Image# 13964829090 PAGE 1 / 210

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	-or Other Than An Autr	iorized Committee	Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
American Society of A	nesthesiologists Politi	cal Action Committee		
ADDRESS (number and street)	520 N. Northwest Highway			
Check if different				
than previously reported. (ACC)	Park Ridge		IL 60068	
2. FEC IDENTIFICATION NU	JMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CO	ODE 🛦
C C00255752		ETHIS NEW (N) OR	X AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb Report Due On:	20 (M2) May 20 (M	5) Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar	20 (M3) Jun 20 (M6		Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q	(C) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report (Q	Report for the:	Convention (12C)	Special (12S)	
January 31 Year-End Report (Y	Fleeties	n on	in the State	
July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	n on	in the State	
5. Covering Period 08		through 08	31 2012	]
I certify that I have examined th	is Report and to the best of	my knowledge and belief it is	true, correct and complete.	
Type or Print Name of Treasure	Mr. Thomas Conway			
Signature of Treasurer Mr. 7	Thomas Conway	[Electronically Filed]	Date 11 / 15 /	2013
NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Report to the penalties of 2	U.S.C. §437g.
Office Use Only			FEC FOI Rev. 12/	

FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		
American Society of Anesthesiolog	ists Political Action Committee	
Report Covering the Period: From:	3 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	08 / 31 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		1770455.33
(b) Cash on Hand at  Beginning of Reporting Period	1668956.55	
(c) Total Receipts (from Line 19)	223816.20	1027801.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1892772.75	2798257.11
7. Total Disbursements (from Line 31)	166489.39	1071973.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1726283.36	1726283.36
9. Debts and Obligations Owed <b>TO</b> 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 multical	ndidate committee. (see FEC FORM 1M)	
F	For further information contact:	
	Federal Election Commission	

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

Report Covering the Period: From: 08	01 2012 To:	08 31 2012 COLUMN B
I. Receipts	Total This Period	Calendar Year-to-Date
11. Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees		
(i) Itemized (use Schedule A)	178262.10	809172.80
(ii) Unitemized(iii) TOTAL (add	45554.10	212628.98
Lines 11(a)(i) and (ii)▶	223816.20	1021801.78
(b) Political Party Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	223816.20	1021801.78
12. Transfers From Affiliated/Other		0.00
Party Committees	0.00	
13. All Loans Received	0.00	0.00
Loan Repayments Received      Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)  16. Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	6000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
<ul><li>18. Transfers from Non-Federal and Levin Funds</li><li>(a) Non-Federal Account</li></ul>		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	223816.20	1027801.78
20. Total Federal Receipts	220010.20	102.557.10
(subtract Line 18(c) from Line 19)▶	223816.20	1027801.78

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:  (a) Allocated Federal/Non-Federal  ———————————————————————————————————	11110 1 01100	Calcilda Teal-10-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) N. 5 I I I I	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
(b) Other Federal Operating  Expenditures	2664.39	33322.92
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	2664.39	33322.92
. Transfers to Affiliated/Other Party		
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	93500.00	752325.00
Independent Expenditures	0.00	119225.83
(use Schedule E)  Coordinated Party Expenditures	0.00	113223.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(222 25.15525 1 /		7 7 7
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5325.00	7100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	-5000.00
(such as PACs)	0.00	0000.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	5325.00	2100.00
_		
Other Disbursements	65000.00	165000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
	2.00	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	
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
VIVI VIVI STEELING		
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	166489.39	1071973.75
Title Lord Birlinger		
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	166480 30	1071973 75
from Line 31)	166489.39	1071973.7

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	223816.20	1021801.78
4. Total Contribution Refunds (from Line 28(d))	5325.00	2100.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	218491.20	1019701.78
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2664.39	33322.92
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	2664.39	33322.92

FOR LINE NUMBER: **PAGE** 6 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c 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) Basem B. Abdelmalak M.D. Date of Receipt Mailing Address Dept of General Anesthesiology E-3 9500 Euclid Ave. 2012 City Zip Code State Transaction ID: C1807493 OH Cleveland 44195 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Cleveland Clinic Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) B. Ira H. Abels M.D. Date of Receipt Mailing Address 309 Mallard Rd 80 2012 02 City State Zip Code Transaction ID: C1802372 FL Weston 33327-1117 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Cleveland Clinic Florida Dept of Anest Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. John P. Abenstein M.D. Date of Receipt Mailing Address 10978 Eleventh Ave N.W. 2012 80 10 City Zip Code State Transaction ID: C1805296 MN Oronoco 55960-2110 Amount of Each Receipt this Period

Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 374.90 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

С

Occupation

Physician

83.30

FEC ID number of contributing

federal political committee.

Mayo Clinic Anes. Dept.

Name of Employer

Receipt For:

FOR LINE NUMBER: **PAGE** 7 OF 210 Use separate schedule(s) (check only one) X 11a 11b 12 11c

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) Amr E. Abouleish M.D., M.B. Date of Receipt Mailing Address 4303 Evergreen Elm Ct 2012 City Zip Code State Transaction ID: C1806720 TX Houston 77059-3120 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation University of Texas Medical Branch Professor Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) B. Jason R. Acosta M.D. Date of Receipt Mailing Address 1551 Conway Isle Circle 80 28 2012 City State Zip Code Transaction ID: C1816421 FL Belle Isle 32809 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist, MD Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. David G. Adams M.D. Date of Receipt Mailing Address 12324 River Oaks Pt 2012 80 80 City State Zip Code Transaction ID: C1804622 TN Knoxville 37922 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Univ. Tennessee Med. Ctr. Staff Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 833.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 210

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	1	i) I1b I4	11c 15	$\vdash$	12 16	17
ny information copied from such Reports and Statements may for commercial purposes, other than using the name and a	, , , ,					_			

A OI NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Bruce T Adelman M.D. Date of Receipt Mailing Address 4896 Woodcliff Hill Rd N 01 2012 City State Zip Code Transaction ID: C1808574 MI West Bloomfield 48323 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation Physician Henry Ford Hospital West Bloomfield Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) Full Name (Last, First, Middle Initial) B. Zulfiqar Ahmed M.B.,B.S. Date of Receipt Mailing Address 2865 Woodford Dr 80 2012 25 City State Zip Code Transaction ID: C1814552 Sterling Heights MI 48310 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesia Associates of Ann Arbor Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Karim Alarakhia M.D. Date of Receipt Mailing Address 10647 EMERALD CHASE DRIVE 2012 80 27 Zip Code City State Transaction ID: C1814786 FL Orlando 32836 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Anesthesiologists of Greater Orlando Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 1041.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 9 OF 210 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Stat or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) American Society of Anesthesiology	ogists Political Action Committe	ee
Associated Anesthesiologists, Inc.	State Zip Code OK 74132  C  Decupation Physician  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 23 2012  Transaction ID: C1812797  Amount of Each Receipt this Period  500.00
McFarland Clinic	State Zip Code IA 50046-8510  C  Description Innesthesiologist  Aggregate Year-to-Date ▼  328.00	Date of Receipt  08 01 2012  Transaction ID: C1808568  Amount of Each Receipt this Period  41.00
Anesthesia Assoc. of Ann Arbor	State Zip Code MI 48108  C  C  Cccupation  anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  08 30 2012  Transaction ID : C1816807  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number on	·	791.00

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Jonathan C. Anderson M.D. Date of Receipt Mailing Address 151 Jossie Ln 08 2012 City Zip Code State Transaction ID: C1804272 MT Kalispell 59901-6961 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Northern Rockies Anesthesia Consultant Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shane C. Angus A.A.-C, M. Date of Receipt Mailing Address 820 1st N.E. LL-150, Mail 25 80 2012 01 City State Zip Code Transaction ID: C1808570 DC Washington 20002 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Name of Employer Occupation Case Western Reserve University Program Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1330.40 Other (specify) Full Name (Last, First, Middle Initial) c. Shane C. Angus A.A.-C, M. Date of Receipt Mailing Address 820 1st N.E. 2012 80 15 LL-150, Mail 25 City Zip Code State Transaction ID: C1807494 DC Washington 20002 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Program Director Case Western Reserve University Receipt For: Aggregate Year-to-Date ▼ Primary General 1330.40 Other (specify) 266.30 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	NOMBER	: PAGE	III OF	210
(check on	ly one)			
X 11a	11b	11c	12	
13	14	15	16	17

	I Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full)  American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial)  James M. Anton M.D.		Date of Receipt
Mailing Address 2302 Paradise Canyon Dr.		08 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pearland	State Zip Code TX 77584-3297	Transaction ID : C1802544  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer  Greater Houston Health Network  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  400.00	_
Full Name (Last, First, Middle Initial)  Mark R. Applegate M.D.  Mailing Address 1281 Penny Lane		Date of Receipt
City Tallahassee	State Zip Code FL 32312	08 11 2012  Transaction ID : C1805472  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	750.00
Name of Employer Sheridan Healthcorp	Occupation  Anesthesiologist	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial)  C. Ross W. Appleyard M.D.		Date of Receipt
Mailing Address 416 Krameria St		08 10 2012
City Denver	State Zip Code CO 80220-5948	Transaction ID : C1805362  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer  Greater Colorado Anesthesia P.C.	Occupation Physician	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	1050.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 12 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Kayvan Ariani M.D. Date of Receipt Mailing Address 4007 Bermuda Grove Pl. 2012 City State Zip Code Transaction ID: C1811190 FL 32779-3193 Longwood Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation JLR medical group physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joel W. Arney M.D. Date of Receipt Mailing Address 4 Windy Hill Ct 80 19 2012 City State Zip Code Transaction ID: C1811193 Sunfish Lake MN 55077-1437 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Fairview Ridges Hospital Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brett L. Arron M.D. Date of Receipt Mailing Address 52 Lake Street 2012 80 15 City State Zip Code Transaction ID: C1807491 RΙ Wakefield 02879 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Narragansett Bay Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 1083.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
/ American Society of Anesthes	iologists Political Action Committee	<b>)</b>
Full Name (Last, First, Middle Initial)  A. Scott E. Ashcraft M.D.		Date of Receipt
Mailing Address 8900 Indian Creek Parkway		·
Suite 500		08 29 2012
City	State Zip Code	Transaction ID : C1816525
Overland Park	KS 66210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Midwest Anesthesia Associates	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  3. Noah A. Babins M.D.		Date of Receipt
Mailing Address 100 S Virginia Ave Unit 320		M = M / D = D / Y = Y = Y
		08 02 2012
City	State Zip Code	Transaction ID : C1802373
Winter Park	FL 32789-4344	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Arnold Palmer Medical Center	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		
Kristy Z. Baker M.D.		Date of Receipt
Mailing Address 1810 Bridgewater Drive		08 29 2012
City	State Zip Code	Transaction ID : C1816573
Heathrow	FL 32746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
JLR Medical Group	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
,		, , , , , , , , , , , , ,
TOTAL This Period (last page this line number	r only)	

	FOR LINE N	IUMBER:	PAGE	: 14 OF
Use separate schedule(s)	(check only o	one)		
for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12
,,	13	14	15	16

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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 Full Name (Last, First, Middle Initial) Frank A. Bakke M.D. Date of Receipt Mailing Address 3501 E Via Colonia Del Sol 2012 City Zip Code State Transaction ID: C1807704 Tucson ΑZ 85718-6065 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 federal political committee. Name of Employer Occupation Southern Arizona Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shawn E. Banks M.D. Date of Receipt Mailing Address 601 NE 36th St Apt 3407 08 2012 25 City State Zip Code Transaction ID: C1814547 FL Miami 33137-3976 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation University of Miami School of Medicine Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 583.10 Other (specify) Full Name (Last, First, Middle Initial) c. Carolyn F. Bannister M.D. Date of Receipt Mailing Address 5102 Chastleton Drive 2012 80 21 Zip Code City State Transaction ID: C1811761 GA Stone Mountain 30087 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С

	7					
SUBTOTAL of Receipts This Page (optional)			,		1366.60	
TOTAL This Period (last page this line number	r only)		,			

666.40

Occupation

Medical Doctor

Aggregate Year-to-Date ▼

federal political committee.

