									
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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.

	1 1 -, -,	, , ,						
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	nedic SurgeonsPAC of AAOS					
Δ.	Full Name (Last, First, Middle Initial) Matthew P Gardner MD Mailing Address 207 Cumberland Dr City	State Zip Code	Date of Receipt M					
	Rochester	IL 62563-9286						
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 150.00					
	Name of Employer	Occupation						
	Springfield Clinic	Orthopaedic Surgeon						
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00						
3.	Full Name (Last, First, Middle Initial) Ronald W B Wyatt MD Mailing Address 533 Carleton Way		Date of Receipt					
	- Colo		12 03 2014					
	City	State Zip Code CA 94507-2863	Transaction ID : 6643555					
	Alamo	CA 94507-2863	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	100.00					
	Name of Employer Self Employed	Occupation Orthopaedic Surgeon						
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00						
С .	Full Name (Last, First, Middle Initial) Dominic S Carreira MD		Date of Receipt					
	Mailing Address 2325 Barcelona Dr		12 02 2014 _					
	City	State Zip Code	Transaction ID: 6646293					
	Fort Lauderdale	FL 33301-1554	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	300.00					
	Name of Employer	Occupation						
	Broward Health	Orthopaedic Surgeon						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify) ▼	300.00						
s	UBTOTAL of Receipts This Page (optional)	>	550.00					
Т	OTAL This Period (last page this line number of	only)						

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

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle		American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) Brian R Hamlin MD		Date of Receipt
	Mailing Address 3169 Beechwood Drive		12 02 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City	State Zip Code	Transaction ID: 6646294
	Allison Park	PA 15101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer	Occupation	
	UPMC	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	2000.00	
3.	Full Name (Last, First, Middle Initial) Bryan T Edwards MD		Date of Receipt
	Mailing Address 17616 River Ford Drive		12 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 6646295
	Davidson	NC 28036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	Novant Health	Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) David J Mansfield MD		Date of Receipt
	Mailing Address 5550 Cory Dr		12 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City El Paso	State Zip Code TX 79932-3010	Transaction ID: 6648823 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	85.00
	Name of Employer	Occupation	
	El Paso Orthopaedic Surg Group	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1150.00	
s	UBTOTAL of Receipts This Page (optional)		1335.00
T	OTAL This Period (last page this line number of	nly)	

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

FOI	PAGE	1	2 OF	42				
(check only one)								
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Neal D Lintecum MD		Date of Receipt
Mailing Address 789 N 1500 Rd		12 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : 6648824
Lawrence	KS 66049-9194	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Ortho Kansas	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial) 3. Chad A Krueger MD	ı	Date of Receipt
Mailing Address 14827 Forward Pass		12 06 2014
City	State Zip Code	Transaction ID : 6655117
San Antonio	TX 78248-0974	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	-
U.S. Army	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) C. Patrick T McCulloch MD		Date of Receipt
Mailing Address 12 Caley Drive		12 06 2014
City	State Zip Code	Transaction ID : 6655118
Canonsburg	PA 15317-5990	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer	Occupation	-
Advanced Orthopaedics & Rehabilitation	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	586.00	
SUBTOTAL of Receipts This Page (optional)	214.00
TOTAL This Period (last page this line num	ber only)	

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

FOR LINE NUMBER:					PAGE		13	OF	42		
	(check only one)										
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01	Tor commercial purposes, other than doing the	maric and address of any political committee to	Solicit Contributions from Such Confinition.
$\overline{\ \ \ \ \ \ \ }$		e American Association of Orthopa	aedic SurgeonsPAC of AAOS
Α.	Full Name (Last, First, Middle Initial) Bruce J Sangeorzan MD Mailing Address Dept of Ortho 325 Ninth Ave Box 359798 City Seattle	State Zip Code WA 98104-2499	Date of Receipt 12 08 2014 Transaction ID: 6656838 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer University of Washington Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	500.00
В.	Full Name (Last, First, Middle Initial) Christopher S Raffo MD Mailing Address 9409 Crimson Leaf Terrace City Potomac FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MD 20854 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 08 2014 Transaction ID: 6656842 Amount of Each Receipt this Period 500.00
C.	Full Name (Last, First, Middle Initial) Kevin Joseph Sprague MD Mailing Address 4573 Chelsea Ln City Bloomfield Hills FEC ID number of contributing federal political committee. Name of Employer Henry Ford Wyandotte Hospital Receipt For: Primary General Other (specify)	State Zip Code MI 48301 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 12 10 2014 Transaction ID: 6662361 Amount of Each Receipt this Period 1000.00
S	UBTOTAL of Receipts This Page (optional)	>	2000.00
т	OTAL This Period (last page this line number of	only)	

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

					PAGE		14	OF	4	2
(check only one)										
×	11a		11b		11c		12			
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Todd A Schmidt MD Mailing Address 2865 Lake Park Drive City	State Zip Code	Date of Receipt 12 21 2014 Transaction ID: 6673780
Jonesboro FEC ID number of contributing federal political committee. Name of Employer Southern Orthopaedic Specialists Receipt For: Primary General Other (specify)	GA 30236-4133 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 840.00	Amount of Each Receipt this Period 84.00
Full Name (Last, First, Middle Initial) David R Chandler MD Mailing Address 165 Middle Plantation Ln City Gulf Breeze FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code FL 32561-4899 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 850.00	Date of Receipt 12 21 2014 Transaction ID: 6673781 Amount of Each Receipt this Period 85.00
Full Name (Last, First, Middle Initial) Jeffery P Beckenbaugh DO Mailing Address 1302 Lecy Lane NE City Stewartville FEC ID number of contributing federal political committee. Name of Employer Olmsted Medical Center Receipt For: Primary Other (specify)	State Zip Code MN 55976-2500 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 12 21 2014 Transaction ID: 6673782 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	269.00
TOTAL This Period (last page this line number	only)	

