Image# 14960512086 PAGE 1 / 54

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOTAL OX	or Other Than An Al	ithorized Committe	e		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	g, type	12FE4M5	
American Society of Ar	nesthesiologists Pol	litical Action Com	mittee		
ADDRESS (number and street)	520 N. Northwest Highway	y			
Check if different					
than previously reported. (ACC)	Park Ridge			LL L	60068
2. FEC IDENTIFICATION NU	MBER ▼C	CITY 🛦	:	STATE A	ZIP CODE ▲
C C00255752	3.	IS THIS REPORT X (N	EW N) OR	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:		May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:	Ar	or 20 (M4) J	ul 20 (M7)	Oct 2	Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q	1)			Canaval (100)
July 15 Quarterly Report (Q	PRF-Election	Primary (12P) Convention (1		General (Special (1	
October 15 Quarterly Report (Q:	·		,	(-/
January 31 Year-End Report (Yi	≣)Elec	tion on	D D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (3	DR) Special (30S)
Termination Report (TER)	Elec	tion on	D = D /	Y W Y W Y	in the State of
5. Covering Period 02	01 2014		M M 02	28	2014
I certify that I have examined this	s Report and to the best	of my knowledge and b	elief it is tru	ie, correct and	complete.
Type or Print Name of Treasurer	Mr. Thomas Conway				
Signature of Treasurer Mr. The	homas Conway	[Electronically	Filed]	Pate 03	/ 19 / Y Y Y Y Y Y 2014
NOTE: Submission of false, errone	ous, or incomplete informat	ion may subject the pers	on signing th	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

Г	OF FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
V	Vrite or Type Committee Name		
A	American Society of Anesthesiologis	ts Political Action Committee	
R	Report Covering the Period: From: 02	/ 01 / 2014 To	28 2014
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		2060382.15
	(b) Cash on Hand at Beginning of Reporting Period	2108263.01	
	(c) Total Receipts (from Line 19)	76143.03	174875.61
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2184406.04	2235257.76
7.	Total Disbursements (from Line 31)	67239.57	118091.29
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2117166.47	2117166.47
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	This committee has qualified as a multicand	lidate committee. (see FEC FORM 1M)	
	Fo	or further information contact:	
		Federal Election Commission 999 E Street, NW	

Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Society of Anesthesiologists Political Action Committee

ns (other than loans) From: uals/Persons Other Political Committees mized (use Schedule A) itemized itemized	42471.57 33671.46 76143.03 0.00 0.00	99281.55 75594.06 174875.61 0.00
uals/Persons Other Political Committees mized (use Schedule A) itemized	, 33671.46 76143.03 0.00 0.00	75594.06 174875.61 0.00
itemized	, 33671.46 76143.03 0.00 0.00	75594.06 174875.61 0.00
itemized DTAL (add les 11(a)(i) and (ii)	, 33671.46 76143.03 0.00 0.00	75594.06 174875.61 0.00
PTAL (add les 11(a)(i) and (ii)	76143.03 0.00 0.00	174875.61
PTAL (add les 11(a)(i) and (ii)	76143.03 0.00 0.00	174875.61
al Party Committees	0.00	0.00
Political Committees as PACs) Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)	0.00	
Political Committees as PACs) Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)	0.00	
as PACs) Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)		0.00
Contributions (add Lines ii), (b), and (c)) (Carry to Line 33, page 5)	76143.03	
ii), (b), and (c)) (Carry to Line 33, page 5)	76143 03	
	76143 03	
rom Affiliated/Other	7 01 10.00	174875.61
Totti Attiliated/Other		
mittees	0.00	0.00
Received	0.00	0.00
yments Received	0.00	0.00
· ·	0.00	0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
·	0.00	0.00
' '	7	7 7 7
Schedule H3)	0.00	0.00
=		
unds (from Schedule H5)	0.00	0.00
ansfers (add 18(a) and 18(b))	0.00	0.00
	yments Received	yments Received

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period					
. Operating Expenditures: (a) Allocated Federal/Non-Federal		Calendar Year-to-Date				
Activity (from Schedule H4)	0.00	0.00				
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating						
Expenditures	2739.57	4791.29				
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	2739.57	4791.29				
Transfers to Affiliated/Other Party						
CommitteesContributions to	0.00	0.00				
Federal Candidates/Committees and Other Political Committees	64500.00	111500.00				
Independent Expenditures	0.00	0.00				
(use Schedule E)	3.00					
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans MadeRefunds of Contributions To:	0.00	0.00				
(a) Individuals/Persons Other Than Political Committees	0.00	1800.00				
(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	1800.00				
Other Disbursements	0.00	0.00				
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
(from Schedule H6)						
(i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely	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 Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	67239.57	118091.29				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	67239.57	118091.29				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2003)	r age 3		
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)	76143.03	174875.61	
4. Total Contribution Refunds (from Line 28(d))	0.00	1800.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	76143.03	173075.61	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2739.57	4791.29	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2739.57	4791.29	

Use separate schedule(s) for each category of the

FOR I	LINE NU	IMBER	:	PAGE	6	OF	54
(check	only or	ne)					
X 1	1a	11b		11c	12		
1	3	14		15	16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Peter W. Allen Jr., M.D. Date of Receipt Mailing Address PO Box 496 24 2014 City Zip Code State Transaction ID: C2649939 CA Ross 94957-0496 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation ACM Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Bryan S. Apple M.D. Date of Receipt Mailing Address 449 Barnstaple Dr 02 12 2014 City State Zip Code Transaction ID: C2646186 WV **Daniels** 25832-9298 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Sheridan Healthcare Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Manoj A. Bhatt M.D. Date of Receipt Mailing Address 1034 Woodburn Rd 2014 02 14 City Zip Code State Transaction ID: C2649832 SC Spartanburg 29302-2863 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Crescent Anesthesia Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

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

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

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	I Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) Brian W. Birmingham M.D.		Date of Receipt
Mailing Address 614 Willow Rd.		02 10 2014
City Winnetka	State Zip Code IL 60093-4136	Transaction ID : C2645680 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer University Anesthesiologists Receipt For: □ Primary □ General Other (specify) ▼	Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. David E. Bryant M.D. Mailing Address 13737 Noel Rd		Date of Receipt
Suite 1400 City	State Zip Code	02 23 2014 Transaction ID : C2649881
Dallas FEC ID number of contributing federal political committee.	TX 75240-4908	Amount of Each Receipt this Period
Name of Employer Pinnacle Anes. Consultants	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Cameron E. Burrup M.D.		Date of Receipt
Mailing Address 5135 Pebble Road NW		02 22 2014
City Albuquerque	State Zip Code NM 87114	Transaction ID : C2649868 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	-
Anesthesia Associates of New Mexico Receipt For: Primary General Other (specify)	Anesthesiologist Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional).	>	1750.00
TOTAL This Period (last page this line number	` _	
IVIAL THIS I CHOU HASE PAYE THIS HITE HUTTING	or orny,	

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.