Other (specify)

**Emory University School of Medicine** 

General

Name of Employer

Primary

Receipt For:

FOR LINE NUMBER: PAGE 15 OF (check only one) X 11a 11b 12 11c

210 Use separate schedule(s) 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) David K. Barclay M.D. Date of Receipt Mailing Address 8080 Barony Point 09 2012 City Zip Code State Transaction ID: C1805266 Mattawan MI 49071 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Kalamazoo Anesthesiology Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew M. Barnett M.D. Date of Receipt Mailing Address 2000 Kehrsdale Ct. 80 10 2012 City State Zip Code Transaction ID: C1805358 Chesterfield MO 63005-6515 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Western Anesthesiology Associates, Inc anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Renee A. Baugh M.D. Date of Receipt Mailing Address 3173 Chestnut Run Dr 2012 80 31 City Zip Code State Transaction ID: C1817308 MI Bloomfield 48302-1112 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Anesthesia Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 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) Michael L. Beaudrie D.O. Date of Receipt Mailing Address 1101 W Clairemont Ave Ste 2C Eau Claire Anes 30 2012 City Zip Code State Transaction ID: C1816820 WI Eau Claire 54701-6161 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Eau Claire Anes Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles R. Beckenstein M.D. Date of Receipt Mailing Address 610 S Rome Ave Apt 602 80 13 2012 City State Zip Code Transaction ID: C1805563 FL Tampa 33606-2589 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation UniCom Anesthesia Associates, P.A. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.20 Other (specify) Full Name (Last, First, Middle Initial) c. Roderick W. Beer M.D. Date of Receipt Mailing Address 3966 Holden Dr. 80 20 2012 City Zip Code State Transaction ID: C1811249 MI Ann Arbor 48103-9415 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of Ann Arbor Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 791.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Eileen V. Begin M.D. Date of Receipt Mailing Address 110 Irving St. NW #G-226 2012 25 City Zip Code State Transaction ID: C1814548 DC Washington 20010-3017 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Washington Hospital Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.20 Other (specify) Full Name (Last, First, Middle Initial) B. Terry Bejot M.D. Date of Receipt Mailing Address 6911 Van Dorn, #2 80 2012 80 City State Zip Code Transaction ID: C1804662 NE Lincoln 68506 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Assoc. Anes. Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeffrey P. Bellefleur M.D. Date of Receipt Mailing Address 5195 Vincennes Ct 2012 80 22 City Zip Code State Transaction ID: C1812760 MI Bloomfield Hills 48302-2557 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation SOAA Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1041.60 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	<b>X</b> 11a	11b	11c	12
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	Statements may not be sold or used by any personance and address of any political committee to	
NAME OF COMMITTEE (In Full)  American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Richard E. Belmont Jr., D.O.  Mailing Address E4155 Nicole Ct  City Eleva  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For:  Primary General Other (specify)	State Zip Code WI 54738-9446  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  08 30 2012  Transaction ID: C1816821  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Scott M. Berger M.D.  Mailing Address 821 McKinley Avenue  City  Louisville  FEC ID number of contributing federal political committee.  Name of Employer  Colorado Permanente Medical Group  Receipt For:  Primary  General  Other (specify)	State Zip Code CO 80027  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Mordechai Bermann M.D.  Mailing Address 7 Plymouth Ln  City  East Brunswick  FEC ID number of contributing federal political committee.  Name of Employer  Rutgers  Receipt For:  Primary  General  Other (specify)	State Zip Code NJ 08816-3322  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  332.80	Date of Receipt  08 16 2012  Transaction ID : C1808532  Amount of Each Receipt this Period  41.60
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1041.60
TOTAL This Period (last page this line number	only)	

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Detailed Summary Page	×	11a		11b		11c		12	
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	Statements may not be sold or used by any perse e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  American Society of Anesthesi	ologists Political Action Committee	; 
Full Name (Last, First, Middle Initial)  Aaron P. Betel M.D.  Mailing Address 34488 Old Timber  City Farmington  FEC ID number of contributing federal political committee.  Name of Employer  AAKC  Receipt For:  Primary General Other (specify)	State Zip Code MI 48331  C  Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O8 31 2012  Transaction ID: C1817310  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Joel L. Bez D.O.  Mailing Address 3806 Viceroy Dr  City Okemos  FEC ID number of contributing federal political committee.  Name of Employer Lansing Anesthesiologist P.C.  Receipt For:  Primary General Other (specify)	State Zip Code MI 48864-3843  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 23 2012  Transaction ID : C1812792  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Anila Bhatti M.B.,B.S.  Mailing Address 5105 Franklin Road  City Bloomfield Hills  FEC ID number of contributing federal political committee.  Name of Employer mednax  Receipt For:  Primary Other (specify)   General	State Zip Code MI 48302  C  Occupation anesthesiology  Aggregate Year-to-Date ▼	Date of Receipt  08 22 2012  Transaction ID : C1812773  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1000.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e 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)  Julian S Bick M.D.		Date of Receipt
Mailing Address 4100B Oriole PI		08 11 2012
City	State Zip Code	Transaction ID: C1805373
Nashville	TN 37215-3514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.30
Name of Employer	Occupation	+
Vanderbilt Univ Med Ctr	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	666.40	
Full Name (Last, First, Middle Initial)  Paul C. Bicket M.D.		Date of Receipt
Mailing Address 13074 S Santa Fe Ave		08 24 2012
City	State Zip Code	Transaction ID : C1814511
Edmond	OK 73025-1574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Affiliated Anesthesiologists	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2929 Edgehill Rd		08 21 2012
City	State Zip Code	Transaction ID : C1811764
Cleveland Heights	OH 44118-2017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer	Occupation	
University Hospitals of Cleveland	Anesthesiologist Assistant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	331.00	
SUBTOTAL of Receipts This Page (optional)		624.90
TOTAL This Period (last page this line number	only)	

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Detailed Summary Page	X 11a 11b		11c	1	2				
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	Statements may not be sold or used by any perse e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  American Society of Anesthesi	ologists Political Action Committee	; 
Full Name (Last, First, Middle Initial) Robert F. Birch M.D.  Mailing Address 582 Summit Ave.  City St. Paul  FEC ID number of contributing federal political committee.  Name of Employer Fairview Ridges Hospital Receipt For:  Primary General Other (specify)	State Zip Code MN 55102-2654  C  Occupation Physician  Aggregate Year-to-Date ▼  332.80	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Timothy M. Bittenbinder M.D.  Mailing Address 2401 South 31st St., Dept. of  MS - 20 - D304  City  Temple  FEC ID number of contributing federal political committee.  Name of Employer  Texas AM College of Medicine Scott an  Receipt For:  Primary  General  Other (specify)	Anes  State Zip Code TX 76508  C  Occupation physician  Aggregate Year-to-Date ▼  416.50	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Joshua G. Black M.D.  Mailing Address 6839 S Canton Ave  City Tulsa  FEC ID number of contributing federal political committee.  Name of Employer  Associated Anesthesiologist Inc.  Receipt For:  Primary General Other (specify)	State Zip Code OK 74136  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1124.90
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) Will Blankenship M.D. Date of Receipt Mailing Address 2215 viewmont way w 2012 25 City Zip Code State Transaction ID: C1814545 WA Seattle 98199 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation swedish medical group anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carol A. Blum M.D. Date of Receipt Mailing Address 16608 NE 113th St 80 2012 30 City State Zip Code Transaction ID: C1816778 MO Liberty 64068-8281 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation self anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert A. Blumberg D.O. Date of Receipt Mailing Address 31677 Mountain View Rd 2012 80 31 City Zip Code State Transaction ID: C1817311 MI Franklin 48025-1244 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Anesthesia Services, P.C. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER:	PAGE	: 23 OF
Use separate schedule(s)	(check only	y one)		
for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12
	13	14	15	16

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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 Anesthesi	ologists Political Action Committee	)
Full Name (Last, First, Middle Initial) Kenneth J. Bochenek M.D.  Mailing Address 2000 Spruce Dr  City Lafayette  FEC ID number of contributing federal political committee.  Name of Employer Anesthesiology Associates, P.C.  Receipt For: Primary General Other (specify)	State Zip Code IN 47905-3944  C  Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  750.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Kenneth J. Bochenek M.D.  Mailing Address 2000 Spruce Dr  City  Lafayette  FEC ID number of contributing federal political committee.  Name of Employer  Anesthesiology Associates, P.C.  Receipt For:  Primary  General  Other (specify)	State Zip Code IN 47905-3944  C  Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  750.00	Date of Receipt  08 20 2012  Transaction ID : C1811647  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Kenneth J. Bochenek M.D.  Mailing Address 2000 Spruce Dr  City Lafayette  FEC ID number of contributing federal political committee.  Name of Employer Anesthesiology Associates, P.C.  Receipt For:  Primary General Other (specify)	State Zip Code IN 47905-3944  C  Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  750.00	Date of Receipt  08 31 2012  Transaction ID : C1817346  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
TOTAL This Period (last page this line numbe	r only)	

# SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17
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NAME OF COMMITTEE (In Full) American Society of Anesthesiology	gists Political Action Committe	ee
Name of Employer O Self A	State Zip Code CA 90638-1425  C ccupation nesthesiologist ggregate Year-to-Date ▼	Date of Receipt  08 31 2012  Transaction ID : C1817312  Amount of Each Receipt this Period  250.00
Name of Employer Sheridan Healthcorp Ar	State Zip Code FL 33330-4742  C ccupation nesthesiologist ggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer  St. Johns Clinic Anesthesiology  A  Possint For:	State Zip Code MO 65809-2348  C ccupation nesthesiologist ggregate Year-to-Date ▼ 666.40	Date of Receipt  M M M COST 2012  Transaction ID: C1802542  Amount of Each Receipt this Period  83.30
SUBTOTAL of Receipts This Page (optional)	•	583.30
TOTAL This Period (last page this line number only	)	

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers 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 Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) Peter J. Boosalis M.D.  Mailing Address 515 S. Broadway St.  City Stillwater  FEC ID number of contributing federal political committee.  Name of Employer  Valley Anesthesiology Consultants  Receipt For:  Primary General Other (specify)	State Zip Code MN 55082  C  Occupation MD  Aggregate Year-to-Date ▼	Date of Receipt  M M / D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  John P Borrego M.D.  Mailing Address 8332 E. Heatherbrae Dr.  City  Scottsdale	State Zip Code AZ 85251	Date of Receipt  08 21 2012  Transaction ID : C1811779  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Valley Anesthesiology Consultants  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation anesthesiologist  Aggregate Year-to-Date ▼  500.00	500.00
Full Name (Last, First, Middle Initial) Gregory W. Bouska M.D.  Mailing Address 3000 Bogey Cir SE  City Owens Cross Roads  FEC ID number of contributing federal political committee.  Name of Employer Comprehensive Anesthesia Associate  Receipt For: Primary General Other (specify)	State Zip Code AL 35763-8453  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  08 28 2012  Transaction ID : C1816395  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1750.00
TOTAL This Period (last page this line numbe	r only)	