					PAGE	. 1	15	OF	42	
(che	ck only	or	ne)							
×	11a		11b		11c		12			
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Eric Louis Smith MD Mailing Address 1573 Beacon St		Date of Receipt
City Waban FEC ID number of contributing federal political committee. Name of Employer Tufts Medical Center Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MA 02468-1507 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 620.00	Transaction ID: 6673783 Amount of Each Receipt this Period 84.00
Full Name (Last, First, Middle Initial) Basil R Besh MD Mailing Address 6135 Clubhouse Dr City	State Zip Code	Date of Receipt 12 21 2014 Transaction ID: 6673784
Pleasanton FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: □ Primary □ General □ Other (specify) ▼	CA 94566-9864 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 425.00	Amount of Each Receipt this Period 85.00
Full Name (Last, First, Middle Initial) Paul Joseph Beauvais MD Mailing Address 86 Cedar Grove Rd City Southbury FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General	State Zip Code CT 06488-1930 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 12 21 2014 Transaction ID: 6673787 Amount of Each Receipt this Period 300.00
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	•	469.00

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or for commercial purposes, other than using	g the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	f the American Association of Orthop	
Full Name (Last, First, Middle Initial) 1. John R Tongue MD		Date of Receipt
Mailing Address 6485 SW Borland Rd Ste A		12 21 2014
City	State Zip Code	Transaction ID: 6673789
Tualatin	OR 97062-9762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Self Employed	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) 3. Frank P Giammattei MD		Date of Receipt
Mailing Address 30 Woodbrook Rd		12 22 2014
City	State Zip Code	Transaction ID : 6673792
Swarthmore	PA 19081-1234	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	1
Premier Orthopaedics	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.32	
Full Name (Last, First, Middle Initial) C. Daniel William Green MD	<u> </u>	Date of Receipt
Mailing Address 535 E 70th St		12 22 2014
City	State Zip Code	Transaction ID : 6673793
New York	NY 10021-4823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer	Occupation	
Hospital for Special Surgery	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	700.00	
SUBTOTAL of Receipts This Page (optional	1)	1258.33
TOTAL This Period (last page this line num	ber only)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle		e American Association of Orthopa	aedic SurgeonsPAC of AAOS
۵.	Full Name (Last, First, Middle Initial) Paul J Duwelius MD		Date of Receipt
	Mailing Address 16925 Scott Ct		12 09 2014 .
	City Lake Oswego	State Zip Code OR 97034	Transaction ID : 6675011 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Orthopedic & Fracture Specialists	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
В.	Full Name (Last, First, Middle Initial) Douglas P Tewes MD		Date of Receipt
	Mailing Address P.O. Box 6939		12 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Lincoln	State Zip Code NE 68506-0939	Transaction ID : 6675013 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Lincoln Orthopaedic Center	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) John Z Edwards MD		Date of Receipt
. •	Mailing Address 915 Dorchester Place Apt 204		12 09 2014
	City Charlottesville	State Zip Code VA 22911	Transaction ID : 6675015 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer	Occupation	
	Martha Jefferson Hospital Receipt For:	Orthopaedic Surgeon Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
s	SUBTOTAL of Receipts This Page (optional)		2500.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS
۹.	Full Name (Last, First, Middle Initial) John Charles Kofoed MD		Date of Receipt
	Mailing Address 2619 Seminole Ct		12 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Fairfield	State Zip Code CA 94534-7871	Transaction ID : 6675018 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	84.00
	Name of Employer	Occupation	
	Sutter Medical Group	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	916.00	
3.	Full Name (Last, First, Middle Initial) John O Cletcher Jr, MD		Date of Receipt
	Mailing Address Box 150		12 12 2014
	City	State Zip Code	Transaction ID: 6675019
	Hygiene	CO 80533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	50.00
	Name of Employer	Occupation	
	Retired	Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
С.	Full Name (Last, First, Middle Initial) Norman B Livermore III, MD		Date of Receipt
	Mailing Address 120 La Casa Via Ste 206		12 12 2014
	City	State Zip Code	Transaction ID: 6675020
	Walnut Creek	CA 94598-3007	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	150.00
	Name of Employer	Occupation	
	Self Employed	Orthopaedic Surgeon	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	700.00	
s	UBTOTAL of Receipts This Page (optional)		284.00
T	OTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of t	he American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) David S Girdany MD Mailing Address 609 Clover Hill Rd		Date of Receipt
City Somerset FEC ID number of contributing	State Zip Code PA 15501	Transaction ID : 6675021 Amount of Each Receipt this Period 100.00
Federal political committee. Name of Employer Somerset Hospital Receipt For:	Occupation Orthopaedic Surgeon	100.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. J Wendell Duncan MD Mailing Address 5321 Columbia Rd	Date of Receipt 12 12 2014	
City Grovetown	State Zip Code GA 30813	Transaction ID : 6675022 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	250.00
Augusta Ortho & Sports Med Specialists Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Simon Mears MD		Date of Receipt
Mailing Address 3825 Mapleshade Lane, #7 City Plano	102 State Zip Code TX 75075	12 12 2014 Transaction ID : 6675025 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Health Texas Receipt For: Primary General Other (specify) ▼	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	450.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	he American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Kayvon S Riggi MD		Date of Receipt
Mailing Address 14536 Rocksborough Rd		12 12 2014
City	State Zip Code	Transaction ID : 6675027
Minnetonka	MN 55345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Twin Cities Orthopedics	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Victor Goldberg MD		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	12 12 2014 Transaction ID: 6675028 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Case Western Reserve University	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Roshan P. Shah MD, JD		Date of Receipt
Mailing Address 1 Morningside Drive Apt 515		12 24 2014
City	State Zip Code	Transaction ID: 6676612
New York	NY 10025-2426	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer	Occupation	
UPenn	Resident	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	284.00	
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	585.00
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Political Action Committee of the Full Name (Last, First, Middle Initial)	e American Association of Orthop	aedic SurgeonsPAC of AAO
George V Russell Jr, MD		Date of Receipt
Mailing Address 102 Hawthorne Vale		12 18 2014
City	State Zip Code	Transaction ID: 6677573
Ridgeland	MS 39157	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer	Occupation	
UMMC	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	690.00	
Full Name (Last, First, Middle Initial) Andrew Philip Manista MD		Date of Receipt
Mailing Address 1909 Golden Maple Ct NW		M = M / D = D / Y = Y = Y = Y = Y = 12
City	State Zip Code	12 18 2014 Transaction ID : 6677575
Olympia	WA 98502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	542.00
Name of Employer	Occupation	
Olympia Orthopaedic Associates	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	542.00	
Full Name (Last, First, Middle Initial)		
William Andrew Lighthart MD		Date of Receipt
Mailing Address 448 Curtis Brook Rd City	State Zip Code	12 18 2014
Rutland	VT 05701	Transaction ID : 6677576 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Rutland Regional Medical Center	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Other (specify)	200.00	