NAME OF COMMITTEE (In Full)

American Society of Anesthesiologists Political Action Committee

/ Amendan cociety of Amesti	esiologists i ontical Action Committee	
Full Name (Last, First, Middle Initial) A. Chris Cardone M.D.		Date of Receipt
Mailing Address 3789 Country Club Place		02
City	State Zip Code OH 45208	Transaction ID : C2642161
Cincinnati	On 45206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	_
ASN, Inc.	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Joshua C. Chance M.D.	'	Date of Receipt
Mailing Address 9 Ecurie Ct		02 04 2014
City	State Zip Code	Transaction ID : C2639883
Little Rock	AR 72223-8917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer	Occupation	-
UAMS Dept of Anesthesiology	Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 249.88	
Full Name (Last, First, Middle Initial) C. Joshua C. Chance M.D.	'	Date of Receipt
Mailing Address 9 Ecurie Ct		02 12 2014
City	State Zip Code	Transaction ID : C2646105
Little Rock	AR 72223-8917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
UAMS Dept of Anesthesiology	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	249.88	
SUBTOTAL of Receipts This Page (option	al)	624.94
TOTAL This Period (last page this line nur	mber only)	

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FOR	LINE	NU	MBER	:	PAGE	9	OF	54
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NAME OF COMMITTEE (In Full)

American Society of Anesthesiologists Political Action Committee

/	siologists Political Action Committee	-
Full Name (Last, First, Middle Initial) A. Dean Chassay M.D.		Date of Receipt
Mailing Address 571 Larue Cir		02 28 2014
City	State Zip Code	Transaction ID : C2651631
Guntersville	AL 35976	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Marshall County Anesthesiology and Pai	anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) B. Douglas E. Cleveland M.D.		Date of Receipt
Mailing Address 360 W Illinois St Apt 213		02 17 2014
City	State Zip Code	Transaction ID : C2647388
Chicago	IL 60654-5239	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Midwest Anesthesia Partners	Occupation Attending Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Gary L. Cutter M.D.		Date of Receipt
Mailing Address 1100 Marshall Way Marshall Way, Anes.Dept.		02 06 2014
City	State Zip Code	Transaction ID : C2641891
Placerville	CA 95667-6533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
El Dorado Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number)	>	1750.00

SCHEDULE A (FEC Form 3X) ITEMI

FOR LINE NUMBER: PAGE 10 OF

ZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page		he X	ck only 11a	or	ne) 11b		11c		12		
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ormation copied from such Reports and Statements ma	ay not be sold or used by any pe	rsoı	n fo	or the p	our	ose o	fsc	oliciting	cor	ntributio	ns	

Any info or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Judson P. Cuttino M.D. Date of Receipt Mailing Address 3 Hawkins Ln 2014 City Zip Code State Transaction ID: C2646671 GΑ Savannah 31411-1407 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Savannah, P.C Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Judson P. Cuttino M.D. Date of Receipt Mailing Address 3 Hawkins Ln 02 13 2014 City State Zip Code Transaction ID: C2646672 GΑ Savannah 31411-1407 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Savannah, P.C Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert J. Demaster M.D. Date of Receipt Mailing Address 2000 Old Sheridan Rd. 2014 02 21 City State Zip Code Transaction ID: C2649796 OR McMinnville 97128 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Willamette Valley Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 770.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 11 OF	Ξ
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c 12	
	13 14 15 16	

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) Jennifer R. Dollar M.D.		Date of Receipt
Mailing Address 869 Shades Crest Rd.		02 07 2014 The state of the sta
City	State Zip Code	Transaction ID : C2645220
Birmingham	AL 35226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Pediatric Anesthesia Assoc.	physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) 3. William Dominguez M.D.		Date of Receipt
Mailing Address 3205 La Mancha Dr., N.W.		02 25 2014 _
City	State Zip Code	Transaction ID : C2650444
Albuquerque	NM 87104-3013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Anes. Assoc. of New Mexico, P.C.	Occupation	
Receipt For:	Anesthesiologist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Jay Douglas III, M.D.		Date of Receipt
Mailing Address PO Box 3294		02 05 2014 _
City	State Zip Code	Transaction ID : C2640707
Tupelo	MS 38803-3294	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Tupelo Anesthesia Group, PA	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number	only)	

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

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Amanda L. Downey M.D. Date of Receipt Mailing Address 9513 W 148th St 2014 City Zip Code State Transaction ID: C2647273 KS Overland Park 66221-8203 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **KUMC** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark A. Eggen M.D. Date of Receipt Mailing Address 5980 Robin Oak Ct 02 18 2014 City State Zip Code Transaction ID: C2647728 MN Saint Paul 55126-9122 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation University of Minnesota Physicians physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lawrence Epstein M.D. Date of Receipt Mailing Address 1 Gustave L Levy PI Dept Ofanesthe 02 06 2014 City Zip Code State Transaction ID: C2641964 NY New York 10029-6504 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Mount Sinai School of Medicine Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.28 Other (specify) 1583.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Lawrence Epstein M.D. Date of Receipt Mailing Address 1 Gustave L Levy PI Dept Ofanesthe 2014 City Zip Code State Transaction ID: C2646110 NY New York 10029-6504 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Mount Sinai School of Medicine Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.28 Other (specify) Full Name (Last, First, Middle Initial) B. William Feaster M.D. Date of Receipt Mailing Address 507 Ocean Avenue 02 12 2014 City State Zip Code Transaction ID: C2646111 Seal Beah CA 90740 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Childrens Hospital Orange County anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 499.96 Other (specify) Full Name (Last, First, Middle Initial) c. William Feaster M.D. Date of Receipt Mailing Address 507 Ocean Avenue 02 15 2014 City Zip Code State Transaction ID: C2647277 CA Seal Beah 90740 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Childrens Hospital Orange County anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 499.96 Other (specify) 249.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) William Feaster M.D. Date of Receipt Mailing Address 507 Ocean Avenue 2014 27 City Zip Code State Transaction ID: C2651027 CA Seal Beah 90740 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Childrens Hospital Orange County anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 499.96 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa C. W. Ferguson M.D. Date of Receipt Mailing Address 4111 Heritage Trl 02 21 2014 City State Zip Code Transaction ID: C2649830 IN 47803-1368 Terre Haute Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation self consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Victor S. Ferguson M.D. Date of Receipt Mailing Address 4111 Heritage Trl 2014 02 21 City Zip Code State Transaction ID: C2649829 IN Terre Haute 47803-1368 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation self consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2083.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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(che	ck only	or	ıe)						
X	11a		11b		11c		12		
	13		14		15		16		17