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26 OF 210 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) Daniel J. Bowman M.D. Date of Receipt Mailing Address 1101 W Clairemont Ave Ste 2C Eau Claire Anes 30 2012 City Zip Code State Transaction ID: C1816823 WI Eau Claire 54701-6161 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Eau Claire Anes Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Frances Boyette M.D. Date of Receipt Mailing Address 8225 Marsh Pointe Dr. 80 2012 17 City State Zip Code Transaction ID: C1811241 AL Montgomery 36117 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. James R. Bradford M.D. Date of Receipt Mailing Address 900 Peeler Street 30 2012 PO Box 4095 80 City Zip Code State Transaction ID: C1816603 MI Kalamazoo 49003-4095 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Kalamazoo Anesthesiology, P.C. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person 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)  John G. Brock-Utne M.D., Ph.D  Mailing Address 300 Pasteur Drive Anes. Dep	ot.	Date of Receipt
		08 14 2012
City	State Zip Code	Transaction ID : C1807454
Stanford	CA 94305	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Stanford Univ. Med. Ctr.	Professor	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Richard Brouillard A.A.		Date of Receipt
Mailing Address 57 Executive Park S  Dept of Anes		08 08 2012
City	State Zip Code	Transaction ID : C1804273
Atlanta	GA 30322-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.30
Name of Employer	Occupation	1
Emory University School of Medicine	AA Pprogram Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	499.80	
Full Name (Last, First, Middle Initial) C. Curtis C. Brown M.D.		Date of Receipt
Mailing Address 457 Holly Berry Cir		08 14 2012
City Blythewood	State         Zip Code           SC         29016-8031	Transaction ID : C1807433  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Anes. Consultants of Columbia	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1333.30
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NAME OF COMMITTEE (In Full) American Society of Anesthesio	logists Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Kurt T. Budenbender D.O.		Date of Receipt
Mailing Address 1850 N. Central Ave Ste 1600		M = M / D = D / Y = Y = Y
Valley Anes. Consultants, LTD		08 16 2012
City Phoenix	State Zip Code AZ 85004	Transaction ID : C1808533
	A2 85004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.30
Name of Employer	Occupation	
Valley Anesthesia Consultants, LTD	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	666.40	
Full Name (Last, First, Middle Initial)  Frederick W. Burgess M.D., Ph.D		Date of Receipt
Mailing Address 569 Fruit Hill Ave		08 25 2012
City	State Zip Code	Transaction ID : C1814546
North Providence	RI 02911-2134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Providence VAMC	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)  James Burkman M.D.		Date of Receipt
Mailing Address 601 Belmont Ave E Apt A12		M = M / D = D / Y = Y = Y
City	State Zip Code	08 13 2012
Seattle	WA 98102-4801	Transaction ID : C1805560  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer	Occupation	
Physicians Anesthesia Service	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	332.80	
SUBTOTAL of Receipts This Page (optional)		224.90
TOTAL This Period (last page this line number of	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) Troy Caldwell M.D. Date of Receipt Mailing Address 1122 Larchmont Ln 2012 20 City Zip Code State Transaction ID: C1811734 OK Nichols Hills 73116 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Affiliated Anesthesiologists LLC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Frederick Campbell III, M.D. Date of Receipt Mailing Address 4100 Park Forest Dr Ste 210 80 16 2012 City State Zip Code Transaction ID: C1808518 MI Traverse City 49684-7306 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Traverse Anesthesia Associates, PC physician anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen D. Campbell M.D. Date of Receipt Mailing Address 545 Beverly Dr. 80 80 2012 City Zip Code State Transaction ID: C1804203 SC Summerville 29485-8175 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation anesthesia associates of charleston anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1333.30 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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	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  Daniel Campos III, M.D.  Mailing Address 48 Schooner Ridge Rd  City Cumb Foreside  FEC ID number of contributing federal political committee.  Name of Employer Spectrum Medical Group Receipt For: Primary General Other (specify)	State Zip Code ME 04110-1127  C Occupation Physician  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M / 28 2012  Transaction ID: C1816300  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Keith A. Candiotti M.D.  Mailing Address 940 S Shore Dr  City  Miami  FEC ID number of contributing federal political committee.  Name of Employer University of Miami Miller School of M  Receipt For:	State Zip Code FL 33141-2412  C Occupation Anesthesiologists  Aggregate Year-to-Date ▼	Date of Receipt  08 10 2012  Transaction ID : C1805275  Amount of Each Receipt this Period  250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Nicholas Capone D.O.  Mailing Address 9146 Bay Point Drive  City Orlando  FEC ID number of contributing federal political committee.  Name of Employer  JLR Medical Group  Receipt For:  Primary General Other (specify) ▼	State Zip Code FL 32819  C  Occupation Anesthesiologist  Aggregate Year-to-Date  328.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	791.00
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NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  James Carlsen M.D.  Mailing Address 1958 Common Way Rd		Date of Receipt
		08 27 2012
City	State Zip Code	Transaction ID : C1816249
Orlando	FL 32814-6332	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
JLR Medical Group	Anesthesiology	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Craig L. Carlson M.D.		Date of Receipt
Mailing Address 5500 S Spy Glass Cir		M = M / D = D / Y = Y = Y
City	State Zip Code	08 24 2012 Transaction ID : C1814512
Sioux Falls	SD 57108-6406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer ANESTH ASSOC	Occupation ANESTHESIOLOGIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  C. John Carney M.D.		Date of Receipt
Mailing Address 534 Ridgeview Drive		08 01 2012
City	State Zip Code	Transaction ID : C1808582
Erie	PA 16505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer	Occupation	
North American Partners in Anesthesia	Anesthesiologist	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify)	664.00	
SUBTOTAL of Receipts This Page (optional)		833.00
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) Corey M. Carpenter M.D. Date of Receipt Mailing Address 845 Secret Garden Dr 01 2012 City Zip Code State Transaction ID: C1808539 TN Chattanooga 37421-7440 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shawn M. Carson ,PACBuilde Date of Receipt Mailing Address 2139 Auburn Avenue 80 2012 07 City State Zip Code Transaction ID: C1804170 OH Cincinnati 45219 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **AACPMA** MD Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Alvin R Castillo M.D. Date of Receipt Mailing Address 40 Jamestown Rd 30 2012 80 City Zip Code State Transaction ID: C1816633 WV Charleston 25314-1976 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation General Anesthesia Services, Inc anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 541.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)  American Society of Anesthesi	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Chun K. Chan M.D.  Mailing Address 168 Riverwalk PI  City Memphis  FEC ID number of contributing federal political committee.  Name of Employer Medical Anesthesia Group  Receipt For:  Primary General Other (specify)	State Zip Code TN 38103  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  291.20	Date of Receipt  08 28 2012  Transaction ID: C1816280  Amount of Each Receipt this Period  41.60
Full Name (Last, First, Middle Initial) Claire L. Chandler A.AC Mailing Address 1253 Citadel Dr NE  City Atlanta  FEC ID number of contributing federal political committee.  Name of Employer Emory Healthcare  Receipt For:  Primary General Other (specify)	State Zip Code GA 30324  C  Occupation Anesthesiologist Assistant  Aggregate Year-to-Date ▼  666.40	Date of Receipt  08 15 2012  Transaction ID : C1807468  Amount of Each Receipt this Period  83.30
Full Name (Last, First, Middle Initial)  John C. Chatelain M.D.  Mailing Address 1319 S.9th St.  City Fargo  FEC ID number of contributing federal political committee.  Name of Employer  Sanford Health  Receipt For:  Primary  Other (specify)   General	State Zip Code ND 58103-4105  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  410.60	Date of Receipt  08 18 2012  Transaction ID : C1811156  Amount of Each Receipt this Period  41.60
SUBTOTAL of Receipts This Page (optional)	•	166.50
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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 Full Name (Last, First, Middle Initial) John C. Chatelain M.D. Date of Receipt Mailing Address 1319 S.9th St. 2012 City Zip Code State Transaction ID : C1811157 ND Fargo 58103-4105 Amount of Each Receipt this Period FEC ID number of contributing 369.00 federal political committee. Name of Employer Occupation Sanford Health Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 410.60 Other (specify) Full Name (Last, First, Middle Initial) B. Jack J. Chavez M.D. Date of Receipt Mailing Address 7319 Lorimar Pl. 08 2012 20 City State Zip Code Transaction ID: C1811314 TN Knoxville 37919-8168 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation University of Tennessee Department of Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wen J. Chen M.D. Date of Receipt Mailing Address 2066 Fostoria CIR 2012 80 21 City State Zip Code Transaction ID: C1811762 CA Danville 94526 Amount of Each Receipt this Period FEC ID number of contributing 41.60 С federal political committee. Name of Employer Occupation University of California - San Franci Resident Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) 910.60 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 35 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Bayer P. Cheng M.D. Date of Receipt Mailing Address 1118 Ross Clark Cir., #700 2012 26 City Zip Code State Transaction ID: C1814610 Dothan AL 36301 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **ACMG** M.D. Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Hao Cheng M.B., B.S. Date of Receipt Mailing Address 2400 Haverford Dr. 80 2012 31 City State Zip Code Transaction ID: C1817314 MI Troy 48098-2378 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Services, P.C. **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Pramod K. Chetty M.D. Date of Receipt Mailing Address 750 NE 13th St Ste 200 80 80 2012 City Zip Code State Transaction ID: C1804644 OK Oklahoma City 73104-5024 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Oklahoma University Health Sciences Ce Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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A NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Elie J. Chidiac M.D. Date of Receipt Mailing Address 1612 Apple Ln. 2012 31 City Zip Code State Transaction ID: C1817315 Bloomfield Hills MI 48302-1303 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Wayne State University School of Medic Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Jeffrey K. Clark M.D. Date of Receipt Mailing Address 1835 Lakeview Ct 80 31 2012 City State Zip Code Transaction ID: C1817316 Bloomfield Hills MI 48304-2440 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **Detroit Medical Center ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard N. Cochrane M.D. Date of Receipt Mailing Address 1219 Ponderosa Dr N 30 2012 80 City Zip Code State Transaction ID: C1816824 WI Eau Claire 54701-7431 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self 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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210 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) Stacy A. Coffin M.D. Date of Receipt Mailing Address 404 Hawthorne Rd., N. 2012 25 City Zip Code State Transaction ID: C1814551 MN Duluth 55812-1540 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation St Lukes Hospital of Duluth anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. David J. Cohen M.D. Date of Receipt Mailing Address 32630 Bingham Rd 80 2012 01 City State Zip Code Transaction ID: C1808579 MI Bingham Farms 48025-2430 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation American Anesthesiology of Michigan Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 787.00 Other (specify) Full Name (Last, First, Middle Initial) c. John M. Collins M.D. Date of Receipt Mailing Address 12012 Timberlake Dr 2012 80 12 City Zip Code State Transaction ID: C1805541 OH Cincinnati 45249-1332 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of Cincinnati Anesthesiologist, Pain specialist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1041.00

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Craig M. Combs M.D.  Mailing Address 1924 Alcoa Hwy # U109  City Knoxville  FEC ID number of contributing federal political committee.  Name of Employer Univ of TN Medical Center Anes Dept  Receipt For:  Primary General Other (specify)	State Zip Code TN 37920-1511  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 06 2012  Transaction ID : C1803163  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Robert M. Coon M.D.  Mailing Address 5339 S. Toledo  City Tulsa FEC ID number of contributing federal political committee.  Name of Employer AAI Tulsa  Receipt For: Primary General Other (specify)	State Zip Code OK 74135-6201  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 11 2012  Transaction ID : C1805505  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Lisa T. Cooper M.D.  Mailing Address 7134 Buena Vista Ct.  City  West Bloomfield  FEC ID number of contributing federal political committee.  Name of Employer  AAKC  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48322  C Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼	Date of Receipt  M M M / 2012  Transaction ID : C1817317  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1250.00
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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) Charles A. Cotton M.D. Date of Receipt Mailing Address 9009 Bella Vista Lane 2012 21 City Zip Code State Transaction ID: C1811747 OK OKC 73131 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Affiliated Anesthesiologists Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheryl G. Cowens M.D. Date of Receipt Mailing Address 3801 Wilderness Trl. 80 2012 07 City State Zip Code Transaction ID: C1803238 KY Louisville 40299 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Williams and Wagner PSC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Grant T. Cravens M.D. Date of Receipt Mailing Address 2900 Thomas Ave S Apt 2130 2012 80 26 City State Zip Code Transaction ID: C1814634 MN Minneapolis 55416 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Midwest Anesthesiologists, P.A. anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 40 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c 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) Robert A. Crone M.D. Date of Receipt Mailing Address 124 E. Cherry Dr. 2012 City Zip Code State Transaction ID: C1810516 TN Memphis 38117-3111 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Medical Anesthesia Group, PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian L. Cross M.D. Date of Receipt Mailing Address P.O. Box 3010 80 2012 12 City State Zip Code Transaction ID: C1805539 CA Tustin 92781 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Susan G. Curling M.D. Date of Receipt

Mailing Address 2727 Kirby Dr Apt 11D 2012 80 17 City Zip Code State Transaction ID: C1810592 TX Houston 77098-1152 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation North Houston Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 749.40 Other (specify)

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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) Stephan R. Curry M.D. Date of Receipt Mailing Address 292 Cumberland Head Rd 2012 0.3 City Zip Code State Transaction ID: C1802474 NY Plattsburgh 12901-6708 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Champlain Valley Physicians Hospital M Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) **B.** David E. Cutting M.D. Date of Receipt Mailing Address 1889 Fish Hatchery Court 80 30 2012 City State Zip Code Transaction ID: C1816659 FL Palm Harbor 34684-1628 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation AAPC Anesthesia **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Armando D'Arduini M.D. Date of Receipt Mailing Address 259 1st St 2012 80 24 Dept of Anes City Zip Code State Transaction ID: C1814505 NY Mineola 11501 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Nassau Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 491.60 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) Michael Danic M.D. Date of Receipt Mailing Address 14726 Fox 2012 City Zip Code State Transaction ID: C1805562 48239-3163 Redford MI Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Great Lakes Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 583.10 Other (specify) Full Name (Last, First, Middle Initial) B. Sharon M. Darrow D.O. Date of Receipt Mailing Address 1115 Huntington Ave 80 2012 27 City State Zip Code Transaction ID: C1814685 Nichols Hills OK 73116-6212 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Northwest Anesthesia anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.20 Other (specify) Full Name (Last, First, Middle Initial) c. Anand S. Dash M.D. Date of Receipt Mailing Address 1915 Wrocklage Ave Unit 306 2012 80 29 Unit 306 City State Zip Code Transaction ID: C1816504 KY Louisville 40205-2172 Amount of Each Receipt this Period FEC ID number of contributing 41.60 С federal political committee. Name of Employer Occupation St. Joseph Valley Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.20 Other (specify) 208.20 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 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) C.Phillip deJarnette M.D. Date of Receipt Mailing Address 888 Guinevere Way SW 2012 City State Zip Code Transaction ID: C1812835 GΑ Lilburn 30047-5449 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation N.A.P. Associate Chair Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. James K. DelloRusso M.D. Date of Receipt Mailing Address 18572 Garnet Ln. 80 2012 06 City Zip Code State Transaction ID: C1803184 Huntington Beach CA 92648 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation

	Self  Receipt For:  Primary General  Other (specify) ▼	Anesthesiologist  Aggregate Year-to-Date ▼  1000.00	
С.	Full Name (Last, First, Middle Initial)  Allen Dennis M.D.  Mailing Address 14857 Holly Leaf Dr  City Frisco  FEC ID number of contributing federal political committee.  Name of Employer  Center for Spine Care  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 75035-7451  C  Occupation Physician  Aggregate Year-to-Date ▼  666.40	Date of Receipt  M M M / D P / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Any inforr 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) Abhijit Desai M.D. Date of Receipt Mailing Address 74 Clairmont St 01 2012 City State Zip Code Transaction ID: C1808564 01106-1002 MA Longmeadow Amount of Each Receipt this Period FEC ID number of contributing C 41.00 federal political committee. Name of Employer Occupation Milford Anesthesia Associates, Inc Ane anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) Full Name (Last, First, Middle Initial) B. Louis J. DeWild M.D. Date of Receipt Mailing Address 1215 Pleasant St., #400 08 2012 07 City State Zip Code Transaction ID: C1803234 Des Moines IΑ 50309 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Associated Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. John F. Di Capua M.D. Date of Receipt Mailing Address 74 Byram Ridge Road 2012 80 22 City State Zip Code Transaction ID: C1812095 NY Armonk 10504-1210 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation North Shore University Hospital Anesth Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 333.20 Other (specify) 624.30 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) Christina D. Diaz M.D. Date of Receipt Mailing Address 2433 N Lefeber Ave 2012 City Zip Code State Transaction ID: C1810596 WI Milwaukee 53213-1219 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Medical College of Wisconsin Children Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) **B.** Christian Diez M.D. Date of Receipt Mailing Address 7915 SW 55 Avenue 80 16 2012 City State Zip Code Transaction ID: C1808519 FL Miami 33143 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation University of Miami Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Gary J. DiLisio M.D. Date of Receipt Mailing Address 324 Gannett Dr Ste 200 2012 80 01 City Zip Code State Transaction ID: C1808561 MF South Portland 04106-3266 Amount of Each Receipt this Period FEC ID number of contributing 83.00 С federal political committee. Name of Employer Occupation Spectrum Medical Management Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 664.00 Other (specify) 207.90 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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46 OF 210 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) Hannah M. Dillon M.D. Date of Receipt Mailing Address 317 E. Canyon View Dr. 2012 City Zip Code State Transaction ID: C1806658 Tucson ΑZ 85704 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Old Pueblo Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cain E. Dimon M.D. Date of Receipt Mailing Address 25450 Franklin Park Dr 80 25 2012 City State Zip Code Transaction ID: C1814542 MI Franklin 48025 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation American Anesthesia of Michigan Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. John M. Dinger M.D. Date of Receipt Mailing Address 246 Cedar Heights Dr 30 2012 80 City State Zip Code Transaction ID: C1816811 PΑ Duncansville 16635-4627 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Spring Cove Medical Services, P.C. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 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) Timothy J. Doles M.D. Date of Receipt Mailing Address 9149 Brenham Ct 2012 City State Zip Code Transaction ID: C1811251 Montgomery AL 36117-0923 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Montgomery Anesthesia Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas A. Dosland M.D. Date of Receipt Mailing Address 9780 Hidden Glade Rd 80 2012 25 City State Zip Code Transaction ID: C1814597 Saint Paul MN 55110 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Associated Anesthesiologists, PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kolleen C. Dougherty M.D. Date of Receipt Mailing Address 30 Richards St. 30 2012 80 City Zip Code State Transaction ID: C1816609 MF South Portland 04106-6530 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Spectrum Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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or for commercial purposes, other than using the	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Donald D. Downs M.D.  Mailing Address 7351 Oliver Woods Dr SE  City Grand Rapids  FEC ID number of contributing federal political committee.  Name of Employer Anesthesia Practice Consultants  Receipt For: Primary Other (specify)	State Zip Code MI 49546-9707  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  749.10	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John J. Doyle M.D.  Mailing Address 120 N River Dr  City St Augustine  FEC ID number of contributing federal political committee.  Name of Employer Anesthesia Associates of Clay County  Receipt For: Primary General Other (specify)	State Zip Code FL 32095-8895  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John Draper M.D.  Mailing Address 10616 Casador Del Oso NE  City Albuquerque  FEC ID number of contributing federal political committee.  Name of Employer Anesthesia Specialists of Albuquerque  Receipt For:  Primary General Other (specify)	State Zip Code NM 87111-6920  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	833.30
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  Zoran Drmanovic M.D.  Mailing Address 5600 SW Bellflower Ct.		Date of Receipt
		08 01 2012
City	State Zip Code	Transaction ID : C1808566
Palm City	FL 34990	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
Sheridan Healthcorp	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	328.00	
Full Name (Last, First, Middle Initial)  3. Wendy W. Duchene M.D.		Date of Receipt
Mailing Address 5512 Aberdeen Rd		08 26 2012
City	State Zip Code	Transaction ID: C1814616
Fairway	KS 66205-2607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Truman Medical Center	anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial)  C. Roman Dudaryk M.D.		Date of Receipt
Mailing Address 1800 NW 10th Ave # T-239		08 13 2012
City	State Zip Code FL 33136-1018	Transaction ID : C1805569
Miami	FL 33136-1018	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Ryder Traum Center	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	791.00
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NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	9
Full Name (Last, First, Middle Initial)  D'Ann Duesterhoeft M.D.		Date of Receipt
Mailing Address 5227 Glenbrook Dr		08 15 2012
City Vienna	State Zip Code WV 26105-3169	Transaction ID : C1807578  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer  United Anesthesia, Inc  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  David L. Dugan M.D.  Mailing Address 14207 Independence Ct		Date of Receipt
City Basehor	State Zip Code KS 66007-5203	Transaction ID : C1804693  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Hospital	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Christopher J. Dunkerley M.D.		Date of Receipt
Mailing Address 49 McCormack Rd		08 09 2012
City Slingerlands	State Zip Code NY 12159-9647	Transaction ID : C1805258  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer AGA	Occupation  Anesthesiologist	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line numbe	er only)	