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\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS				
Δ.	Full Name (Last, First, Middle Initial) David F Apple Jr, MD Mailing Address 660 Collier Commons Circle City	State Zip Code	Date of Receipt 12 18 2014 Transaction ID: 6677577				
	Atlanta FEC ID number of contributing federal political committee. Name of Employer Shepherd Center Receipt For: Primary General Other (specify)	GA 30318 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 100.00				
3.	Full Name (Last, First, Middle Initial) Michael F Sacco MD Mailing Address 120 Norlyn Dr City Walnut Creek FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code CA 94596-4258 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 18 2014 Transaction ID: 6677579 Amount of Each Receipt this Period 500.00				
С.	Full Name (Last, First, Middle Initial) Anthony Scillia MD Mailing Address 110 Clark Road City Bernardsville FEC ID number of contributing federal political committee. Name of Employer New Jersey Orthopaedic Institute Receipt For: Primary General Other (specify)	State Zip Code NJ 07924 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Date of Receipt 12 18 2014 Transaction ID: 6677580 Amount of Each Receipt this Period 250.00				
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	850.00				
Т	OTAL This Period (last page this line number of	only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Sidney Premer Migliori MD Mailing Address 40 Chief Botelho Ct.		Date of Receipt
City	State Zip Code	12 18 2014
East Greenwich	RI 02818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Orthopaedic Associates	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) 3. Kevin W Lanighan MD		Date of Receipt
Mailing Address 5527 Pine Loch Ln		M M / D D / Y Y Y Y Y
City Williamsville	State Zip Code NY 14221	12 26 2014 Transaction ID : 6677584 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Northtowns Orthopaedics	Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) C. Mark W Zawadsky MD		Date of Receipt
Mailing Address 3460 Ordway Street NW		12 26 2014
City Washington	State Zip Code DC 20016	Transaction ID : 6677585 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
MedStar	Orthopaedic Surgeon	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.					
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	aedic SurgeonsPAC of AAOS					
Α.	Full Name (Last, First, Middle Initial) Charles Cannon Edwards II, MD		Date of Receipt					
	Mailing Address 308 N Wind Rd		12 26 2014					
	City	State Zip Code	Transaction ID: 6677586					
	Towson	MD 21204	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С	250.00					
	Name of Employer	Occupation						
	The Maryland Spine Center	Orthopaedic Surgeon						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify) ▼	500.00						
— В.	Full Name (Last, First, Middle Initial) David F Apple Jr, MD		Date of Receipt					
	Mailing Address 660 Collier Commons Circle		M = M / D = D / Y = Y = Y					
			12 26 2014					
	City	State Zip Code GA 30318	Transaction ID : 6677588					
	Atlanta	GA 30318	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	100.00					
	Name of Employer	Occupation						
	Shepherd Center	Orthopaedic Surgeon						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General	400.00						
	Other (specify) ▼	400.00						
C.	Full Name (Last, First, Middle Initial) Peter G Noordsij MD		Date of Receipt					
	Mailing Address Concord Orthopaedics PA 264 Pleasant St		12 26 2014					
	City	State Zip Code	Transaction ID: 6677589					
	Concord	NH 03301	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С	300.00					
	Name of Employer	Occupation						
	Concord Orthopaedics	Orthopaedic Surgeon						
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify) ▼	300.00						
	Other (specify)	333.00						
s	UBTOTAL of Receipts This Page (optional)	•	650.00					
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UI	tor commercial purposes, other than using the	name and address of any political committee to	Solicit Communions from Such Committee.
\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS
Δ.	Full Name (Last, First, Middle Initial) Michael A Rauh MD Mailing Address 46 Middlebury Rd City	State Zip Code	Date of Receipt 12 28 2014 Transaction ID: 6678897
	Orchard Park FEC ID number of contributing federal political committee. Name of Employer University Orthopedic Specialists	NY 14127-3962 C Occupation Orthopaedic Surgeon	Amount of Each Receipt this Period 50.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
В.	Full Name (Last, First, Middle Initial) Jeffery D Angel MD Mailing Address 501 Virginia Dr Ste C		Date of Receipt 12 28 2014
	City Batesville	State Zip Code AR 72501-7331	Transaction ID : 6678898 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	84.00
	Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 754.00	
С.	Full Name (Last, First, Middle Initial) Nicky L Leung MD		Date of Receipt
	Mailing Address 88 Cedar St		12 29 2014
	City Wellesley	State Zip Code MA 02481	Transaction ID : 6680873 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer	Occupation	
	Newton Wellesley Orthopaedics	Orthopaedic Surgeon	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
S	UBTOTAL of Receipts This Page (optional)	>	384.00
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Terry Younger MD Mailing Address 5145 N. California Ave.		Date of Receipt
City Chicago FEC ID number of contributing federal political committee. Name of Employer Barrington Ortho Specialists Receipt For: Primary General Other (specify)	State Zip Code IL 60625-3661 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Transaction ID: 6680880 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) John Charles Kofoed MD Mailing Address 2619 Seminole Ct City	State Zip Code	Date of Receipt 12 31 2014 Transaction ID: 6681620
Fairfield FEC ID number of contributing federal political committee. Name of Employer Sutter Medical Group Receipt For:	CA 94534-7871 C Occupation Orthopaedic Surgeon	Amount of Each Receipt this Period 84.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) David Arthur Detrisac MD Mailing Address 3609 E Arbutus City	State Zip Code	Date of Receipt 12 31 2014 Transaction ID : 6681621
Okemos FEC ID number of contributing federal political committee. Name of Employer East Lansing Orthopaedic Assoc Receipt For: Primary General Other (specify)	MI 48864 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	1584.00
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
/	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Norman B Livermore III, MD Mailing Address 120 La Casa Via Ste 206		Date of Receipt
City Walnut Creek	State Zip Code CA 94598-3007	12 31 2014 Transaction ID : 6681623 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Self Employed	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 850.00	
Full Name (Last, First, Middle Initial) B. Craig A Hogan MD Mailing Address 18023 East Peakview Place	e	Date of Receipt
City Aurora	State Zip Code CO 80016	12 31 2014 Transaction ID : 6681624 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer University of Colorado	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. Nicky L Leung MD		Date of Receipt
Mailing Address 88 Cedar St		12 31 2014
City Wellesley	State Zip Code MA 02481	Transaction ID : 6681625 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newton Wellesley Orthopaedics	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
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or for commercial purposes, o	ther than using the name	e and address of any political committee	ee to solicit contributions from such committee.
/	mmittee of the An	merican Association of Orth	opaedic SurgeonsPAC of AAOS
Full Name (Last, First, Mide	dle Initial)		Date of Receipt
Mailing Address 7610 Caba	allero Dr		12 31 2014
City		State Zip Code	Transaction ID : 6681626
Sandy	U	UT 84093	Amount of Each Receipt this Period
FEC ID number of contribu federal political committee.	ting		200.00
Name of Employer	Occ	cupation	
Self Employed	Orth	hopaedic Surgeon	
Receipt For:		gregate Year-to-Date ▼	
Primary Ger Other (specify) ▼	neral	400.00	
Full Name (Last, First, Mide B. Rola H Rashid MD	dle Initial)		Date of Receipt
Mailing Address 42 Delance	ey Ct		12 31 2014
City		State Zip Code	Transaction ID: 6681627
Pittsford	N	NY 14534	Amount of Each Receipt this Period
FEC ID number of contribu federal political committee.	ting		200.00
Name of Employer	Occ	cupation	
Self Employed	Orth	hopaedic Surgeon	
Receipt For: Primary Ger Other (specify) ▼	Agg	gregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Mide C. Cary M Guse MD	dle Initial)		Date of Receipt
Mailing Address 6013 Turtl	e Bay Pkwy		12 31 2014
City		State Zip Code	Transaction ID: 6681629
Columbus		IN 47201	Amount of Each Receipt this Period
FEC ID number of contribu federal political committee.	ting		500.00
Name of Employer	Occ	cupation	
Southern Indiana Orthopedi	cs Orth	hopaedic Surgeon	
Receipt For:		gregate Year-to-Date ▼	
Primary Ger Other (specify) ▼	neral	500.00	
SUBTOTAL of Receipts This	Page (optional)		900.00
TOTAL This Period (last page	e this line number only)		·