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) James M. Frankland M.D. Mailing Address, 3640 Mossy Creek I.p.		Date of Receipt
Mailing Address 3640 Mossy Creek Ln		02 28 2014
City	State Zip Code	Transaction ID : C2651586
Tallahassee	FL 32311-3638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	+
Anesthesia Assoc. of Tallahassee	MD	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Lisa M. Frison D.O.		Date of Receipt
Mailing Address 3925 Villa San Jose Dr		02 14 _ 2014 _
City	State Zip Code	Transaction ID : C2649833
Jacksonville	FL 32217-4626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	+
Florida Anes. Assoc.	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. Wayne A. Fuller M.D.		Date of Receipt
Mailing Address 1269 E. Giles Rd.		02 06 2014
City	State Zip Code MI 49445	Transaction ID : C2641966
Muskegon	1VII 43440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.30
Name of Employer	Occupation	
Lakeshore Anes. of Muskegon	Anesthesiologist	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	333.28	
SUBTOTAL of Receipts This Page (optional).		1333.30
TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12										
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Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full) American Society of Anesthesiology	gists Political Action Committ	ee										
Full Name (Last, First, Middle Initial) Nayne A. Fuller M.D.		Date of Receipt										
Mailing Address 1269 E. Giles Rd.		02 11 2014										
City Muskegon	State Zip Code MI 49445	Transaction ID : C2645719 Amount of Each Receipt this Period										
FFC ID asserber of contribution	C	83.34										
Lakeshore Anes. of Muskegon A	nesthesiologist eggregate Year-to-Date ▼ 333.28											
Full Name (Last, First, Middle Initial) Rajeev Garg M.D. Mailing Address 112 W Wild Cherry Dr		Date of Receipt										
City	State Zip Code	02 03 2014 Transaction ID : C2639872										
Mars FEC ID number of contributing federal political committee.	PA 16046-4048 C	Amount of Each Receipt this Period 250.00										
Habitan Control Bittah annah Marilian LO anta	occupation nesthesiologist											
Receipt For: Primary General Other (specify) ▼	aggregate Year-to-Date ▼ 250.00											
Full Name (Last, First, Middle Initial) C. Steven I. Gayer M.D., M.B.		Date of Receipt										
Mailing Address 90 Alton Road #2710		02 11 2014										
City Miami Beach	State Zip Code FL 33139	Transaction ID : C2645709 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	250.00										
Name of Employer O	ccupation											
	nesthesiologist											
Receipt For: Primary General Other (specify) ▼	aggregate Year-to-Date ▼ 250.00]										
SUBTOTAL of Receipts This Page (optional)		583.34										
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Steven J. Getz M.D.		Date of Receipt
Mailing Address 109 Penn St		02 14 2014
City	State Zip Code	Transaction ID : C2649834
Greenville	SC 29605-1104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	-
Palmetto Anesthesia Associates	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) William K. Goglin Jr., M.D.		Date of Receipt
Mailing Address 2119 cortelyou rd		02 01 2014
City	State Zip Code	Transaction ID : C2637097
Charlotte	NC 28211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Northeast Anesthesia	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Timothy P. Graham M.D.		Date of Receipt
Mailing Address 730 Color Peak Rd		02 22 2014
City	State Zip Code	Transaction ID : C2649866
Verona	WI 53593-8469	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
University of Wisconsin	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	1500.00
TOTAL This Period (last page this line numb		

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Brian J. Gronert M.D. Date of Receipt Mailing Address 2616 Harvest Ln NW 2014 City Zip Code State Transaction ID: C2649893 NM Albuquerque 87104-3200 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Associates of New Mexico Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca D. Guess M.D. Date of Receipt Mailing Address 12002 Woodfall cir. 02 25 2014 City State Zip Code Transaction ID: C2650441 TX Waco 76712-3174 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Mid-Tex Anesthesia Associates PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Tork J. Harman M.D. Date of Receipt Mailing Address 1550 Boyson Road 2014 02 07 City State Zip Code Transaction ID: C2646205 IA Hiawatha 52233 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** LCA, PC Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Bechara Hatoum M.D. Date of Receipt Mailing Address 5570 Harleston Dr. 2014 24 City Zip Code State Transaction ID: C2650341 OH Lyndhurst 44124-3813 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation CLEVELAND CLINIC FOUNDATION **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Katherine K. Hege M.D. Date of Receipt Mailing Address 320 E Hickory Ridge Cir 02 09 2014 City State Zip Code Transaction ID: C2645559 TX Argyle 76226 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Pinnacle Anesthesia Consultants Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ebony J. Hilton M.D. Date of Receipt Mailing Address 167 Ashley Ave Ste 301 2014 02 14 City Zip Code State Transaction ID: C2646726 SC Charleston 29425-8905 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Med Univ of SC Dept of Anes Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS for each category of the **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Eric M. Humphreys M.D. Date of Receipt Mailing Address 6035 Worthington Rd 2014 City Zip Code State Transaction ID: C2647274 OH Westerville 43082-8318 Amount of Each Receipt this Period FEC ID number of contributing 335.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** COA Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 335.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael A. Iverson M.D. Date of Receipt Mailing Address 330 Chapel Loop 02 2014 11 City State Zip Code Transaction ID: C2645775 Mandeville LA 70471 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **WSTAA** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Jeffrey L. Jackson M.D. Date of Receipt Mailing Address 602 W. Second St. 2014 02 22 City State Zip Code Transaction ID: C2649864 IN Bloomington 47403 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **Bloomington Anesthesiologists** anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1835.00 SUBTOTAL of Receipts This Page (optional).....