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NAME OF COMMITTEE (In Full)  American Society of Anesthes	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial)  Steve A. Dunn M.D.  Mailing Address 194 Boulder Dr.		Date of Receipt
Mailing Address 194 Boulder Dr.		08 25 2012
City	State Zip Code	Transaction ID : C1814532
Muskegon	MI 49444-7748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Lakeshore Anesthesia Associates	Anesthesiologist	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  3. Jeffrey W. Dyer-Smith M.D.  Mailing Address area Marchineles		Date of Receipt
Mailing Address 3500 Mountain Lane		08 31 _ 2012 _
City	State Zip Code	Transaction ID : C1817623
Mountain Brook	AL 35213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Southern Perioperative Services, P.C.	Occupation Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. Jane Easdown M.D.		Date of Receipt
Mailing Address 5106 Cornwall Dr		08 01 2012
City Brentwood	State Zip Code TN 37027-5119	Transaction ID : C1808543  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	-
Vanderbilt University Medical Center	associate Professor of Anesthesiology	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	328.00	
SUBTOTAL of Receipts This Page (optional)		641.00
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 th	Statements may not be sold or used by any pers ne 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 Anesthesi	ologists Political Action Committee	;
Full Name (Last, First, Middle Initial) Anthony L. Edelman M.D.  Mailing Address, 1300 Boldwin Avo.		Date of Receipt
Mailing Address 1309 Baldwin Ave		08 10 2012
City	State Zip Code	Transaction ID : C1805363
Ann Arbor	MI 48104-3624	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer	Occupation	
Anesthesia Associates of Ann Arbor	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General  Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial)  3. David J. Egli M.D.		Date of Receipt
Mailing Address 120 Red Oak Ln.		08 24 2012
City	State Zip Code MN 56001	Transaction ID : C1814513
Mankato	MN 56001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
MANKATO ANES ASSOC	ANESTHESIOLOGIST	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  . Beth A. Elliott M.D.		Date of Receipt
Mailing Address Anesthesia Dept. 200 First St. S.W.		08 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rochester	State Zip Code MN 55905	Transaction ID : C1812067
FEC ID number of contributing	C	Amount of Each Receipt this Period 250.00
federal political committee.		
Name of Employer	Occupation	
Mayo Clinic Receipt For:	Physician	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		975.00
TOTAL This Period (last page this line number	· only)	

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	·
Full Name (Last, First, Middle Initial)  Sean L. Elliott D.O.  Mailing Address 1129 Surrey Hills Road  City Saint Louis  FEC ID number of contributing federal political committee.  Name of Employer  Western Anesthesiology Associates  Receipt For:  Primary General Other (specify)	State Zip Code MO 63117  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Kenneth Elmassian D.O.  Mailing Address 2399 Pine Hollow Dr.  City  East Lansing  FEC ID number of contributing federal political committee.  Name of Employer Ingham Regional Medical Center  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code MI 48823  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  666.40	Date of Receipt  08 03 2012  Transaction ID: C1802473  Amount of Each Receipt this Period  83.30
Eull Name (Last, First, Middle Initial)  Steven W. Emmons M.D.  Mailing Address 6508 Cypress Holw  City Edmond  FEC ID number of contributing federal political committee.  Name of Employer oklahoma university health science cen Receipt For:  Primary General Other (specify) ▼	State Zip Code OK 73034  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / 23 2012  Transaction ID : C1813480  Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	833.30
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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 2012 City Zip Code State Transaction ID: C1810595 NY New York 10029 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Mount Sinai School of Medicine Physician Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) B. Gregory L. Erb M.D. Date of Receipt Mailing Address 14905 W. 60th St 80 03 2012 City State Zip Code Transaction ID: C1802459 KS Shawnee 66216 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Midwest Anesthesia Associates Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Luis Esparza M.D. Date of Receipt Mailing Address 2810 N Swan Rd Ste 100 2012 80 17 City Zip Code State Transaction ID: C1811259 ΑZ Tucson 85712-6300 Amount of Each Receipt this Period FEC ID number of contributing 85.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST OLD PUEBLO ANESTH** Receipt For: Aggregate Year-to-Date ▼ Primary General 435.00 Other (specify) 626.60 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	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial)  Monique Espinosa M.D.  Mailing Address PO Box 16370 (M-820)  Anes. Dept.  City  Miami  FEC ID number of contributing federal political committee.  Name of Employer  University of Miami  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 33101-6370  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  249.90	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Eric D. Etzel D.O.  Mailing Address 3701 Timber Creek Ct  City  Eau Claire  FEC ID number of contributing federal political committee.  Name of Employer Self  Receipt For:  Primary General Other (specify)   Other (specify)	State Zip Code WI 54701-5633  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / 30 2012  Transaction ID : C1816825  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Forest L. Evans Jr., M.D.  Mailing Address PO Box 1928  City Columbia  FEC ID number of contributing federal political committee.  Name of Employer Anesthesiology Consultants of Columbia Receipt For:  Primary General Other (specify)	State Zip Code SC 29202-1928  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  291.20	Date of Receipt  08 06 2012  Transaction ID : C1802672  Amount of Each Receipt this Period  41.60
SUBTOTAL of Receipts This Page (optional)	<u> </u>	624.90
TOTAL This Period (last page this line numb	er only)	

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NAME OF COMMITTEE (In Full)

/	iologists Political Action Committee	<del></del>
Full Name (Last, First, Middle Initial) <b>A.</b> James C. Evans D.O.		Date of Receipt
Mailing Address 8765 Clark rd		08 16 2012
City	State Zip Code	Transaction ID : C1808565
Grand Ledge	MI 48837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Ingham Regional Medical Center Anesthe	Anesthesiologist	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  B. John M. Evans M.D.  Mailing Address 625 Shoreline Ct		Date of Receipt
		08 30 2012
City	State Zip Code	Transaction ID : C1816826
Eau Claire	WI 54703-2057	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Eau Claire Anes	Occupation Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Olawale A. Fadugba M.B.,Ch.B.		Date of Receipt
Mailing Address 423 E Whispering Ln		08 07 2012
City	State Zip Code	Transaction ID : C1804184
Galloway	NJ 08205-2917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Atlantic City Medical Centre	Anesthesiologist	
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	<u> </u>	1250.00

# SCHEDULE A (FEC Form 3X)

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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)										Ī	

Mailing Address 5370 E. Camino Francisco Soza	Full Name (Last, First, Middle Initial) Rhesa S. Farmer M.D.		Date of Receipt
Transaction ID : C1811125  AZ 85718-5504  AZ 85718-5504  AZ 85718-5504  FEC ID number of contributing federal political committee.  Name of Employer  Southern Arizona Anesthesia Receipt For: Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial)  Ana M. Faus M.D.  Mailing Address 7330 E. Bayaud Ave.  City Denver CO 80230  FEC ID number of contributing federal political committee.  C 80230  FEC ID number of contributing federal political committee.  C 80230  Full Name (Last, First, Middle Initial)  Ana M. Faus M.D.  Mailing Address 3930 W Obispo St  City Primary General Other (specify) ▼ 250.00  FULL State Zip Code CO 80230  Date of Receipt  Transaction ID : C1811125  Amount of Each Receipt this Period  Transaction ID : C1811125  Amount of Each Receipt  Aggregate Year-to-Date ▼ 250.00  Date of Receipt  Transaction ID : C18011125  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1801125  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID : C1801125  Amount of Each Receipt this Period  Date of Receipt  Date of Rece	Mailing Address 5370 E. Camino Francisco	Soza	
Southern Arizona Anesthesia   Primary   General   Occupation   Physician   Aggregate Year-to-Date ▼   Southern Arizona Anesthesia   Primary   General   Other (specify) ▼   State Zip Code   Transaction ID: C1812784   Amount of Each Receipt this Period   Primary   General   Other (specify) ▼   State Zip Code   CO 80230   Transaction ID: C1812784   Amount of Each Receipt this Period   Primary   General   Other (specify) ▼   Z50.00   Other (specify			Transaction ID : C1811125
Southern Arizona Anesthesia   physician   Receipt For:	· · · · · · · · · · · · · · · · · · ·	C	500.00
Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial) . Ana M. Faus M.D.  Mailing Address 7330 E. Bayaud Ave.  City State Zip Code CO 80230  FEC ID number of contributing federal political committee.  Name of Employer Greater Colorado Anesthesia  Receipt For: Primary General Other (specify) ▼ 250.00  Full Name (Last, First, Middle Initial) . Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City State Zip Code Transaction ID: C1812784  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C1812784  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C1812784  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C1803150  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  FEC ID number of contributing federal political committee.  Name of Employer Gulfcoast Anesthesia Partners  Receipt For: Primary General  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	• •		_
Ana M. Faus M.D.  Mailing Address 7330 E. Bayaud Ave.  City Denver CO 80230  FEC ID number of contributing federal political committee.  Name of Employer Greater Colorado Anesthesia Primary Other (specify) ▼  City State Zip Code CO 80230  Full Name (Last, First, Middle Initial) Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City Tansaction ID : C1812784  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID : C1812784  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1812784  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1803150  Amount of Each Receipt  Transaction ID : C1803150  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID : C1803150  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C  Quiffcoast Anesthesia Partners Receipt For: Primary General  Date of Receipt  Aggregate Year-to-Date ▼  Pediatric Anesthesiologist  Receipt For: Primary General	Primary General		
City State Zip Code CO 80230  FEC ID number of contributing federal political committee.  Name of Employer Greater Colorado Anesthesia  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City State Zip Code Tampa FL 33629-7830  FEC ID number of contributing federal political committee.  C State Zip Code Transaction ID: C1812784  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C1802158  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C1803150  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation Pediatric Anesthesiologist  Receipt For: Primary General  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼			Date of Receipt
Denver CO 80230  FEC ID number of contributing federal political committee.  Name of Employer Greater Colorado Anesthesia  Receipt For:  Primary General Other (specify) ▼  Ptill Name (Last, First, Middle Initial)  Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City State Zip Code Tampa  FEC ID number of contributing federal political committee.  PEC ID number of contributing federal political committee.  Name of Employer Gulfcoast Anesthesia Partners  Receipt For:  Quifcoast Anesthesia Partners  Receipt For:  Primary General  Amount of Each Receipt this Period  Date of Receipt  Tampa FL 33629-7830  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: C1803150  Amount of Each Receipt this Period	Mailing Address 7330 E. Bayaud Ave.		
Full Name (Last, First, Middle Initial)  Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City Tampa  FEC ID number of contributing federal political committee.  Name of Employer Gulfcoast Anesthesia Partners Receipt For: Primary General Other (specify) ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  Date of Receipt  Tansaction ID : C1803150  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Tansaction ID : C1803150  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼			
Greater Colorado Anesthesia  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City State Zip Code Tampa FL 33629-7830  FEC ID number of contributing federal political committee.  Name of Employer Gulfcoast Anesthesia Partners Receipt For: Primary General  Aggregate Year-to-Date ▼	· · · · · · · · · · · · · · · · · · ·	C	250.00
Primary General Other (specify) ▼			
Steven Feinerman M.D.  Mailing Address 3906 W Obispo St  City State Zip Code Transaction ID : C1803150  FL 33629-7830  FEC ID number of contributing federal political committee.  Name of Employer Gulfcoast Anesthesia Partners  Gulfcoast Anesthesia Partners  Receipt For:  Primary General  Date of Receipt  Transaction ID : C1803150  Amount of Each Receipt this Period  500.00	Primary General	00 0	
Mailing Address 3906 W Obispo St  City State Zip Code Transaction ID : C1803150  FL 33629-7830  FEC ID number of contributing federal political committee.  Name of Employer Occupation Gulfcoast Anesthesia Partners  Receipt For: Aggregate Year-to-Date ▼  M M M D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			Date of Receipt
Tampa FL 33629-7830  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Gulfcoast Anesthesia Partners  Receipt For:  Primary  General  Amount of Each Receipt this Period  500.00  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period	·		M = M / D = D / Y = Y = Y
federal political committee.  Name of Employer  Gulfcoast Anesthesia Partners  Receipt For:  Primary  General  Occupation  Pediatric Anesthesiologist  Aggregate Year-to-Date ▼	•		
Gulfcoast Anesthesia Partners  Receipt For:  Primary  General  Pediatric Anesthesiologist  Aggregate Year-to-Date ▼	•	C	500.00
Receipt For:  Primary  General  Aggregate Year-to-Date ▼	• •	<u>'</u>	
	Receipt For:		-
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NAME OF COMMITTEE (In Full)  American Society of Anesthes	siologists Political Action Committee	e			
Full Name (Last, First, Middle Initial) Scott D. Fielden M.D.		Date of Receipt			
Mailing Address PO Box 401805	las C	M = M / D = D / Y = Y = Y			
Anesthesiology Consultants City	s, Inc. C State Zip Code	08 01 2012 Transaction ID : C1808544			
Las Vegas	NV 89140-1805	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	83.00			
Name of Employer	Occupation	†			
Anesthesiology Consultants, Inc. Crede	physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼	-			
Other (specify)	664.00				
Full Name (Last, First, Middle Initial)  3. Ralph Fillmore M.D.		Date of Receipt			
Mailing Address 1118 Ross Clark Cir., #700		08 29 _2012 _			
City	State Zip Code	Transaction ID : C1816523			
Dothan	AL 36301	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ů – – – – – – – – – – – – – – – – – – –				
Name of Employer	Occupation	1			
ACMG	Physician				
Receipt For:	Aggregate Year-to-Date ▼	7			
Primary General  Other (specify) ▼	1000.00				
Full Name (Last, First, Middle Initial)  C. Sheldon P. Fineman M.D.		Date of Receipt			
Mailing Address 2269 Kendall St.		08 08 2012			
City Virginia Beach	State Zip Code VA 23451	Transaction ID : C1804642  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	-			
Atlantic Anesthesia, Inc.	Anesthesiologist				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General					
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional).		1333.00			
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for each category of the 12 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) Cherie F. Fisher M.D. Date of Receipt Mailing Address 11058 Canary Island Ct 01 2012 City State Zip Code Transaction ID: C1799048 FL Plantation 33324-8203 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Cleveland Clinic Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lauren L. Fitzgerald M.D. Date of Receipt Mailing Address 4505 Kamran Ct 80 26 2012 City State Zip Code Transaction ID: C1814647 OK Edmond 73013 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Affiliated Anesthesilogist, LLC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gerhard W. Flacke M.D. Date of Receipt Mailing Address 3947 E Ina Rd 2012 80 26 City Zip Code State Transaction ID: C1814627 ΑZ Tucson 85718-1531 Amount of Each Receipt this Period FEC ID number of contributing C 83.30 federal political committee. Name of Employer Occupation Physician Anesthesiologist Old Pueblo Anesthesia Receipt For: Aggregate Year-to-Date ▼ Primary General 916.60 Other (specify) 583.30 SUBTOTAL of Receipts This Page (optional).....