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

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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.

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\rangle	NAME OF COMMITTEE (In Full) Political Action Committee of the	e American Association of Orthopa	nedic SurgeonsPAC of AAOS
١.	Full Name (Last, First, Middle Initial) Michael P Grant MD Mailing Address 75 Springdale Place City	State Zip Code	Date of Receipt 12 31 2014 Transaction ID : 6681630
	Longmont FEC ID number of contributing federal political committee. Name of Employer Estes Park Medical Center Receipt For: Primary General Other (specify) ▼	CO 80504 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00
3.	Full Name (Last, First, Middle Initial) Jefferson C Brand Jr, MD Mailing Address 111th Ave, Suite 101 City Alexandria FEC ID number of contributing federal political committee. Name of Employer Heartland Orthopedic Specialists Receipt For: Primary General Other (specify) Other	State Zip Code MN 56308 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2014 Transaction ID: 6681631 Amount of Each Receipt this Period 250.00
D.	Full Name (Last, First, Middle Initial) Mark S Topolski MD Mailing Address 837 Olympic Drive City Onalaska FEC ID number of contributing federal political committee. Name of Employer Gunderson Lutheran Receipt For: Primary General Other (specify)	State Zip Code WI 54650-8237 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 31 2014 Transaction ID: 6681632 Amount of Each Receipt this Period 250.00
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	750.00
Т	OTAL This Period (last page this line number of	only)	