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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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NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Daniel J. Janik M.D. Date of Receipt Mailing Address 15605 E Prentice Dr 2014 City State Zip Code Transaction ID: C2646118 80015-4264 CO Centennial Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation University of Colorado Denver Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.28 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel J. Janik M.D. Date of Receipt Mailing Address 15605 E Prentice Dr 02 2014 13 City State Zip Code Transaction ID: C2646612 Centennial CO 80015-4264 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation University of Colorado Denver Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.28 Other (specify) Full Name (Last, First, Middle Initial) c. Paul L. Johnson M.D. Date of Receipt Mailing Address 1400 Madison Ave 2014 02 25 Suite 311 City State Zip Code Transaction ID: C2650437 MN Mankato 56001-4752 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Anesthesiologist Mankato Anes. Assoc; Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1166.64 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Donna A. Kucharski M.D., M.D. Date of Receipt Mailing Address 180 Read St 09 2014 City Zip Code State Transaction ID: C2645558 Seekonk MA 02771-1412 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Providence Anesthesia.Inc. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Hung-Chi Kwok M.D. Date of Receipt Mailing Address 2732 Muir Woods Dr., SE 02 12 2014 City State Zip Code Transaction ID: C2646041 ΑL Hampton Cove 35763 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Name of Employer Occupation Alabama Anes. of Huntsville, LLC physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kenneth M. Lanyon M.D. Date of Receipt Mailing Address 618 Prince Valiant Ct 09 02 2014 City Zip Code State Transaction ID: C2645564 TN Franklin 37067-6499 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Md Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 925.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) A. Michael A. Less M.D.		Date of Receipt
Mailing Address 15W316 60th St		02 05 2014
City	State Zip Code	Transaction ID : C2641548
Burr Ridge	IL 60527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Elmhurst Anesthesiologists	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. Drew E. Lieberman M.D.		Date of Receipt
Mailing Address 179 Bal Cross Dr.		02 26 2014
City	State Zip Code	Transaction ID : C2650530
Bal Harbour	FL 33154-1316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Anesthesia Assoc of Broward County Inc	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Dennis S. Lin M.D.		Date of Receipt
Mailing Address 100 Exeter St.		02 24 2014
City West Newton	State Zip Code MA 02465-2809	Transaction ID : C2650352
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Winchester Hospital	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	1250.00
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) A. Keith Lipsitz M.D.		Date of Receipt
Mailing Address 905 Baldwin Rd		02 05 2014
City	State Zip Code CT 06525-2408	Transaction ID : C2641551
Woodbridge FEC ID number of contributing federal political committee.	C1 06525-2408	Amount of Each Receipt this Period 250.00
Name of Employer MAA LLC Receipt For: Primary General Other (specify) ▼	Occupation anesthesiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Nancy L. Loeffler M.D. Mailing Address 3726 Lakeview Dr.		Date of Receipt
City	State Zip Code	02 14 2014 Transaction ID : C2646715
Tallahassee	FL 32310-6348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Anesthesiology Assoc. of Tallahassee	Occupation anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. Claudio Lumermann M.D.		Date of Receipt
Mailing Address Dept. of Anesthesia 270-75 76 Ave,		02 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New Hyde Park	State Zip Code NY 11040	Transaction ID : C2644260 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	
Long Island Jewish Med. Ctr.	Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	
SUBTOTAL of Receipts This Page (optional).		1333.34
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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Claudio Lumermann M.D. Date of Receipt Mailing Address Dept. of Anesthesia 270-75 76 Ave, 09 2014 City Zip Code State Transaction ID: C2645507 NY 11040 New Hyde Park Amount of Each Receipt this Period FEC ID number of contributing C 83.34 federal political committee. Name of Employer Occupation Long Island Jewish Med. Ctr. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Glen F. Martin M.D. Date of Receipt Mailing Address 816 Baytree Ln 02 16 2014 City State Zip Code Transaction ID: C2647361 FL Ponte Vedra Beach 32082-4162 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Jacksonville Anesthesia Corp, Inc. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Randall P. Maydew M.D. Date of Receipt Mailing Address 6910 Wildglen Drive 09 2014 02 City Zip Code State Transaction ID: C2645556 TX **Dallas** 75230 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Randall P Maydew, MD, MBA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1333.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	9
Full Name (Last, First, Middle Initial) Brian A. McConnell M.D. Mailing Address, 3300 College Rd.		Date of Receipt
Mailing Address 3300 Gallows Rd.	77.7	M M / D D / Y Y Y Y Y
Department of Anesthesiolog City	3y State Zip Code	02 04 2014 Transaction ID : C2640672
Falls Church	VA 22042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
American Anesthesiology	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Frederick McKibben M.D.		Date of Receipt
Mailing Address 1711 Homewood Dr.	7.6	02 20 7 2014
City	State Zip Code CA 91001	Transaction ID : C2649250
Altadena	CA 91001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Lawrence S. Minowitz M.D.		Date of Receipt
Mailing Address 26 Sherwood Ave.		02 03 2014
City	State Zip Code	Transaction ID : C2639677
Greenwich	CT 06831-3249	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
self	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
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Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Karen P. Mitchell M.D. Date of Receipt Mailing Address 3838 N Braeswood Blvd Apt 112 2014 City Zip Code State Transaction ID: C2649876 TX 77025-3005 Houston Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Memorial Hermann Southwest Hospital Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Karen P. Mitchell M.D. Date of Receipt Mailing Address 3838 N Braeswood Blvd Apt 112 02 2014 27 City State Zip Code Transaction ID: C2650541 TX Houston 77025-3005 Amount of Each Receipt this Period FEC ID number of contributing 83.34 federal political committee. Name of Employer Occupation Memorial Hermann Southwest Hospital Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) c. Robert R. Morrison M.D. Date of Receipt Mailing Address 5801 Spinnaker Pointe 2014 02 07 City Zip Code State Transaction ID: C2644261 MO Parkville 64152-6102 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Ad Vivum Anesthesiology, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 416.68 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Sergio A Murillo M.D. Date of Receipt Mailing Address 2170 Trenton Way 2014 City State Zip Code Transaction ID: C2647459 TX Allen 75013-4911 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Pinnacle Partners In Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sergio A Murillo M.D. Date of Receipt Mailing Address 2170 Trenton Way 02 19 2014 City State Zip Code Transaction ID: C2647752 TX Allen 75013-4911 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Pinnacle Partners In Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Scott D. Murtha M.D. Date of Receipt Mailing Address 216 Bever Ln., S.E. 2014 02 07 City State Zip Code Transaction ID: C2646203 IΑ Cedar Rapids 52403-3280 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation LINN COUNTY ANESTH **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Ryan D. Nagy M.D. Date of Receipt Mailing Address 1120 South Dr FH 204 01 2014 City State Zip Code Transaction ID: C2637182 IN Indianapolis 46202-5135 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Indiana University Department of Anest Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Aidan P. O'Brien M.D. Date of Receipt Mailing Address 8382 Grand View Dr 02 01 2014 City State Zip Code Transaction ID: C2637848 CA Los Angeles 90046-1918 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Presbyterian Hospital Whittier Chief of Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. James F. O'Neill M.D. Date of Receipt Mailing Address 1060 Live Oak Plantation Rd. 2014 02 06 City State Zip Code Transaction ID: C2641967 FL Tallahassee 32312 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Anesthesiology Assoc. of Tallahassee Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 OF 54 (check only one) X 11a

Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Society of Anesthesio	logists Political Action Committee	
Full Name (Last, First, Middle Initial) Lance J. Parks D.O. Mailing Address 115 South Harwich Drive		Date of Receipt
		02 04 2014
City	State Zip Code	Transaction ID : C2639906
Morgantown	WV 26508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
West Virginia University Ruby Memorial	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) Ketul J. Patel M.D.		Date of Receipt
Mailing Address 7871 Hidden Oaks		02 08 _2014 _
City	State Zip Code	Transaction ID : C2645465
Pittsford	NY 14534-9607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Finger Lakes Health	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	
Full Name (Last, First, Middle Initial) Mukesh Patel M.D.		Date of Receipt
Mailing Address 2727 W. Dr. M.L.K., Jr., Blvd. Suite 310	Chata 7:- O-d-	02 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tampa	State Zip Code FL 33607	Transaction ID : C2647367
<u> </u>		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Millennium Anes. Care, P.A.	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number of	only)	

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EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	y one) 11b 14		11c 15	\vdash	12 16		17
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A or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Fernando B. Perez-Majul M.D. Date of Receipt Mailing Address 720 ESKENAZI AVENUE 2ND FLOOR, H2G07 2014 City State Zip Code Transaction ID: C2646634 IN Indianapolis 46202 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Wishard Health Services **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Frederick M. Perkins M.D. Date of Receipt Mailing Address VAMC 112 215 N. Main St. 02 2014 12 City State Zip Code Transaction ID: C2646595 VT White River Junction 05009-0001 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Veterans Administration Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Russell S. Petersen M.D. Date of Receipt Mailing Address 4124 S. Mt. Olympus Way 2014 02 10 City State Zip Code Transaction ID: C2645704 UT Salt Lake City 84124 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Mountain West Anesthesia, LLC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

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

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	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	9
Full Name (Last, First, Middle Initial) Robert E. Powers M.D.		Date of Receipt
Mailing Address P.O. Box 7288		02 19 2014 _
City	State Zip Code	Transaction ID : C2648996
Little Rock	AR 72217-7288	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
SELF	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Timothy J. Quill M.D.		Date of Receipt
Mailing Address 27 Stevens Rd		02 10 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : C2645666
Hanover	NH 03755-3115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Dartmouth Hitchcock Medical Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)	7	
. Matthew Ragland M.D.		Date of Receipt
Mailing Address 315 N Rollston Ave Apt 201	7.0.1	02 03 2014
City Fayetteville	State Zip Code AR 72701-4131	Transaction ID : C2639787 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Northwest Anesthesiology Associates	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numbe	r only)	

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	9
Full Name (Last, First, Middle Initial) Sheila N. Rajaratnam M.D.		Date of Receipt
Mailing Address 6591 Swissway Dr		02 28 2014
City Centerville	State Zip Code OH 45459-1230	Transaction ID : C2651679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Kettering Anesthesia Associates Receipt For: Primary General Other (specify) ▼	Occupation anesthesiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Roger N. Rankin M.D. Mailing Address 3502 Amherst St		Date of Receipt
City Houston	State Zip Code TX 77005	Transaction ID : C2640673
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer self Receipt For: Primary General	Occupation physician Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Frank E. Rinaldo M.D.		Date of Receipt
Mailing Address 8524 Pine Lake Rd		02 / 13 / 2014
City Denver	State Zip Code NC 28037	Transaction ID : C2646599 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	-
Western Piedmnont Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Anesthesiologist Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numb	er only)	

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	d Statements may not be sold or used by any pers the name and address of any political committee to			
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee			
Full Name (Last, First, Middle Initial) Franklin P. Robinson M.D.	Date of Receipt			
Mailing Address 123 Southampton Circle		02 13 2014		
City Madison	State Zip Code MS 39110	Transaction ID : C2646674		
FEC ID number of contributing federal political committee.	C 33110	Amount of Each Receipt this Period 250.00		
Name of Employer Jackson VA Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Shay E. Robinson M.D. Mailing Address 809 Homestead Dr Unit 85		Date of Receipt		
City Dallas	Transaction ID : C2645589			
FEC ID number of contributing federal political committee.	PA 18612-7219	Amount of Each Receipt this Period 41.67		
Name of Employer Wilkes-Barre General Hospital Anesthes	Occupation Anesthesiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02			
Full Name (Last, First, Middle Initial) C. Shay E. Robinson M.D.		Date of Receipt		
Mailing Address 809 Homestead Dr Unit 85		02 18 2014		
City Dallas	State Zip Code PA 18612-7219	Transaction ID : C2647533 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	83.34		
Name of Employer	Occupation	-		
Wilkes-Barre General Hospital Anesthes Receipt For:	Anesthesiologist	-		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.02			
SUBTOTAL of Receipts This Page (optional).	····	375.01		
TOTAL This Period (last page this line numb	er only)			

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	Statements may not be sold or used by any pers he name and address of any political committee to			
NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	9		
Full Name (Last, First, Middle Initial) Victory V. Roman M.D.	Date of Receipt			
Mailing Address 9440 N. Lockwood		02 27 2014		
City Skokie	State Zip Code IL 60077	Transaction ID : C2651556 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	500.00		
Name of Employer Midwest Anesthesia Partners Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation anesthesiologist Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Glen S. Rosenfeld M.D. Mailing Address 25 Fulton Place		Date of Receipt		
City West Hartford	State Zip Code CT 06107	Transaction ID : C2645954 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	250.00		
Name of Employer Milford Ansthesia Associates	Occupation Physician			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) 2. Justin C. Sandall D.O.		Date of Receipt		
Mailing Address 14718 W Valley Hi Rd	02 06 2014			
City Wichita	State Zip Code KS 67235-8354	Transaction ID : C2642533 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	500.00		
Name of Employer	Occupation	-		
Anesthesia Consulting Services, PA Receipt For: Primary General Other (specify) ▼	Anesthesiologist Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)		1250.00		
TOTAL This Period (last page this line number	er only)			