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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) Richard M. Flowerdew M.D. Date of Receipt Mailing Address 38 Hedgerow Dr 2012 15 City Zip Code State Transaction ID: C1807486 ME Falmouth 04105-1407 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Spectrum Medical Group Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) **B.** Barry G. Foley M.D. Date of Receipt Mailing Address P.O. Box 940127 80 2012 07 City State Zip Code Transaction ID: C1803237 Maitland FL 32794 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Patrick Foster M.D. Date of Receipt Mailing Address 161 Rosehill Dr 2012 80 28 City Zip Code State Transaction ID: C1816417 PΑ Bellefonte 16823 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Mount Nittany Medical Center anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 833.30 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	siologists Political Action Committee	e					
Full Name (Last, First, Middle Initial) Deanna K. Fox M.D.		Date of Receipt					
Mailing Address 8513 Rosehill Rd		08 30 / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y					
City Lenexa	State Zip Code KS 66215-2837	Transaction ID : C1816814  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	500.00					
Name of Employer  University of Kansas Medical Center  Receipt For:  Primary General  Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	-					
Full Name (Last, First, Middle Initial)  G. Craig Fox M.D.  Mailing Address 21 Melrose Ln		Date of Receipt  08 14 2012					
City Green Village	· · · · · · · · · · · · · · · · · · ·						
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period  83.30					
Name of Employer Self	Occupation Anesthesiologist						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 666.40						
Full Name (Last, First, Middle Initial)  C. Stuart W. Fraley M.D.		Date of Receipt					
Mailing Address 8253 Glengarry Ct.		08 24 2012					
City Indianapolis	State Zip Code IN 46236	Transaction ID : C1814247  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	500.00					
Name of Employer Self	Occupation  Anesthesiologist	-					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00						
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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) James M. Frankland M.D. Date of Receipt Mailing Address 3640 Mossy Creek Ln 01 2012 City State Zip Code Transaction ID: C1799760 FL Tallahassee 32311-3638 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Anesthesia Assoc. of Tallahassee Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Samir F. Fuleihan M.D. Date of Receipt Mailing Address Harper Hosp., Anes. Dept. 3990 John R 80 31 2012 City State Zip Code Transaction ID: C1817318 MI Detroit 48201 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **AAKC ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bennett E. Fuller M.D. Date of Receipt Mailing Address 7301 Aurelia Rd 30 2012 80 City Zip Code State Transaction ID: C1816808 OK Oklahoma City 73121 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Affiliated Anesthesilogists, LLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 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** 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) Wayne A. Fuller M.D. Date of Receipt Mailing Address 1269 E. Giles Rd. 06 2012 City State Zip Code Transaction ID: C1803173 Muskegon MI 49445 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Anesthesiologist Lakeshore Anes. of Muskegon Receipt For: Aggregate Year-to-Date ▼ Primary General 583.30 Other (specify) Full Name (Last, First, Middle Initial) B. Wayne A. Fuller M.D. Date of Receipt Mailing Address 1269 E. Giles Rd. 08 2012 06 City State Zip Code Transaction ID: C1803174 MI Muskegon 49445 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Lakeshore Anes. of Muskegon Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 583.30 Other (specify) Full Name (Last, First, Middle Initial) c. Brantley Gaitan M.D. Date of Receipt Mailing Address 5777 E Mayo Blvd - Anesthesiology 2012 80 29 City Zip Code State Transaction ID: C1816532 ΑZ Phoenix 85054-4502 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Mayo Clinic Arizona Hospital Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	
Full Name (Last, First, Middle Initial)  Emilio B. Gallo M.D.  Mailing Address 8930 Southern Breeze Dr.  City Orlando  FEC ID number of contributing federal political committee.  Name of Employer  JLR  Receipt For:  Primary General Other (specify)	State Zip Code FL 32836  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Michael A. Garcia M.D.  Mailing Address 3231 Fountain Blvd.  City  Tampa  FEC ID number of contributing federal political committee.  Name of Employer  All Chuildren Specialty Physicians  Receipt For:  Primary General Other (specify)	State Zip Code FL 33609-4620  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M COLUMN 2012  Transaction ID: C1799769  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Brett L. Gardner M.D.  Mailing Address 3703 Freedom Dr.  City Eau Claire  FEC ID number of contributing federal political committee.  Name of Employer Self Receipt For:  Primary General Other (specify)	State Zip Code WI 54703-1378  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M 2012  Transaction ID: C1816827  Amount of Each Receipt this Period  500.00
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NAME OF COMMITTEE (In Full) American Society of Anesthes	iologists Political Action Committee	<del></del>
Full Name (Last, First, Middle Initial)  Jeffrey C. Gardner M.D.  Mailing Address 935 Oaklawn Ave		Date of Receipt
City Winston Salem  FEC ID number of contributing federal political committee.  Name of Employer Wake Forest University Dept of Anesthe	State Zip Code NC 27104-1038  C Occupation Physician	Transaction ID : C1812747  Amount of Each Receipt this Period  250.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Charles J. Garrett M.D.  Mailing Address 1617 Kansas Ave		Date of Receipt  08 29 2012
City San Angelo FEC ID number of contributing federal political committee.	State Zip Code TX 76904-6834	Transaction ID : C1816502  Amount of Each Receipt this Period  83.30
Name of Employer Emory University Hospital Anesthesiolo  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  666.40	
Full Name (Last, First, Middle Initial) Phillip Geiger M.D.  Mailing Address 1908 W Berkshire Ln  City Hanford	State Zip Code CA 93230-9158	Date of Receipt  08 01 2012  Transaction ID : C1808567
FEC ID number of contributing federal political committee.  Name of Employer  Naval Hospital Lemoore  Receipt For:  Primary General  Other (specify)   Other	Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 41.00
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NAME OF COMMITTEE (In Full)

American Society of Anesthesiologists Political Action Committee

/				
Α.	Full Name (Last, First, Middle Initial) Phillip Geiger M.D.	Date of Receipt  08 04 2012		
	Mailing Address 1908 W Berkshire Ln			
	City	State Zip Code	Transaction ID : C1802519	
	Hanford	CA 93230-9158	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С	83.30	
	Name of Employer	Occupation		
	Naval Hospital Lemoore	Anesthesiologist		
	Receipt For:  Primary General	Aggregate Year-to-Date ▼		
	Other (specify) $\blacktriangledown$	994.40		
В.	Full Name (Last, First, Middle Initial) Tony George M.D.		Date of Receipt	
	Mailing Address 7 Layer Dr.	08 26 2012		
	City	State Zip Code	Transaction ID : C1814652	
	Morris Plains	NJ 07950-2539	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer	Occupation		
	Summit Medical Group	Physician		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General	1 99.09		
	Other (specify) ▼	250.00		
<u>с.</u>	Full Name (Last, First, Middle Initial) Wisam M. George D.O.		Date of Receipt	
	Mailing Address 4775 Driftwood Dr		08 31 2012	
	City	State Zip Code	Transaction ID: C1817319	
	Commerce Township	MI 48382-1327	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	250.00	
	Name of Employer	Occupation		
	Self	Anesthesiologist		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General			
	Other (specify) ▼	250.00		
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for each category of the 12 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) Timothy R. Gerry M.D. Date of Receipt Mailing Address 3024 Coltman Ln. 30 2012 City Zip Code State Transaction ID: C1816828 WI Eau Claire 54701-5803 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. William W. Gezzar M.D. Date of Receipt Mailing Address 1820 Whitecap Circle 80 03 2012 City State Zip Code Transaction ID: C1802504 FL North Fort Myers 33903 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Medical Anesthesia and Pain Management Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Philip M. Gilberstadt M.D. Date of Receipt Mailing Address 1101 W Clairemont Ave Ste 2C 2012 80 30 Eau Claire Anes City Zip Code State Transaction ID: C1816829 WI Eau Claire 54701-6161 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Eau Claire Anes Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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68 OF 210 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) Marilyn J. Goldstein M.D. Date of Receipt Mailing Address 412 Ridgepoint Court 2012 City Zip Code State Transaction ID: C1805508 TN Piney Flats 37686 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Bristol Anesthesia Services** Physician- Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maria A. Gomez M.D. Date of Receipt Mailing Address 5828 N 3RD AVE 80 2012 25 City State Zip Code Transaction ID: C1814607 ΑZ Phoenix 85013-1538 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Valley Anesthesiology Consultants, Ltd anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Santiago L. Gomez M.D. Date of Receipt Mailing Address 13 Chateau Pontet Canet Dr 2012 80 15 City State Zip Code Transaction ID: C1807483 LA Kenner 70065-2035 Amount of Each Receipt this Period FEC ID number of contributing 41.60 С federal political committee. Name of Employer Occupation Tulane Hospital Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) 1341.60 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) Dale A. Gonzales M.D. Date of Receipt Mailing Address 441 S. Livernois Rd., #190 2012 31 City Zip Code State Transaction ID: C1817320 Rochester MI 48307-2591 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul M. Greaves M.D. Date of Receipt Mailing Address 1165 Linnwood Dr NE 80 10 2012 City State Zip Code Transaction ID: C1805356 OR Albany 97322-4450 Amount of Each Receipt this Period FEC ID number of contributing 501.00 federal political committee. Name of Employer Occupation self physician Receipt For: Aggregate Year-to-Date ▼ Primary General 501.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dara A. Green M.D. Date of Receipt Mailing Address 13657 Glynshel Drive 2012 80 01 Zip Code State Transaction ID: C1808548 FL Winter-Garden 34787 Amount of Each Receipt this Period FEC ID number of contributing 208.00 С federal political committee. Name of Employer Occupation Pediatric Anesthesiologist Arnold Palmer Hospital for Children Receipt For: Aggregate Year-to-Date ▼ Primary General 1664.00 Other (specify) 959.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	}
Full Name (Last, First, Middle Initial)  Ryan B. Green M.D., Ph.D  Mailing Address 3621 Shukla Ct  City  Walnut Creek  FEC ID number of contributing federal political committee.  Name of Employer  Medical Anesthesia Consultants  Receipt For:  Primary  General  Other (specify)	State Zip Code CA 94598  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M / 26 2012  Transaction ID : C1814648  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Ralph Gregg M.D.  Mailing Address 18400 Pioneer Rd  City  Fort Myers  FEC ID number of contributing federal political committee.  Name of Employer MAPMC  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 33908-4655  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 23 2012  Transaction ID : C1813465  Amount of Each Receipt this Period  500.00
CAROLYN GREGORIUS  Mailing Address 2220 THE KNOLLS  City LINCOLN  FEC ID number of contributing federal political committee.  Name of Employer  Sef-Employed  Receipt For:  Primary  General Other (specify)	State Zip Code NE 68512  C  Occupation Spouse of ASA member  Aggregate Year-to-Date ▼	Date of Receipt  M M / 2012  Transaction ID: C1811256  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1000.00
TOTAL This Period (last page this line number	only)	