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

FOR LINE NUMBER:						PAGE	3	30	OF	42
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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 Fall)		
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Kenneth P Pohl MD Mailing Address 5692 Far Hills Ave Ste 4 City Dayton	State Zip Code OH 45429-2202	Date of Receipt 12 31 2014 Transaction ID: 6681633 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	Occupation Orthopaedic Surgeon Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Humberto A Galleno MD Mailing Address Inter-Community Prof Plaza 315 N 3rd Ave Ste 302 City Covina FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify) Other (specify)	State Zip Code CA 91723-1916 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2014 Transaction ID: 6681634 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Frank J Eismont MD Mailing Address 4201 Palm Ln City Miami FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State Zip Code FL 33137 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 12 31 2014 Transaction ID: 6681635 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	r only)	1500.00

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Political Action Committee of the	ne American Association of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) Thomas J Errico MD Mailing Address 301 East 17th Street, Rm 40 City	State Zip Code	Date of Receipt 12 31 2014 Transaction ID: 6681636
New York FEC ID number of contributing federal political committee. Name of Employer NYU Medical Center Receipt For: Primary General Other (specify) ▼	NY 10003 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 1000.00	Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Pooya Javidan MD Mailing Address 8500 Highland Plaza Dr Apt 519 City Saint Louis FEC ID number of contributing federal political committee. Name of Employer University of St. Louis Receipt For: Primary General Other (specify)	State Zip Code MO 63110 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2014 Transaction ID: 6681637 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Chad Efird MD Mailing Address 147 Royal Dornoch Dr City Branson FEC ID number of contributing federal political committee. Name of Employer Cox Medical Center Branson Receipt For: Primary General Other (specify)	State Zip Code MO 65616-7414 C Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 31 2014 Transaction ID: 6681639 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	1350.00
TOTAL This Period (last page this line numbe	r only)	

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

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Political Action Committee of	the American Association of Orthop	paedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial) A. Hal S Crane MD Mailing Address 3511 Bonfield Rd		Date of Receipt
City	State Zip Code	12 31 2014 Transaction ID : 6681640
Pikesville	MD 21208-5633	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Baltimore Washington Medical Center	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) 3. Jeffrey J Lazarus MD	·	Date of Receipt
Mailing Address 31 S River Rd	12 31 2014	
City Stuart	State Zip Code FL 34996-6723	Transaction ID : 6681641 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Treasure Coast Ortho Assoc	Occupation Orthopaedic Surgeon	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. William H Seitz Jr, MD		Date of Receipt
Mailing Address 1730 W 25th St		12 312014
City Cleveland	State Zip Code OH 44113	Transaction ID : 6681692 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Cleveland Clinic Receipt For:	Orthopaedic Surgeon	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)	2500.00
	<u> </u>	
TOTAL This Period (last page this line num	ber only)	

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

FOR LINE NUMBER:					PAGE	3	33	OF	42
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or for comm	nercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.				
\	F COMMITTEE (In Full) cal Action Committee of the	American Association of Orthopa	aedic SurgeonsPAC of AAOS				
1. William	ne (Last, First, Middle Initial) n M Strassberg MD nddress 36 Sailors Bluff		Date of Receipt				
City Northpor	t	State Zip Code ME 04849	12 09 2014 Transaction ID : 6861819 Amount of Each Receipt this Period				
federal p	number of contributing olitical committee.	C	0.00				
	Employer esert Island Hospital For:	Occupation Orthopaedic Surgeon Aggregate Year-to-Date ▼	[MEMO ITEM]				
Pri	mary General ner (specify) ▼	750.00	Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$750.00				
Full Nam 3 Mailing A	e (Last, First, Middle Initial)		Date of Receipt				
City		State Zip Code	Amount of Each Receipt this Period				
	number of contributing olitical committee.	C					
Name of Receipt I	Employer For:	Occupation Aggregate Year-to-Date ▼					
	mary General ner (specify) ▼	Aggregate four to Bate V					
Full Nam	e (Last, First, Middle Initial)		Date of Receipt				
Mailing A	ddress		M = M / D = D / Y = Y = Y				
City		State Zip Code	Amount of Each Receipt this Period				
	number of contributing olitical committee.	C					
	Employer	Occupation					
	For: mary General ner (specify) ▼	Aggregate Year-to-Date ▼					
SUBTOTAL	L of Receipts This Page (optional)	<u> </u>	0.00				
TOTAL Thi	is Period (last page this line number o	only)	26027.33				

mage# 13330001101			
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 OF 42 (check only one) 11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Political Action Committee of the such as the such	e name and a	ddress of any political committed	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) American Association of Orthopaedic Mailing Address 6300 N River Road City Rosemont FEC ID number of contributing federal political committee.	State IL	Zip Code 60018	Date of Receipt 12 17 2014 Transaction ID: 6672108 Amount of Each Receipt this Period 562.29
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼ 19204.50	Refund of bank fees from affiliated organization
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee.	State	Zip Code	Date of Receipt Amount of Each Receipt this Period
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼]
Full Name (Last, First, Middle Initial) Mailing Address City	State	Zip Code	Date of Receipt M = M / D = D / Y = Y = Y = Y Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation		Amount of Lacif necespt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	1