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Any information copied from such Reports and a or for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	9
Full Name (Last, First, Middle Initial) Kamran A. Saraf M.D.		Date of Receipt
Mailing Address 10953 Deborah Dr		02 07 2014
City	State Zip Code	Transaction ID : C2645464
Potomac	MD 20854-2718	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Potomac Spine and Pain Specialists	Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate rear-to-bate ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Madhankumar Sathyamoorthy M.B	.,B.S.	Date of Receipt
Mailing Address 2500 North State st	02 28 2014	
City	State Zip Code	Transaction ID : C2651678
Jackson	MS 39222	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	-
University of Mississippi Medical cent	Pediatric anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Donald Schmit M.D.		Date of Receipt
Mailing Address 920 Church St N		02 26 2014
City	State Zip Code	Transaction ID : C2650465
Concord	NC 28025-2927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	-	
Northeast Anesthesia and Pain Speciali	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	•	1250.00
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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Steven B. Schulman M.D. Mailing Address, 400 Part Washington Blad		Date of Receipt
Mailing Address 100 Port Washington Blvd		02 13 2014 T
City	State Zip Code	Transaction ID : C2646630
Roslyn	NY 11576-1353	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	1
NY Cardiovascular Anesthesiologists	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.02	
Full Name (Last, First, Middle Initial) Earl A. Schulte M.D.		Date of Receipt
Mailing Address 3811 Mission Dr.		02 15 2014
City	State Zip Code	Transaction ID : C2647294
Hutchinson	KS 67502-9112	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Schulte Anesthesiology, P.A.	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) David A. Shapiro M.D.		Date of Receipt
Mailing Address 2420 Camino Ramon Ste 2		02 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City San Ramon	State Zip Code CA 94583	Transaction ID : C2637359
-	On 94000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
MACMGI	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		583.34
TOTAL This Period (last page this line numb	er only)	

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NAME OF COMMITTEE (In Full)		
angle American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Timothy R. Shipe M.D. Mailing Address, 1204 Meeters Ct		Date of Receipt
Mailing Address 1304 Masters Ct		02 04 2014
City	State Zip Code	Transaction ID : C2639898
Chesapeake	VA 23320-9451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Chesapeake Regional Medical Center	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. David W. Siegel M.D.		Date of Receipt
Mailing Address 7014 Guadalupe Trail, N.W.		02 17 _2014 _
City	State Zip Code	02 17 2014 Transaction ID : C2647465
Albuquerque	NM 87107-6608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer University of New Mexico School of Med	Occupation Anesthesiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Stephen M. Speck M.D.		Date of Receipt
Mailing Address 9021 Naples Cove		02 02 2014 _
City	State Zip Code	Transaction ID : C2638368
Benton	AR 72019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Saline Memorial Hospital	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number	only)	

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	
Full Name (Last, First, Middle Initial) Steven P. Stein M.D. Mailing Address 18 Harbor Hill Dr		Date of Receipt
maining reactors to Haibor till bi		02 06 2014
City	State Zip Code	Transaction ID : C2641974
Lloyd Harbor	NY 11743-1031	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
NAPA	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	
Full Name (Last, First, Middle Initial) Steven P. Stein M.D. Mailing Address 18 Harbor Hill Dr		Date of Receipt
01.	7'- 0-1-	02 06 2014
City	State Zip Code NY 11743-1031	Transaction ID : C2641975
Lloyd Harbor	NY 11743-1031	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
NAPA 	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	333.36	
Full Name (Last, First, Middle Initial) C. Ronald E. Stevens M.D.		Date of Receipt
Mailing Address P.O. Box 2899		02 07 2014
City Cheyenne	State Zip Code WY 82003	Transaction ID : C2646206 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
HIGH PLAINS	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		416.68
TOTAL This Period (last page this line numb	er only)	

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial) Ann Still M.D.		Date of Receipt
Mailing Address 1800 Alabama Highway 15	7 Ste 201	02 25 2014
City	State Zip Code	Transaction ID : C2650363
Cullman	AL 35058-1273	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer	Occupation	-
Alabama Pain Center Cullman	Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	rygiegate real-tu-Date ₹	
Other (specify) ▼	229.18	
Full Name (Last, First, Middle Initial) Jeffrey W. Stone M.D.		Date of Receipt
Mailing Address 4237 Purdue Avenue		02 06 2014
City	State Zip Code	Transaction ID : C2642113
Dallas	TX 75225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Excel Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Stephen M. Strevels M.D.		Date of Receipt
Mailing Address PO Box 51947		02 03 2014
City	State Zip Code	Transaction ID : C2639873
Knoxville	TN 37950-1947	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
University Anesthesiologists	Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	•	833.34
TOTAL This Period (last page this line numb	er only)	

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Volker I. Striepe M.D. Date of Receipt Mailing Address 621 Post Oak Circle 2014 City Zip Code State Transaction ID: C2645901 TN Brentwood 37027 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Nashville Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. James L. Suthoff D.O. Date of Receipt Mailing Address 5015 S Rochelle Ct 02 02 2014 City State Zip Code Transaction ID: C2637871 MO Springfield 65804-7810 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Ozark Anesthesia Associates anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. David A. Tavares Jr., M.D. Date of Receipt Mailing Address 3528 Crossbow Drive 80 02 2014 City Zip Code State Transaction ID: C2645493 TX Frisco 75033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Ascendant Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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54 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Bijo J. Thomas M.D. Date of Receipt Mailing Address 214 Rolling Hills Dr. 2014 City Zip Code State Transaction ID: C2649902 PΑ Wexford 15090 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Ohio Valley General Hospital Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Pam D. Varner M.D. Date of Receipt Mailing Address 3504 Pine Ridge Rd 02 02 2014 City State Zip Code Transaction ID: C2638898 Mountain Brk AL 35213 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation School of Medicine Univ of Alabama at Medical Doctor; Professor of Anesthesi Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ebon J. Wallace-Talifarro M.D. Date of Receipt Mailing Address 7205 Meadowgrass Court 2014 02 04 City Zip Code State Transaction ID: C2639892 MI Caledonia 49316 Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Name of Employer Occupation Central Anesthesia Services Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) John S. Whittington M.D. Date of Receipt Mailing Address 23 Circle Dr NE 2014 27 City Zip Code State Transaction ID: C2651039 NM Albuquerque 87122-2109 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anes. Assoc. of New Mexico, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Stacie L. Wong M.D. Date of Receipt Mailing Address 115 McIntosh Dr 02 05 2014 City State Zip Code Transaction ID: C2640680 GA Savannah 31406-5245 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation South University Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lawrence I. Young M.D. Date of Receipt Mailing Address 1717 Valley Forge Dr. 02 25 2014 City Zip Code State Transaction ID: C2650362 TN Hixson 37343 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation American Anesthesiology of Tennessee Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 875.00 SUBTOTAL of Receipts This Page (optional)..... 42471.57 TOTAL This Period (last page this line number only).....