## SCHEDULE A (FEC Form 3X)

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ITEMIZED RECEIPTS 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) Stephen C. Grice M.D. Date of Receipt Mailing Address 9175 Old Southwick Pass 2012 28 City Zip Code State Transaction ID: C1816425 GA Alpharetta 30022-6253 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Northside Hospital Northside Anesthesi anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Alina M Grigore M.D. Date of Receipt Mailing Address 2212 Timber Rose Dr 80 29 2012 City State Zip Code Transaction ID: C1816570 NV Las Vegas 89134 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation University of Maryland Medical School Cardiovascular Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Francisco Grinberg M.D. Date of Receipt Mailing Address 41 Pinnacle Dr 2012 80 20 City Zip Code State Transaction ID: C1811723 South Burlington VT 05403-7914 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation UVM MD- Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 72 OF 210 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 pers e name and address of any political committee to		
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•	
Full Name (Last, First, Middle Initial)  A. Andrew M Gross M.D.	Date of Receipt		
Mailing Address 6801 LAKE DEVONWOOD [	08 04 2012		
City Fort Myers	State Zip Code FL 33908-7202	Transaction ID : C1802521  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	41.60	
Name of Employer  Orthopedic Center of Florida  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  249.60		
Full Name (Last, First, Middle Initial)  3. Justin A. Gulledge M.D.  Mailing Address 5508 NW 108th Ter	Date of Receipt		
City Oklahoma City	State Zip Code OK 73162-5819	08 24 2012 Transaction ID : C1814518	
FEC ID number of contributing federal political committee.	C 75102-3619	Amount of Each Receipt this Period 500.00	
Name of Employer Affiliated Anesthesiologists, LLC	Occupation Anesthesiologist		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial)  C. Allen N. Gustin M.D.	Data of Bassint		
Mailing Address 653 W Briar PI Apt 1	Date of Receipt  08 13 2012		
City Chicago	State Zip Code IL 60657-8406	Transaction ID : C1806121  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer			
University of Chicago Department of An Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  400.00		
SUBTOTAL of Receipts This Page (optional)		591.60	
TOTAL This Period (last page this line number	r 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 pers e name and address of any political committee to	son for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	)
Full Name (Last, First, Middle Initial)  Melanie J. Guthrie A.AC, M.  Mailing Address, 2444 Helmon Street		Date of Receipt
Mailing Address 2411 Holmes Street MG-200		08 04 2012
City	State Zip Code	Transaction ID : C1802522
Kansas City	MO 64108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	41.60
Name of Employer	Occupation	1
University of Missouri - Kansas City	Anesthesiologist Assistant	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	208.00	
Full Name (Last, First, Middle Initial)  Halim D. Haber M.D.		Date of Receipt
Mailing Address 19 Nantucket Dr		M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	08 31 2012 Transaction ID : C1817321
Bloomfield Hills	MI 48304-3342	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
Anesthesia Services PC	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  C. Osama I. Hafez M.D.		Date of Receipt
Mailing Address 26637 Castleview Way		08 01 2012
City Wesley Chapel	State Zip Code FL 33544-4740	Transaction ID : C1799107
<u>-</u>	33344-4740	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
MOFFITT CANCER CENTER ANESTHESIOLO	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	591.60
TOTAL This Period (last page this line number	only)	

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Detailed Summary Page	X 11a 11b	11c 12
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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 Full Name (Last, First, Middle Initial) Norman J. Halliday M.D. Date of Receipt Mailing Address 660 NE 105th St 2012 27 City Zip Code State Transaction ID: C1814974 FL Miami Shores 33138-2054 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Univ of Miami Sch of Med medical practitioner Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Malik A. Hamid M.D. Date of Receipt Mailing Address Anes Dept 3901 Rainbow Blvd 80 80 2012 City State Zip Code Transaction ID: C1804193 KS Kansas City 66103-2937 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation University of Kansas Medical Center Staff Anesthsiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

Full Name (Last, First, Middle Initial) c. Aaron Hammond D.O. Date of Receipt Mailing Address 3390 N. Campbell Ave., Ste. 110 2012 80 06 Zip Code City State Transaction ID: C1802669 ΑZ Tucson 85719 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Southern Arizona Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify)

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75 OF 210 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) Chad E. Harbin D.O. Date of Receipt Mailing Address 16495 Timberlane Dr 30 2012 City State Zip Code Transaction ID: C1816781 Athens AL 35613-2333 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Staff Anesthesiologist Anesthesia Services of Decatur Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Nancy J. Haring M.D. Date of Receipt Mailing Address PO Box 235019 80 2012 17 City State Zip Code Transaction ID: C1811242 AL Montgomery 36123-5019 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Montgomery Anesthesia Associates, PC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Jeanette A. Harrington M.D. Date of Receipt Mailing Address 200 Hawkins Dr 2012 80 17 Department of Anesthesiology City Zip Code State Transaction ID: C1810597 Iowa City IΑ 52242-1009 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation University of Iowa Hospitals and Clini Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 1583.30 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) James A. Harris D.O. Date of Receipt Mailing Address 3238 Gallows Rd 2012 City Zip Code State Transaction ID: C1805352 VA Fairfax 22031 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation US Army Resident Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronald L. Harter M.D. Date of Receipt Mailing Address 7825 Holiston Ct 80 17 2012 City State Zip Code Transaction ID: C1810590 OH Dublin 43016-8659 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Ohio State University Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Steven J. Hauck M.D. Date of Receipt Mailing Address 714 September Chase 2012 80 07 City Zip Code State Transaction ID: C1803249 SC Wellford 29385-9228 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Spartanburg Regional Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 833.30 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) Joy L. Hawkins M.D. Date of Receipt Mailing Address 12631 E 17th Ave, MS 8203 2012 24 City Zip Code State Transaction ID: C1814522 CO Aurora 80045-2527 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation University of Colorado School of Medic Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert E. Heflin M.D. Date of Receipt Mailing Address 6 Fairview Hts 80 2012 21 City State Zip Code Transaction ID: C1811805 WV Parkersburg 26101-2918 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation United Anesthesia Inc. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas D. Heiman M.D. Date of Receipt Mailing Address 3670 E 1st St Apt B 2012 80 07 City State Zip Code Transaction ID: C1803239 CA Long Beach 90803-2712 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self-employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 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 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) Stephen W. Heimbach M.D. Date of Receipt Mailing Address 1105 Camelot Dr 20 2012 City State Zip Code Transaction ID: C1811309 OK Yukon 73099 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Oklahoma University Health Sciences Ce Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael R. Hejtmanek M.D. Date of Receipt Mailing Address 2222 40th St. 08 2012 21 City State Zip Code Transaction ID: C1811773 WA Bellingham 98229 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Bellingham Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Peter L. Hendricks M.D. Date of Receipt Mailing Address 1590 Panorama Dr. 2012 80 15 City State Zip Code Transaction ID: C1807475

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Occupation

Aggregate Year-to-Date ▼

physician

83.30

Amount of Each Receipt this Period

Vestavia Hills

Name of Employer

Primary

self

Receipt For:

FEC ID number of contributing

General

federal political committee.

Other (specify)

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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) Richard L. Henry M.D. Date of Receipt Mailing Address 3046 Obrien Dr 06 2012 City Zip Code State Transaction ID: C1802676 FL Tallahassee 32309-2751 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Anesthesiology Associates of Tallahass Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) Full Name (Last, First, Middle Initial) B. Michelle J. Herman M.D. Date of Receipt Mailing Address 7460 W. Ina Road 80 2012 29 City State Zip Code Transaction ID: C1816527 ΑZ Tucson 85743 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation southern arizona anesthesiology physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Peter G. Hild M.D. Date of Receipt Mailing Address 3901 Rainbow Blvd. 2012 80 07 2467 Bell Mem. Hosp City State Zip Code Transaction ID: C1804158 KS Kansas City 66160-7415 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Kansas University Anesthesiology Found anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 791.60 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	2
Full Name (Last, First, Middle Initial) Vernon C. Hill M.D.		Date of Receipt
Mailing Address 1621 Stanford Drive		08 06 2012
City	State Zip Code	Transaction ID : C1803153
Anchorage	AK 99508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
PAAMG	Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  3. Jonathan G. Hisghman D.O.		Date of Receipt
Mailing Address 650 Poinsettia Rd	08 01 2012	
City	State Zip Code	Transaction ID : C1808545
Belleair	FL 33756-1525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
John Hisghman D.O.  Receipt For:	Anesthesiologist	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	328.00	
Full Name (Last, First, Middle Initial)  Maggie M. Ho D.O.		Date of Receipt
Mailing Address 9 Carleys Way	Chata 7:- Onda	08 27 2012
City Rockaway	State Zip Code NJ 07866-4530	Transaction ID : C1816410  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Morris Anest. Group St. Clares Hosp.	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone 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 Anesthes	iologists Political Action Committee	9
Full Name (Last, First, Middle Initial)  Stephen Q. Hoang M.D.  Mailing Address 5930 Royal Ln # E-171		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : C1816577
Dallas	TX 75230-3849	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Childrens Medical Center Dallas	Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  3. Joyce L. Hoatson M.D.	Date of Receipt	
Mailing Address 2127 S Terrace Blvd	08 222012 _	
City	State Zip Code	Transaction ID : C1812772
Longwood	FL 32779-4888	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
JLR Anesthesia	Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  C. Dag Holmsen M.D.		Date of Receipt
Mailing Address 73 Oxen Dr		08 13 2012
City	State Zip Code	Transaction ID : C1806661
Oakland	ME 04963-4654	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	-
Kennebec Anesthesia Associates	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	·····	1000.00
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82 OF 210 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) Andrew Houlton M.D. Date of Receipt Mailing Address 3300 Oakdale Avenue North 2012 City Zip Code State Transaction ID: C1812836 MN Robbinsdale 55422 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation North Memorial Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy W. Houseman M.D. Date of Receipt Mailing Address PO Box 1025 80 18 2012 City State Zip Code Transaction ID: C1811149 AL Fairhope 36533-1025 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Eastern Shore Anesthesia anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 583.10 Other (specify) Full Name (Last, First, Middle Initial) c. Jeffrey Huang M.D. Date of Receipt Mailing Address 2699 Lee Rd Ste 510 2012 80 23 City State Zip Code Transaction ID: C1813475 FL Winter Park 32789-1742 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation AGO Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 833.30 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	<del></del>
Full Name (Last, First, Middle Initial) Hayden R. Hughes M.D.  Mailing Address 1941 21st Ave S  City Birmingham  FEC ID number of contributing federal political committee.  Name of Employer University of Alabama Medical Center D  Receipt For: Primary General Other (specify)	State Zip Code AL 35209-1345  C  Occupation physician  Aggregate Year-to-Date ▼  498.60	Date of Receipt  08 01 2012  Transaction ID : C1808563  Amount of Each Receipt this Period  83.00
Full Name (Last, First, Middle Initial)  Hayden R. Hughes M.D.  Mailing Address 1941 21st Ave S  City  Birmingham  FEC ID number of contributing federal political committee.  Name of Employer  University of Alabama Medical Center D  Receipt For:  Primary General Other (specify)	State Zip Code AL 35209-1345  C  Occupation physician  Aggregate Year-to-Date ▼  498.60	Date of Receipt  M M M / 21 2012  Transaction ID : C1811765  Amount of Each Receipt this Period  83.30
Full Name (Last, First, Middle Initial)  Lewis A. Hunt M.D.  Mailing Address 36 Foxchase  City  Dothan  FEC ID number of contributing federal political committee.  Name of Employer  Anesthesia Consultants Medical Group,  Receipt For:  Primary  General  Other (specify)	State Zip Code AL 36305  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼  1000.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	1166.30
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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  James M. Hunter Jr., M.D.  Mailing Address Anesthesiology Department		Date of Receipt
619 S. 19th Street JT926C		08 01 2012
City	State Zip Code	Transaction ID : C1808557
Birmingham	AL 35249	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
University of Alabama at Birmingham	Anesthesiologist and Intensivist	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate rear-to-Date ▼	
Other (specify) ▼	328.00	
Full Name (Last, First, Middle Initial)  3. John M. Hunter M.D.		Date of Receipt
Mailing Address 46-133 Punalei Pl	Ctoto 7in Co-l-	08 21 2012
City	State Zip Code	Transaction ID : C1811736
Kaneohe	HI 96744-3635	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
The Anesthesia Medical Group, Inc.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. John H. Huntington M.D.	•	Date of Receipt
Mailing Address 3333 Evergreen Dr., NE		08 01 2012
City	State Zip Code	Transaction ID : C1808547
Grand Rapids	MI 49525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.00
Name of Employer	Occupation	
Anesthesia Medical Consultants, PC	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	95. egale . ea. to 24.6 y	
Other (specify) ▼	328.00	
SUBTOTAL of Receipts This Page (optional)	•	582.00
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or for commercial purposes, other than using the	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Robert W. Hurley M.D., Ph.D  Mailing Address PO Box 100254- Hurley  City Gainesville  FEC ID number of contributing federal political committee.  Name of Employer Univ of FL Med Ctr Anes Dept  Receipt For: Primary General Other (specify)	State Zip Code FL 32610-0254  C  Occupation Pain Physician  Aggregate Year-to-Date ▼  332.80	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Robert Impastato M.D.  Mailing Address 19 Barrett Hill Rd.  City Hopewell Junction  FEC ID number of contributing federal political committee.  Name of Employer Vassar Brothers Hospital Anes. Dept.  Receipt For: Primary General Other (specify)	State Zip Code NY 12533  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  666.40	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Thomas F. Ingersoll M.D.  Mailing Address 8600 N. Route 91, Suite #250  City Peoria  FEC ID number of contributing federal political committee.  Name of Employer  Associated Anesthesiologists, S.C.  Receipt For:  Primary General Other (specify)	State Zip Code IL 61615  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	• • • • • • • • • • • • • • • • • • •	374.90
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NAME OF COMMITTEE (In Full)  American Society of Anesthe	esiologists Political Action Committe	e
Full Name (Last, First, Middle Initial)  Susan N. Iovan M.D.  Mailing Address 6640 Valley Spring		Date of Receipt
waming Address 6040 valley Spring		08 27 2012
City	State Zip Code	Transaction ID : C1816247
Bloomfield Township	MI 48301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
American Anesthesiology	Medical Doctor	
Receipt For:  Primary General  Other (cnecify) —	Aggregate Year-to-Date ▼ 500.00	_
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  Matthew J. Irwin M.D.		Date of Receipt
Mailing Address 3317 Evergreen Lanen		08 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code WI 54701	Transaction ID : C1816830
Eau Claire	WI 54701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
University of Wisconsin Dept of Anesth	Resident	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Mark T. Isaac D.O.		Date of Receipt
Mailing Address 1459 Lexington Ontario F	Rd	08 29 2012
City Mansfield	State         Zip Code           OH         44903-8631	Transaction ID : C1816501  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Anesthesia Associates of Mansfield	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	800.00	
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87 OF 210 Use separate schedule(s) for each category of the 12 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 C. Jabour M.D. Date of Receipt Mailing Address 10571 Greenbelt Dr. 04 2012 City State Zip Code Transaction ID: C1802532 Clive IΑ 50325 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Associated Anesthesiologists, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey S. Jacobs M.D. Date of Receipt Mailing Address 11041 Pine Lodge Trail 80 2012 16 City State Zip Code Transaction ID: C1808517 FL Davie 33328 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Cleveland Clinic Florida Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Aurelia D. Jamerson M.D. Date of Receipt Mailing Address 5434 Avalon Ct. 2012 80 31 City Zip Code State Transaction ID: C1817323 MI West Bloomfield 48323 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST AAKC** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 833.30 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 Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  A. Amber L. Jandik B.S., M.D.		Date of Receipt
Mailing Address 5251 Westminster Dr		08 05 2012
City Fort Myers	State Zip Code FL 33919	Transaction ID : C1802547
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  500.00
Name of Employer  Medical Anesthesia and Pain Management  Receipt For:  Primary General  Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  3. Daniel J. Janik M.D.  Mailing Address 15605 E Prentice Dr		Date of Receipt
City	State Zip Code	08 15 2012 Transaction ID : C1807487
Centennial  FEC ID number of contributing federal political committee.	CO 80015-4264	Amount of Each Receipt this Period  83.30
Name of Employer University of Colorado Denver	Occupation Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 666.40	
Full Name (Last, First, Middle Initial)  C. J. Lawrence Jayne Jr., M.D.		Date of Receipt
Mailing Address 350 Blountville Highway Suite 207		08 08 2012
City Bristol	State Zip Code TN 37620	Transaction ID : C1804639  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Bristol Anesthesia Services, P.C.  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  1000.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1583.30
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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) Curby D. Jenkins D.O. Date of Receipt Mailing Address 250 Cabrillo Ln 01 2012 City Zip Code State Transaction ID: C1808550 CA San Luis Obispo 93401-7910 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 581.00 Other (specify) Full Name (Last, First, Middle Initial) B. William M. Jenkins J.D., M.B. Date of Receipt Mailing Address 3938 Blackstone Court 08 06 2012 City State Zip Code Transaction ID: C1803180 CA Hayward 94542 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation William Jenkins, M.D. physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cynthia L. Jenson M.D. Date of Receipt Mailing Address 434 Main St. 2012 80 03 City Zip Code State Transaction ID: C1802475 MF Waterville 04901-4118 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Anesthesia Associates of Lewiston Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 832.40 Other (specify) 416.30 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) J. F. Jimenez M.D. Date of Receipt Mailing Address 116 Seven Iron Ct. 2012 City State Zip Code Transaction ID: C1806894 FL Ponte Vedra Beach 32082-3134 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Jacksonville Anesthesia Corporation Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Denise C. Joffe M.D. Date of Receipt Mailing Address 2222 78th Ave. SE 08 2012 22 City State Zip Code Transaction ID: C1811855 Mercer Island WA 98040-2125 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation university of washington md Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Adam S. Johnson M.D. Date of Receipt Mailing Address 2810 N Swan Rd Ste 100 2012 80 16 City Zip Code State Transaction ID: C1809222 ΑZ Tucson 85712-6300 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation MD Old Pueblo 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).....