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

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

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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 35 OF 42
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	_	
			Summary Page	X 21b	22	23 24 25 26
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	ny information copied from such Reports and Statem for commercial purposes, other than using the name					
\setminus	NAME OF COMMITTEE (In Full)					
$ \rangle$	Political Action Committee of the A	merican	Association	n of Orthop	aedic Sı	urgeonsPAC of AAOS
_	Full Name (Last, First, Middle Initial)					
Α.	Northern Trust Company				Date of	Disbursement
	Mailing Address 50 S La Salle St				11	26 2014
	,	State	Zip Code		Tranca	ction ID : 6626666
	Chicago	IL	60603		ITAIISA	Ction ib . 0020000
	Purpose of Disbursement Bank fees deducted from account			001	Amount	of Each Disbursement this Period
	Candidate Name			Category/ Type		81.49
	Office Sought: House Disbursen	nent For:		71		,
		Primary Other (spec	General General		Bank fees	s deducted from account
	State: District:	` '	, · ·			
	Full Name (Last, First, Middle Initial)					
В.	Northern Trust Company				Date of	Disbursement
	Mailing Address 50 S La Salle St				12	05 2014
	City S Chicago	State IL	Zip Code 60603		Transa	action ID : 6667680
	Purpose of Disbursement Bank fees deducted from account			001	Amount	of Each Disbursement this Period
	Candidate Name			Category/	ļ	211.70
	Office Sought: House Disbursen	nent For:		Туре		7
	Senate	Primary Other (spec	General cify) ▼		Bank fee	s deducted from account
	State: District:					
<u>с.</u>	Full Name (Last, First, Middle Initial) Northern Trust Company				Date of	Disbursement
					M M	/ D D / Y Y Y Y
	Mailing Address 50 S La Salle St				12	05 2014
	•	State	Zip Code		Transa	action ID : 6667681
	Chicago Purpose of Disbursement	IL	60603			
	Bank fees deducted from account			001	Amount	of Each Disbursement this Period
	Candidate Name			Category/ Type	Amount	153.47
	Office Sought: House Disbursen	nent For:		- , , , ,		
		Primary	General		Bank fees	s deducted from account
	President	Other (spe	cify) 🔻			
	State: District:					
s	SUBTOTAL of Disbursements This Page (optional)			·····		446.66
Т	OTAL This Period (last page this line number only)			·····		7

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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 36 OF 42
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	_	
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	ly information copied from such Reports and Statem for commercial purposes, other than using the name					
\setminus	NAME OF COMMITTEE (In Full)					
$ \rangle$	Political Action Committee of the A	merican	Association	of Orthop	aedic Sı	urgeonsPAC of AAOS
_	Full Name (Last, First, Middle Initial)					
Α.	Northern Trust Company				Date of	Disbursement
	Mailing Address 50 S La Salle St				12	09 2014
	,	State	Zip Code		Tranca	action ID : 6667682
	Chicago	IL	60603		ITAIISA	1011 ID : 0007082
	Purpose of Disbursement Bank fees deducted from account			001	Amount	of Each Disbursement this Period
	Candidate Name			Category/ Type		41.25
	Office Sought: House Disbursen	nent For:		. 7 2		,
		Primary Other (spec	General cify) ▼		Bank fee	s deducted from account
	State: District:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	37 V			
	Full Name (Last, First, Middle Initial)					
В.	Northern Trust Company				Date of	Disbursement
	Mailing Address 50 S La Salle St				12	16 2014
	City S Chicago	State IL	Zip Code 60603		Transa	action ID : 6667748
	Purpose of Disbursement Bank fees deducted from account			001	Amount	of Each Disbursement this Period
	Candidate Name			Category/ Type		74.38
	Office Sought: House Disbursen	nent For:		Турс		, , , , , , , , , , , , , , , , , , , ,
		Primary	General		Bank fee	es deducted from account
	President State: District:	Other (spec	cify) 🔻			
_	Full Name (Last, First, Middle Initial)					
C.	Northern Trust Company				Date of	Disbursement
	Mailing Address 50 S La Salle St				12	23 2014
	,	State	Zip Code		Transa	action ID : 6687392
	Chicago Purpose of Disbursement	IL	60603			
	Bank fees deducted from account			001	Amount	of Each Disbursement this Period
	Candidate Name			Category/ Type		64.88
	Office Sought: House Disbursen	nent For:				7
	Senate	Primary	General		Bank fee	s deducted from account
		Other (spe	cify) 🔻			
	State: District:					
s	UBTOTAL of Disbursements This Page (optional)			·····•		180.51
Т	OTAL This Period (last page this line number only)					7 1 7 1 7