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,	State Zip Code		Transaction ID : D154080
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	04 🗆 05 🗆 55			
	Detailed Summary Page	21b 27		24 25 26 28c 29 30b		
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American Society of Anesthesiolog	ists Political Action (Committee				
Full Name (Last, First, Middle Initial)						
A. GOP GENERATION Y FUND			Date of Disbursement			
			M M / D D /	Y I Y I Y I Y		
Mailing Address PO Box 9055			02 12	2014		
City	State Zip Code					
Peoria	IL 61612		Transaction ID : D15	53815		
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	nent For: 2014					
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B. Minnesota House DFL Caucus			Date of Disbursement			
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Mailing Address 255 Plato Blvd E			02 05	2014		
•	State Zip Code MN 55107-1623		Transaction ID : D1	53701		
Saint Paul Purpose of Disbursement	MN 55107-1623					
2014 Contribution		011	Amount of Each Disbu	ursement this Period		
Candidate Name		Category/		2500.00		
Office Sought: House Disburser	ment For: 2014	Туре		7		
Senate Senate	Primary General					
President	Other (specify)					
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C. Minnesota Senate Majority			M M / D D /	YYYY		
Mailing Address PO Box 7307			02 05	2014		
0"						
City Saint Paul	State Zip Code MN 55107		Transaction ID : D1	53702		
Purpose of Disbursement						
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 46 OF 54					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(s) (check only one)					
	Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3				
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A. CITIZENS FOR PROSPERITY IN A	AMERICA TODAY P	AC	Date of Disbursement				
Mailing Address 228 S Washington St Ste 115			02 26 2014				
,	tate Zip Code		Transaction ID : D154065				
Alexandria Purpose of Disbursement	VA 22314-5404		Transaction is . 510-600				
2014 Contribution		011	Amount of Each Disbursement this Period				
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Office Sought: House Disbursem	nent For: 2014	Туре					
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	Other (specify)						
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Full Name (Last, First, Middle Initial) B. BERA FOR CONGRESS			Date of Disbursement				
SERATOR CONGRESS			M = M / D = D / Y = Y = Y				
Mailing Address PO Box 582496			02 26 2014				
	State Zip Code CA 95758-0042		Transaction ID : D154064				
Purpose of Disbursement 2014 General Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	2222.22				
Rep. Ami Bera M.D.		Туре	2000.00				
	nent For: 2014						
	Primary						
State: CA District: 07	Other (specify)						
Full Name (Last, First, Middle Initial)							
C. ANN WAGNER FOR CONGRESS			Date of Disbursement				
Mailing Address DO DOV 50			02 12 2014				
Mailing Address PO BOX 50			JZ 1Z ZU14				
,	itate Zip Code		Transaction ID : D153816				
BALLWIN Purpose of Disbursement	MO 63022						
2014 General Contribution			Amount of Each Disbursement this Period				
Candidate Name		Category/					
Rep. Ann Wagner		Type	3500.00				
	nent For: 2014						
	Primary General						
	Other (specify) ▼						
State: MO District: 02							
SUBTOTAL of Disbursements This Page (optional)		·····•	8000.00				