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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) Brad N. Johnson D.O. Date of Receipt Mailing Address 303 W Spring Meadows Ln 2012 21 City Zip Code State Transaction ID: C1811768 Dewitt MI 48820-7711 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Lansing Anesthesiologist, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph M. Johnson M.D. Date of Receipt Mailing Address 5007 Monica Rd NW 80 2012 31 City State Zip Code Transaction ID: C1816895 AL Huntsville 35810-1129 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Huntsville Anesthesiology Consultants Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Paul W. Johnson M.D. Date of Receipt Mailing Address 39 Woodmere Dr. 2012 80 80 City State Zip Code Transaction ID: C1804307 AL Dothan 36305 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Consultants Medical Group, Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 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) Rushton M. Jones M.D. Date of Receipt Mailing Address 1 Shire Cir 2012 21 City Zip Code State Transaction ID: C1811847 NY East Greenbush 12061 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Albany Med Ctr Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. William M. Jordan M.D. Date of Receipt Mailing Address 1859 Ridge Ave 80 2012 17 City State Zip Code Transaction ID: C1811245 AL Montgomery 36106-1840 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Vilma A. Joseph M.D. Date of Receipt Mailing Address 682 Frick St 2012 80 28 City Zip Code State Transaction ID: C1816281 NY Elmont 11003-4135 Amount of Each Receipt this Period FEC ID number of contributing 41.60 С federal political committee. Name of Employer Occupation Monetefiore Medical Center Albert Eins Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) 1291.60 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 Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Steven Kapla M.D.		Date of Receipt
Mailing Address 1101 W Clairemont Ave Ste 2	2C	M = M / D = D / Y = Y = Y
Eau Claire Anesthesiologists City	State Zip Code	08 30 2012
Eau Claire	WI 54701-6161	Transaction ID : C1816831
- Lau Claire	WI 34701-0101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Eau Claire Anesthesiologists	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real to bate v	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  3. Suzanne B. Karan M.D.		Date of Receipt
Mailing Address 1410 Highland Ave		08 01 2012 -
City	State Zip Code	Transaction ID : C1799058
Rochester	NY 14620-1876	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	41.60
Name of Employer	Occupation	
University of Rochester - Strong Memor	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	33 13 111 111 111	
Other (specify) ▼	291.20	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1406 Elizabeth Ct		08 302012 _
City	State Zip Code	Transaction ID : C1816810
Coraopolis	PA 15108-8973	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
PITTSBURGH ANES ASSOC	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. aggregate real to bate ¥	
Other (specify) ▼	250.00	
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Any information copied from such Reports ar or for commercial purposes, other than using	nd 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 Anesthe	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Tripti Kataria M.D.  Mailing Address 130 S Canal St Apt 419  City Chicago  FEC ID number of contributing federal political committee.  Name of Employer University of Chicago  Receipt For:  Primary General Other (specify)	State Zip Code IL 60606-3904  C  Occupation Physician  Aggregate Year-to-Date ▼  666.40	Date of Receipt  M M J 2012  Transaction ID: C1807477  Amount of Each Receipt this Period  83.30
Full Name (Last, First, Middle Initial)  Eric H. Katz M.D.  Mailing Address 10830 S. Tropical Trl.  City  Merritt Island  FEC ID number of contributing federal political committee.  Name of Employer  Melbourne Anesthesia, P.A.  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 32952-7013  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  250.00	Date of Receipt  08 01 2012  Transaction ID: C1799114  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) John L. Keating M.D.  Mailing Address 514 W Pueblo St Fl 2  City Santa Barbara  FEC ID number of contributing federal political committee.  Name of Employer Anesthesia Med Grp of Santa Barbara  Receipt For: Primary General Other (specify)	State Zip Code CA 93105-6219  C  Occupation Practice Manager  Aggregate Year-to-Date ▼  250.00	Date of Receipt  08 26 2012  Transaction ID : C1814661  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional	)	583.30
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<i>,</i>	ologists Political Action Committee	9
Full Name (Last, First, Middle Initial)  A. Eric R. Kelhoffer M.D.  Mailing Address 250 E 53rd St Apt 504		Date of Receipt
maining Address 250 E 53rd St Apt 504		08 23 2012
City	State Zip Code	Transaction ID : C1812988
New York	NY 10022-5247	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Sloan-Kettering Cancer Center Anes. De	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  John A. Kellow M.D.		Date of Receipt
Mailing Address 5683 Branford Dr		08 31 2012
City	State Zip Code	Transaction ID : C1817326
West Bloomfield	MI 48322-1122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Advances Anesthesia Assoc., P.C.	Occupation	1
Receipt For:	ANESTHESIOLOGIST	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  C. James K. Kerr III, M.D.		Date of Receipt
Mailing Address 2165 Herschel St		08 21 2012
City Jacksonville	State Zip Code FL 32204-3819	Transaction ID : C1811759
	FL 32204-3819	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.30
Name of Employer	Occupation	1
North Florida anesthesia Consultants,	anesthesiologist	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	666.40	
SUBTOTAL of Receipts This Page (optional)	·····	833.30
TOTAL This Period (last page this line number	only)	

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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 Full Name (Last, First, Middle Initial) Rubin Kesner D.O. Date of Receipt Mailing Address 35 Hearthstone Dr 2012 City Zip Code State Transaction ID : C1805561 NY Gansevoort 12831-2505 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Anesthesia Group of Albany Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) **B.** Edward N. Kim M.D. Date of Receipt Mailing Address 2967 Warner Dr. 08 2012 31 City State Zip Code Transaction ID: C1817327 West Bloomfield MI 48324-2450 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIA SERVICES ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael S. Kincaid M.D. Date of Receipt Mailing Address 13029 NE 144th PI 2012 80 22 City Zip Code State Transaction ID: C1812097 WA Kirkland 98034-1305 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Matrix Anesthesia - Evergreen Medical Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 798.00 Other (specify)

433.30

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

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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	
Full Name (Last, First, Middle Initial) Collin K. King M.D.  Mailing Address 901 Persimmon PI  City Birmingham  FEC ID number of contributing federal political committee.  Name of Employer Pediatric Anesthesia Associates Receipt For:  Primary General Other (specify)	State Zip Code AL 35226-5101  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M J J J J J J J J J J J J J J J J J
Full Name (Last, First, Middle Initial)  Benjamin M. Kline M.D.  Mailing Address 9 Brookfield Ave.  City Sinking Spring	State Zip Code PA 19608	Date of Receipt  08 27 2012  Transaction ID : C1816244
Sinking Spring  FEC ID number of contributing federal political committee.  Name of Employer	C	Amount of Each Receipt this Period 500.00
Reading Anesthesia Associates  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Nicholas Koehler M.D.  Mailing Address 11807 Park Ave  City Seffner  FEC ID number of contributing federal political committee.	State Zip Code FL 33584-5245	Date of Receipt  08 03 2012  Transaction ID : C1802458  Amount of Each Receipt this Period  250.00
Name of Employer  University of South Florida  Receipt For:  Primary General  Other (specify) ▼	Occupation  Anesthesiologist Pain Fellow  Aggregate Year-to-Date ▼  250.00	-
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	1000.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full)  American Society of Anesthe	siologists Political Action Committe	e
Full Name (Last, First, Middle Initial) Rainer Kohrs M.D.		Date of Receipt
Mailing Address 6819 E 116th St		08 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C1811709
Bixby	OK 74008-8251	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	_
Associated Anesthesiologists Inc	Anesthesilogist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggregate real-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Vesela Kovacheva M.D., Ph.D		Date of Receipt
Mailing Address 790 Boylston St Apt 23F		08 26 2012
City	State Zip Code	Transaction ID : C1814611
Boston	MA 02199-7923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	†
Brigham and Womens Hospital	attending	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	7.99.094.0 1041 10 2410 4	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Wenzel Daniel Kovarik M.D.		Date of Receipt
Mailing Address 51 Prospect St		08 24 2012
City	State Zip Code	Transaction ID : C1814530
Portland	ME 04103-4017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Spectrum Medical Group	Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	)	1750.00
OTAL This Period (last page this line num	ber only)	