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SCH	EDULE B (FEC Form 3X)			NUMBER: PAGE 37 OF 42	
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II⊨M	IZED DISBURSEMENTS	for each category of the	(check only	one) 22 23 24 25 26	
		Detailed Summary Page			
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	formation copied from such Reports and Staten commercial purposes, other than using the nam				
		le and address of any point	cai committee to	Solicit contributions from such committee.	
l \	ME OF COMMITTEE (In Full)		af Oth a	andia Commana DAC of AACC	
/ PC	olitical Action Committee of the A	merican Associatio	n of Orthop	aedic SurgeonsPAC of AAOS	
_	Name (Last, First, Middle Initial)				
A. No	orthern Trust Company	Date of Disbursement			
	ling Address 50 S La Salle St	12 31 2014			
man	mig ytaarees 30 o La Gaille Ot	12 01 2014			
City			Transaction ID : 6687393		
	cago	IL 60603		Transaction ID . 0007393	
	pose of Disbursement nk fees deducted from account		001	Amount of Each Disbursement this Period	
	ididate Name			Amount of Each dispulsement this Penou	
Juli			Category/ Type	64.88	
Offic	ce Sought: House Disbursen	nent For:	. 71	,	
	Senate	Primary General		Bank fees deducted from account	
_	President	Other (specify) ▼			
Stat					
Full B.	Name (Last, First, Middle Initial)			Date of Disbursement	
В.					
— Mai	ling Address		M M / D D / Y Y Y Y		
City		State Zip Code			
Dur	pose of Disbursement				
Fui	pose of Dispulsement			Amount of Each Disbursement this Period	
Can	ididate Name		Catananii		
			Category/ Type		
Offic	ce Sought: House Disbursen	nent For:	, , , , , , , , , , , , , , , , , , ,		
	Senate	Primary General			
		Other (specify) ▼			
Stat					
Full C.	Name (Last, First, Middle Initial)			Data of Diaburament	
C.		Date of Disbursement			
 Mai	ling Address	M M / D D / Y Y Y Y			
man	mig /tddi-occ				
City					
Puri	pose of Disbursement				
				Amount of Each Disbursement this Period	
Can	didate Name	Category/	The second secon		
_		Type			
Offic	ce Sought: House Disbursen				
	Senate	Primary General			
Stat	President	Other (specify) ▼			
ા ઢા	e: District:				
CHET	**OTAL of Disbursements This Page (optional)			64.88	
JUBI	OTAL OF DISDUISEMENTS THIS Page (Optional)		<u> </u>		
TOTA	I This Period (last page this line number only)			692.05	

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	HEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	•
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	v information copied from such Reports and Statem for commercial purposes, other than using the name			
I \	NAME OF COMMITTEE (In Full) Political Action Committee of the A	merican Associatior	of Orthopa	aedic SurgeonsPAC of AAOS
	Full Name (Last, First, Middle Initial)			Data of Dialousanant
	Ralph Abraham for Congress Mailing Address P.O. Box 270			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S	State Zip Code		
	Archibald	LA 71218		Transaction ID: 6607261
	Purpose of Disbursement Void - Ralph Abraham for Congress		011	Amount of Each Disbursement this Period
	Candidate Name Ralph Abraham		Category/ Type	-5000.00
	Office Sought: House Disbursen Senate President	nent For: 2014 Primary General Other (specify)	1,700	Void - Ralph Abraham for Congress
_	State: LA District: 05 Full Name (Last, First, Middle Initial)	Runoff2014		
	Ralph Abraham for Congress			Date of Disbursement
	Mailing Address P.O. Box 270			11 25 2014
	Archibald	State Zip Code LA 71218		Transaction ID : 6607262
	Purpose of Disbursement		011	Amount of Each Disbursement this Period
	Candidate Name Ralph Abraham		Category/ Type	5000.00
	Office Sought: House Disbursen	Primary General Other (specify) Runoff2014	,,	
	Full Name (Last, First, Middle Initial) Ted Lieu for Congress			Date of Disbursement
	Mailing Address 6380 Wilshire Blvd #1612			11 26 2014
	Los Angeles	State Zip Code CA 90048		Transaction ID : 6609050
	Purpose of Disbursement 2014 Primary Debt Retirement		011	Amount of Each Disbursement this Period
	Candidate Name Ted Lieu		Category/ Type	1000.00
	Senate	nent For: 2014 Primary General Other (specify) 2014 Primary Deb	ot Re	2014 Primary Debt Retirement
SI	JBTOTAL of Disbursements This Page (optional)	•		1000.00
\vdash	OTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 39 OF 42
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	IVOIVIBEIT:
	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26
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or for commercial purposes, other than using the nar	ne and address of any politic	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
$ \; angle$ Political Action Committee of the A	merican Association	n of Orthop	aedic SurgeonsPAC of AAOS
Full Name (Last, First, Middle Initial)			
A. BRETTPAC			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address 608 Montgomery Ave			11 26 2014
City	State Zip Code		
Elizabethtown	State Zip Code KY 42701		Transaction ID: 6609066
Purpose of Disbursement	12701		
Guthrie's LPAC		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
BRETTPAC		Type	5000.00
	ment For:		
Senate President	Other (specify) General		Guthrie's LPAC
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. Ann Wagner for Congress			Date of Disbursement
- Time voughor for congress			M M / D D / Y Y Y
Mailing Address P.O. Box 50			11 26 2014
-			
City Ballwin	State Zip Code MO 63022		Transaction ID: 6609068
Purpose of Disbursement	03022		
·		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4500.00
Rep. Ann Wagner		Type	1500.00
	ment For: 2016		
Senate President	Primary General		
State: MO District: 02	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Who Dat PAC			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 499 S. Capitol St. SW			11 26 2014
Suite 422	O		
City Washington	State Zip Code DC 20003		Transaction ID: 6609080
Purpose of Disbursement	20003		
Richmond's LPAC		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Who Dat PAC		Type	2500.00
	ment For:		
Senate President	Primary General		Richmond's LPAC
State: District:	Other (specify) ▼		
State. Biotilot.			
SUBTOTAL of Disbursements This Page (optional)			9000.00
CODITION DISSURGEMENTS THIS Tage (optional)			
TOTAL This Period (last page this line number only)		1