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 47 OF 54					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
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American Society of Anesthesiolo	gists Political Action	Committee					
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Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. MCCOLLUM FOR CONGRESS			M M / D D /	Y			
Mailing Address P.O. Box 14131			02 19	2014			
City	State Zip Code MN 55114		Transaction ID : D1539	929			
St. Paul Purpose of Disbursement	MN 55114						
2014 Primary Contribution		011	Amount of Each Disburs	ement this Period			
Candidate Name		Category/		4000.00			
Rep. Betty McCollum		Type		1000.00			
	ment For: 2014						
Senate Yresident	Primary General						
State: MN District: 04	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B. BILL FLORES FOR CONGRESS			Date of Disbursement				
			M = M / D = D /	YYYY			
Mailing Address PO BOX 6207			02 26	2014			
City	State Zip Code		Transaction ID : D154	D67			
BRYAN Purpose of Disbursement	TX 77805						
2014 Primary Contribution		011	Amount of Each Disburs	ement this Period			
Candidate Name		Category/	= 1350.0				
Rep. Bill Flores		Type		2000.00			
	ment For: 2014						
	Primary General						
President State: TX District: 17	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C. RANGEL FOR CONGRESS			Date of Disbursement				
			M M / D D /	Y			
Mailing Address PO BOX 5577			02 19	2014			
City	State Zip Code						
NEW YORK	NY 10027		Transaction ID : D153	928			
Purpose of Disbursement							
2014 Primary Contribution		011	Amount of Each Disburs	ement this Period			
Candidate Name		Category/		2500.00			
Rep. Charles B. Rangel Office Sought: House Disburse	ment For: 2014	Туре		200.00			
Senate	Primary General						
President	Other (specify)						
State: NY District: 15							
SUBTOTAL of Disbursements This Page (optional).				5500.00			
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SCHEDULE B (FEC Form				FO	R LINE	NUMBER	:	PAG	E 48	OF 54
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			(check only one)					
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Full Name (Last, First, Middle Initial)						- .				
A. EDDIE BERNICE JOHNS	SON FOR C	ONG	RESS			Date o	f Disburse		YY	Υ
Mailing Address 3102 Maple Avenue,	Suite 605					02	26	5	2014	
City	Sta		Zip Code			Trans	action ID	· D154071		
Dallas	T)	X 	75201			Trunc	aotion ib	. 5104071		
Purpose of Disbursement 2014 Primary Contribution				01	1	Amoun	t of Each	Disbursem	ent this	Period
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Rep. Eddie Bernice Johns Office Sought: House		nt For:	2011	Ту	ре		-	7		
Office Sought: House Senate President		imary	General cify)							
State: TX District: 30										
Full Name (Last, First, Middle Initial)										
B. PALLONE FOR CONGRI	ESS					Date o	f Disburse		YY	Υ
Mailing Address PO Box 3176						02	20	6	2014	
City Long Branch	Sta N		Zip Code 07740			Trans	saction ID	: D154059		
Purpose of Disbursement 2014 General Contribution				0′	11	Amoun	t of Each	Disbursem	ent this	Period
Candidate Name				Cate	gory/				250	0.00
Rep. Frank Pallone Jr.				Ty			-	7	250	0.00
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Senate President		imary	General							
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Mailing Address P.O. BOX 490						02	26	6	2014	
City ST. JOSEPH	Sta M		Zip Code 49085			Trans	saction ID	: D154069		
Purpose of Disbursement 2014 Primary Contribution		<u> </u>	10000							
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SCHEDULE B (FEC Form 3X)		. FOR LINE	NUMBER: PAGE 49 OF 54
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NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	jists Political Action	on Committee)
Full Name (Last, First, Middle Initial)			
A. GENE GREEN CONGRESSIONAL	L CAMPAIGN		Date of Disbursement
Mailing Address PO BOX 16128			02 12 2014
City	State Zip Code		Transaction ID : D153813
HOUSTON	TX 77222		Transaction ib . b133013
Purpose of Disbursement 2014 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Gene Green Office Sought: House Disburser		Туре	100.00
Office Sought: House Disburser	ment For: 2014 Primary	al	
State: TX District: 29			
Full Name (Last, First, Middle Initial)			
3. TEXANS FOR HENRY CUELLAR CO	ONGRESSIONAL (CAMPAIGN	Date of Disbursement
Mailing Address 1519 Washington Street			02 / 26 / 2014
City	State Zip Code		
Laredo	TX 78042		Transaction ID : D154054
Purpose of Disbursement 2014 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Henry Cuellar		Type	2000.00
Office Sought: House Disburser	ment For: 2014 Primary	al	
Full Name (Last, First, Middle Initial) JULIA BROWNLEY FOR CONGRI	ESS		Date of Disbursement
Mailing Address PO BOX 2018			02 26 2014
City	State Zip Code		
THOUSAND OAKS Purpose of Disbursement	CA 91358		Transaction ID: D154063
2014 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	3000.00
Rep. Julia Brownley		Туре	3000.00
Senate President	ment For: 2014 Primary Genera Other (specify) ▼	al	
State: CA District: 26			
SUBTOTAL of Disbursements This Page (optional)		······	6000.00
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 50 OF 54
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American Society of Anesthesiolog	ists Political Action	on Committee	
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A. BRADY FOR CONGRESS			Date of Disbursement
- DIVIDITION CONCINED			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 8277			02 26 2014
City	State Zip Code		
THE WOODLANDS	TX 77387		Transaction ID : D154062
Purpose of Disbursement			
2014 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Kevin Brady		Category/	3000.00
	nent For: 2014	Type	
	Primary Gener	al	
President	Other (specify) ▼		
State: TX District: 08			
Full Name (Last, First, Middle Initial)			Data of Dishumannant
B. COMMITTEE TO RE-ELECT LIND	A SANCHEZ		Date of Disbursement
Mailing Address 1212 S. Victory Blvd			02 05 _ 2014 _
,	State Zip Code		Transaction ID : D153691
BURBANK Purpose of Disbursement	CA 91502		
			Amount of Each Disbursement this Period
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2014 Primary Contribution Candidate Name		O11 Category/	
2014 Primary Contribution Candidate Name Rep. Linda T. Sanchez			2500.00
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2014 Primary Contribution Candidate Name Rep. Linda T. Sanchez Office Sought: House Senate President State: CA District: 38 Full Name (Last, First, Middle Initial)	Primary Gener Other (specify) ▼	Category/ Type	2500.00 Date of Disbursement
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or	for commercial purposes, other than using the name	ne and add	ress of any political	al committee to	osolicit contributions from such committee.
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Α.	MICHAEL BURGESS FOR CONG	RESS			Date of Disbursement
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 52 OF 54		
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American Society of Anesthesiolog	ists Political Action (Committee			
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Full Name (Last, First, Middle Initial)					
A. COFFMAN FOR CONGRESS			Date of Disbursement		
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#511			02 12 2014		
	tate Zip Code		Transaction ID D450040		
0.121111000 1122102	CO 80111		Transaction ID : D153818		
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Candidate Name		011	Amount of Each Disbursement this Period		
Rep. Mike Coffman		Category/ Type	2000.00		
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B. DR. RAUL RUIZ FOR CONGRESS	COMMITTEE		Date of Disbursement		
Mailing Address 73373 COUNTRY CLUB DRIVE #	904		02 19 2014		
maining reactor 75575 OCCIVITY GEOD BRIVE #	304		,		
•	tate Zip Code		Transaction ID : D153931		
PALM DESERT Purpose of Disbursement	CA 92260				
2014 General Contribution		011	Amount of Each Disbursement this Period		
Candidate Name					
Rep. Raul Ruiz M.D.		Category/ Type	2000.00		
Office Sought: House Disbursen	ent For: 2014				
	Primary				
	Other (specify) ▼				
State: CA District: 36					
Full Name (Last, First, Middle Initial) C. RENEE ELLMERS FOR CONGRE			Date of Disbursement		
S. REINEE ELLIVIERS FOR CONGRE	33 COMMINITIEE		M M / D D / Y Y Y Y		
Mailing Address PO BOX 99567			02 12 2014		
,	tate Zip Code		Transaction ID : D153817		
RALEIGH Purpose of Disbursement	NC 27624				
2014 Primary Contribution		011	Amount of Each Disbursement this Period		
Candidate Name Categor					
Rep. Renee Ellmers		Type	1000.00		
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NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	ists Political Actio	n Committee	
Full Name (Last, First, Middle Initial)			
A. RICHARD E NEAL FOR CONGRE	SS COMMITTEE		Date of Disbursement
Mailing Address 76 MAGNOLIA TERRACE			02 12 2014
City	State Zip Code		Transaction ID - D452944
SPRINGFIELD	MA 01108		Transaction ID : D153814
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Candidate Name		Category/	1000.00
Rep. Richard E. Neal		Type	1000.00
	nent For: 2014		
Senate X	Primary General Other (specify) ▼		
State: MA District: 02	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. SANFORD BISHOP FOR CONGR	ESS		Date of Disbursement
Mailing Address P. O. BOX 909			02 26 2014
,	State Zip Code		Transaction ID: D154061
COLUMBUS Purpose of Disbursement	GA 31902		
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Rep. Sanford D. Bishop Jr.		Туре	2000.00
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President	Other (specify)		
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C. SOUTHERLAND FOR CONGRESS	S		Date of Disbursement
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			02 19 2014
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City LYNN HAVEN Purpose of Disbursement 2014 Primary Contribution Candidate Name Rep. Steve Southerland II Office Sought: House Senate President State: FL District: 02	rent For: 2014 Primary General Other (specify) ▼	Category/ Type	Transaction ID : D153930 Amount of Each Disbursement this Period 2500.00

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Full Name (Last, First, Middle Initial)		NDE CC	Date of Disbursement	
· COMMITTEE TO RE-ELECT TRENT	FRANKS TO CONC	RESS		
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