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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 40 OF 42
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	one)	
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam					
	NAME OF COMMITTEE (In Full)					
	Political Action Committee of the A	merican	Association	n of Orthopa	aedic Surgeoi	nsPAC of AAOS
	Full Name (Last, First, Middle Initial)				D . (D:)	
Α.	Peace Through Strength PAC				Date of Disburse	
	Mailing Address 499 S. Capitol St. SW Suite 420				12 1	2 2014
		State	Zip Code			
	Washington	DC	20003		Transaction ID	: 6663637
	Purpose of Disbursement Hunter's LPAC			011	Amount of Each	Disbursement this Period
	Candidate Name			Category/		0500.00
	Peace Through Strength PAC			Type		2500.00
	Office Sought: House Disbursen					
	Senate President	Primary Other (spe	General		Hunter's LPAC	
	State: District:	Other (spe	City) \blacktriangledown			
_	Full Name (Last, First, Middle Initial)					
В.	BRETTPAC				Date of Disburse	ement
					M = M / D =	D / Y Y Y Y Y
	Mailing Address 504 DEREK AVENUE				12 1	2 2014
		State	Zip Code		Transaction ID	: 6663647
	Elizabethtown Purpose of Disbursement	KY	42701			
	Guthrie's LPAC			011	Amount of Each	Disbursement this Period
	Candidate Name			Category/		
	BRETTPAC			Type		5000.00
	Office Sought: House Disbursen	nent For:				
		Primary	General		Guthrie's LPAC	
	President State: District:	Other (spe	city) 🔻			
_	Full Name (Last, First, Middle Initial)					
C.	Luke Messer for Congress				Date of Disburse	ement
-	Lake Messer for Congress				M M / D	D / Y Y Y Y
	Mailing Address P.O. Box 917				12 1	
	City	State	Zip Code		Transaction ID	. 6663640
	Shelbyville	IN	46176		Transaction ID	: 0003049
	Purpose of Disbursement			044		
	Candidate Name			011	Amount of Each	Disbursement this Period
	Rep. Luke Messer			Category/ Type		1000.00
		nent For: 2		Турс		
	Senate	Primary	General			
	President	Other (spe	cify) 🔻			
	State: IN District: 06					
						2522.22
S	UBTOTAL of Disbursements This Page (optional)			·····•		8500.00
	OTAL This Built difference of the Property of					
ΙŢ	OTAL This Period (last page this line number only)					

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 41 OF	42
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the) (check only	v one)	
	Detailed Summary Page	21b	22 X 23 24 25	26
[27	28a 28b 28c 29	30b
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NAME OF COMMITTEE (In Full)	ne and address of any point	iodi committee te	Solicit Contributions from Such Confinition.	
Political Action Committee of the A	merican Associatio	n of Orthop	aedic SurgeonsPAC of AAO	S
Full Name (Last, First, Middle Initial)				
A. GOP Generation Y Fund			Date of Disbursement	1
Mailing Address P.O. Box 9055			12 12 2014	
City	State Zip Code		Transaction ID : 6663655	
Peoria Purpose of Disbursement	IL 61612			
Schock's LPAC		011	Amount of Each Disbursement this Perio	iod
COD Concretion V Fund		Category/	2500.00)
GOP Generation Y Fund Office Sought: House Disburse	ment For:	Туре		_
Senate President State: District:	Primary General Other (specify) ▼		Schock's LPAC	
Full Name (Last, First, Middle Initial) B. Capito for West Virginia			Date of Disbursement	
Mailing Address P.O. Box 11519			12 15 2014	
011				
City Charleston	State Zip Code WV 25339		Transaction ID: 6667799	
Purpose of Disbursement	20009			
Void - Capito For West Virginia		011	Amount of Each Disbursement this Period	iod
Candidate Name		Category/	-5000.00)
Shelley Capito Office Sought: House Disburse	ment Ferri 2011	Туре	, , , , ,	_
Office Sought: House Senate President State: WV District:	ment For: 2014 Primary		Void - Capito For West Virginia	
Full Name (Last, First, Middle Initial)				
C. Brad Ashford for Congress			Date of Disbursement	
Mailing Address P.O. Box 24023			12 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
C:4	State Zip Code			
City Omaha	State Zip Code NE 68124		Transaction ID: 6675735	
Purpose of Disbursement				
		011	Amount of Each Disbursement this Perio	iod
Candidate Name		Category/	2500.00	
Brad Ashford		Type	2500.00	
Senate President	ment For: 2016 Primary General Other (specify)			
State: NE District: 02				
SUBTOTAL of Disbursements This Page (optional).			0.00	

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 42 OF 42	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b	TOWNELL	
Any information copied from such Reports and Statem	l nents may not be sold or use		<u> </u>	
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
Political Action Committee of the Ar	merican Association	of Orthopa	aedic SurgeonsPAC of AAOS	
Full Name (Last, First, Middle Initial)			Data of Dishuranana	
A. William M Strassberg MD			Date of Disbursement	
Mailing Address 36 Sailors Bluff			12 09 2014	
	State Zip Code		Transaction ID : 6657760	
Northport Purpose of Disbursement	ME 04849			
Refund contribution		010	Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	250.00	
	Primary General	.,,,,	Refund contribution	
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
В.			Date of Disbursement	
Mailing Address			M M / D D / Y Y Y Y Y	
City	State Zip Code			
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type		
President	nent For: Primary General Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
Mailing Address	Mailing Address			
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
President	nent For: Primary General Other (specify)	Jps		
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SUBTOTAL of Disbursements This Page (optional)		·····•	250.00	
TOTAL This Period (last page this line number only).		>	250.00	