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Any information copied from such Reports and or for commercial purposes, other than using to	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 to 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)  A. Susan D. Kreher M.D.		Date of Receipt
Mailing Address 7719 Wynlakes Blvd.		08 17 2012 .
City	State Zip Code	Transaction ID : C1811243
Montgomery	AL 36117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Self	ANESTHESIOLOGIST	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggregate rear-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  David M. Krhovsky M.D.		Date of Receipt
Mailing Address 2248 Shawnee Dr SE		08 04 2012
City	State Zip Code	Transaction ID : C1802515
Grand Rapids	MI 49506-5335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.30
Name of Employer	Occupation	1
Anesthesia Practice Consultants	Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real to bate V	
Other (specify) ▼	666.40	
Full Name (Last, First, Middle Initial)  C. Gopal Krishna M.D.		Date of Receipt
Mailing Address 8807 Jules ILane		08 22 2012
City	State Zip Code	Transaction ID : C1812781
Indianapolis	IN 46278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
IUHP, Indianapolis, IN	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional).		1333.30
TOTAL This Period (last page this line number	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) Catherine M. Kuhn M.D. Date of Receipt Mailing Address 14 Kendall Drive **Duke University Medical School** 2012 City Zip Code State Transaction ID: C1807469 NC Chapel Hill 27517-5644 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Duke University Medical School** Associate Professor of Anesthsiology R Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott M. Kuhnert M.D. Date of Receipt Mailing Address 4640 Hawk Hollow Dr E 80 2012 17 City State Zip Code Transaction ID: C1811095 MI Bath 48808-8776 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Matrix Pain Management, PC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 249.30 Other (specify) Full Name (Last, First, Middle Initial) c. John E. Kurtz M.D. Date of Receipt Mailing Address 929 Arboretum Dr. 2012 80 31 City Zip Code State Transaction ID: C1817328 MI Saline 48176-1352 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST AAKC** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 433.30 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) Andre M. Kwa M.D. Date of Receipt Mailing Address 1859 Oakbrook Dr 2012 City State Zip Code Transaction ID: C1812117 FL Longwood 32779-3134 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesiologists of Greater Orlando Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. George Kwitka M.D. Date of Receipt Mailing Address PO Box 483 80 20 2012 City State Zip Code Transaction ID: C1811238 ND Mandan 58554-0483 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Hung-Chi Kwok M.D. Date of Receipt Mailing Address 2732 Muir Woods Dr., SE 2012 80 15 City State Zip Code Transaction ID: C1807943 ΑL Hampton Cove 35763 Amount of Each Receipt this Period FEC ID number of contributing 175.00 С federal political committee. Name of Employer Occupation Alabama Anes. of Huntsville, LLC physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) John E. La Gorio M.D. Date of Receipt Mailing Address 1543 Forest Park Rd 2012 16 City State Zip Code Transaction ID: C1808524 Norton Shores MI 49441-4642 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Lakeshore Anesthesia physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) B. Howard L. Lakritz M.D. Date of Receipt Mailing Address 21 Cornell Trl 80 2012 01 City State Zip Code Transaction ID: C1808541 NJ Hillsborough 08844-2217 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation Anesthesia Consultants of New Jersey **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) Full Name (Last, First, Middle Initial) c. Benjamin A. Lampert M.D. Date of Receipt Mailing Address 245 S Farm Road 197 2012 80 26 City Zip Code State Transaction ID: C1814674 MO Springfield 65809 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Mercy Clinic physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1124.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) Tanner Lang M.D. Date of Receipt Mailing Address N3292 Feather Ridge Dr 2012 21 City Zip Code State Transaction ID: C1811830 WI Appleton 54913-9698 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation AAA anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gordon M. Langston M.D. Date of Receipt Mailing Address 1110 Gist St 80 2012 07 City State Zip Code Transaction ID: C1804179 SC Columbia 29201-3038 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation ACC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nathan Lasiter M.D. Date of Receipt Mailing Address 18904 Shilstone Way 2012 80 01 City State Zip Code Transaction ID: C1808571 OK Edmond 73003 Amount of Each Receipt this Period FEC ID number of contributing 41.00 С federal political committee. Name of Employer Occupation Northwest Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 287.00 Other (specify) 1041.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	e
Full Name (Last, First, Middle Initial)  Kathryn K. Lauer M.D.  Mailing Address 9200 W Wisconsin Ave  City  Milwaukee  FEC ID number of contributing federal political committee.  Name of Employer  Froedter Memorial Lutheran Hospital  Receipt For:  Primary  Other (specify)	State Zip Code WI 53226-3522  C  Occupation Professor of Anesthesiology  Aggregate Year-to-Date ▼  250.00	Date of Receipt  08 23 2012  Transaction ID : C1812804  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  James S. Lawrence Jr., M.D.  Mailing Address 2699 Lee Rd Ste 510  City  Winter Park  FEC ID number of contributing	State Zip Code FL 32789	Date of Receipt  08 21 2012  Transaction ID : C1811818  Amount of Each Receipt this Period
federal political committee.  Name of Employer Sheridan Healthcare  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	500.00
Full Name (Last, First, Middle Initial)  Gary Lawson-Boucher M.D.  Mailing Address 5238 Mason Corbin Ct Ste 1  City Fort Myers  FEC ID number of contributing federal political committee.  Name of Employer  Moonlight Anesthesia  Receipt For:  Primary  General  Other (specify)	O1  State Zip Code FL 33907  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M / D J 2012  Transaction ID : C1808549  Amount of Each Receipt this Period  125.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	875.00
TOTAL This Period (last page this line numbe	r only)	

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17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Phong H. Le D.O. Date of Receipt Mailing Address 3361 Hollow Spring Dr 2012 27 City Zip Code State Transaction ID: C1814692 Dewitt MI 48820-8722 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation McClaren of Greater Lansing anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Jeffrey A. Lee M.D. Date of Receipt Mailing Address 6650 Pasture Lands Pl. 08 2012 11 City State Zip Code Transaction ID: C1805376 Winter Garden FL 34787-6229 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation JLR Medical Group anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) Full Name (Last, First, Middle Initial) c. Abhijit V. Lele M.B., B.S. Date of Receipt Mailing Address 9663 Cailler Dr 80 2012 80 City Zip Code State Transaction ID: C1804192 KS Lenexa 66220-2655 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **NEURO-INTENSIVIST** University of Kansas Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1291.60 SUBTOTAL of Receipts This Page (optional).....

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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) J. Lance Lichtor M.D. Date of Receipt Mailing Address PO Box 4668 #8824 2012 City Zip Code State Transaction ID: C1811145 NY New York 10163-4668 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Yale University Department of Anesthes Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) B. Penny J. Lindgren M.D. Date of Receipt Mailing Address 1720 Louisiana Blvd., NE., #401 80 2012 05 City State Zip Code Transaction ID: C1802557 NM Albuquerque 87110 Amount of Each Receipt this Period FEC ID number of contributing 500.00 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) c. John L. Lindsey III, M.D. Date of Receipt Mailing Address 3216 N 161st St 2012 80 05 City Zip Code State Transaction ID: C1802554 NF Omaha 68116 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Anesthesia West PC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 791.60 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 E. Lindsey Jr., M.D. Date of Receipt Mailing Address 2502 S. 186th Circle 2012 15 City Zip Code State Transaction ID: C1807479 ΝE Omaha 68130 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Orthopaedic Anesthesia Specialists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) B. Joe Z. Liu M.D. Date of Receipt Mailing Address 3456 Balfour Dr 80 2012 31 City State Zip Code Transaction ID: C1817329 MI Troy 48084-1400 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Service, PC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rene A. Llera Jr., M.D. Date of Receipt Mailing Address PO Box 235019 2012 80 17 City State Zip Code Transaction ID: C1811247 AL Montgomery 36123-5019 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Self Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1333.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 108 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 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) James Lodahl M.D. Date of Receipt Mailing Address E2855 Hailey Ln 30 2012 City Zip Code State Transaction ID: C1816832 WI Eau Claire 54701-8882 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Eau Claire Anes Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen P. Long M.D. Date of Receipt Mailing Address 1501 Maple Ave Ste 301 Commonwealth Pain Specialists, LLC 80 2012 19 City Zip Code State Transaction ID: C1811172 VA Richmond 23226-2553 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Commonwealth Pain Specialists, LLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas D. Looke M.D., Ph.D. Date of Receipt

Mailing Address 4609 Jetty St 80 28 2012 City State Zip Code Transaction ID: C1816491 FL Orlando 32817-3182 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1041.60

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

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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) Timothy Lorenz M.D. Date of Receipt Mailing Address 2864 N.E. 25th Ct. 07 2012 City State Zip Code Transaction ID : C1804180 FL Fort Lauderdale 33305 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Anesco physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joshua L. Lumbley M.D. Date of Receipt Mailing Address 410 W 10th Ave N411 Doan Hall 80 20 2012 City State Zip Code Transaction ID: C1811213 OH Columbus 43210-1240 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation The Ohio State University Medical Cent anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) c. Anne M. Lynn M.D. Date of Receipt Mailing Address 6049 51st Ave NE 2012 80 07 City Zip Code State Transaction ID: C1803232 WA Seattle 98115-7707 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation University of WashingtonSeattle Childr pediatric anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 691.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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210 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) Sean C. Mackey M.D., Ph.D Date of Receipt Mailing Address 1070 Arastradero Rd Ste 285 2012 15 City Zip Code State Transaction ID: C1808156 CA Palo Alto 94304-1336 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Stanford Univ Med Ctr Dept of Anes Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Myrtice Macon M.D. Date of Receipt Mailing Address 4343 Quarton 80 2012 27 City State Zip Code Transaction ID: C1814782 Bloomfield Hills MI 48302 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation south oakland anesthesiologist associa anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Asif M. Malik M.D. Date of Receipt Mailing Address 2760 Charnwood Dr 2012 80 24 City State Zip Code Transaction ID: C1813522 MI Troy 48098-2184 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Henry Ford West Bloomfield Hospital An Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 749.10 Other (specify) 583.30 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 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) Michael J. Manalo M.D. Date of Receipt Mailing Address 6560 High Dr. 2012 City Zip Code State Transaction ID: C1805377 KS Mission Hills 66208 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Midwest Anesthesia Associates physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Mandabach M.D. Date of Receipt Mailing Address Dept of Anesthesiology 619 S. 19th St., JT845 80 2012 01 City State Zip Code Transaction ID: C1808551 ΑL Birmingham 35249-0001 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Name of Employer Occupation **UAB Department of Anesthesiology** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 664.00 Other (specify) Full Name (Last, First, Middle Initial) c. Philip A. Mandato D.O. Date of Receipt Mailing Address 607 Fairway Dr 80 18 2012 City Zip Code State Transaction ID: C1811138 PΑ Telford 18969-2263 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Grandview Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1083.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using t	I Statements may not be sold or used by any p the name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committ	ee
Full Name (Last, First, Middle Initial)  Michael S. Mann M.D.  Mailing Address 989 Innswood Ct.  City  Longwood  FEC ID number of contributing federal political committee.  Name of Employer  JLR medical group  Receipt For:  Primary General  Other (specify)   Eull Name (Last First Middle Initial)	State Zip Code FL 32779-2807  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 31 2012  Transaction ID: C1816876  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Frederick M. Mansfield M.D.  Mailing Address 827 Ellwood Ave  City Orlando  FEC ID number of contributing federal political committee.  Name of Employer JLR Medical Group  Receipt For:  Primary General Other (specify)	State Zip Code FL 32804  C  Occupation Pediatric Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 24 2012  Transaction ID : C1814508  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Westley T. Manske D.O.  Mailing Address 2319 Rivers Edge Dr  City Altoona  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary General Other (specify)	State Zip Code WI 54720-1496  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 30 2012  Transaction ID : C1816833  Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional).	<u> </u>	1500.00
TOTAL This Period (last page this line number	er 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) Mollyann G. March M.D. Date of Receipt Mailing Address 6504 Greentree Rd. 2012 28 City Zip Code State Transaction ID: C1816269 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation First Colonies Anesthesia Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kurt W. Markgraf M.D. Date of Receipt Mailing Address 3663 McKinley Ave 80 2012 04 City State Zip Code Transaction ID: C1802517 FL Fort Myers 33901 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Medical Anesthesia and Pain Management Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Rhonda A. Marvar M.D. Date of Receipt Mailing Address 43 Oxford 2012 80 22 City Zip Code State Transaction ID: C1812071 MI Pleasant Ridge 48069 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation American Anesthesiology Cardiovascular Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 583.30 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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(check only one)							
X 11a	11b	11c	12				
13	14	15	16	17			

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone 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 Anesthesi	iologists Political Action Committee	•
Full Name (Last, First, Middle Initial) Pamela J. Masoud M.D.  Mailing Address 2828 N Folkestone Loop  City Hernando  FEC ID number of contributing federal political committee.	State Zip Code FL 34442-5464	Date of Receipt  08 25 2012  Transaction ID : C1814592  Amount of Each Receipt this Period
Name of Employer  Crystal River Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Rima Matevosian M.D.  Mailing Address 1934 Rimcrest Dr.  City Clandels	State Zip Code	Date of Receipt  08 09 2012  Transaction ID : C1805272
Glendale  FEC ID number of contributing federal political committee.  Name of Employer  OV-UCLA Medical CEnter	CA 91207  C Occupation	Amount of Each Receipt this Period  1000.00
Receipt For:  Primary General  Other (specify) ▼	Anesthesiologist  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  Brian G. McAllister M.D.  Mailing Address 39 Rangers Way  City  Cumberland	State Zip Code ME 04021	Date of Receipt  08 26 2012  Transaction ID : C1814660  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  Spectrum Medical Group  Receipt For:  □ Primary □ General □ Other (specify) ▼	C Occupation Anesthesiologist Aggregate Year-to-Date ▼ 250.00	250.00
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1500.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 115 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Russell K. McAllister M.D. Date of Receipt Mailing Address 2401 S 31st St 07 2012 City Zip Code State Transaction ID: C1803263 Temple TX 76508-0001 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Scott and White Memorial Hospital Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maurice G. McCabe M.D. Date of Receipt Mailing Address 126 Appleton Ln 80 2012 01 City State Zip Code Transaction ID: C1808581 AL Madison 35756-4161 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation CAS OF HUNTSVILLE M.D. Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) Full Name (Last, First, Middle Initial) c. Felicia M. McCreary M.D. Date of Receipt Mailing Address 4724 N. 69th St. 2012 80 21 City Zip Code State Transaction ID: C1811760 ΑZ Scottsdale 85251 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Pediatric Anesthesiologist Valley Anesthesiology Consultants Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 391.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) American Society of Anesthesiology	ogists Political Action Committe	ee
Pacific Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code AZ 85018-3817  C  Occupation  Staff Anesthesiologist  Aggregate Year-to-Date ▼  1250.00	Date of Receipt  08 07 2012  Transaction ID : C1803226  Amount of Each Receipt this Period  125.00
Fau Claira Anaethacialogists	State Zip Code WI 54701-6161  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  08 30 2012  Transaction ID : C1816834  Amount of Each Receipt this Period  500.00
' '	State Zip Code MI 48009-1633  C  Occupation Physician  Aggregate Year-to-Date ▼  664.00	Date of Receipt    Mark
SUBTOTAL of Receipts This Page (optional)		708.00
TOTAL This Period (last page this line number on	nly)	

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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) William A. McDade M.D., Ph.D Date of Receipt Mailing Address 5801 S Ellis Ave, RM 514 Dept of Anes & amp; Critical Care 2012 27 City Zip Code State Transaction ID: C1814684 Chicago IL 60637 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Univ. of Chicago Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) Full Name (Last, First, Middle Initial) B. Brian P. McGlinch M.D. Date of Receipt Mailing Address 3364 Hidden Creek Lane, N.E. 80 15 2012 City State Zip Code Transaction ID: C1807488 MN Rochester 55906 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Mayo Clinic Anesthesiology physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1164.40 Other (specify) Full Name (Last, First, Middle Initial) c. Edward K. McGough M.D. Date of Receipt Mailing Address 120 S Bend Dr 2012 80 01 City Zip Code State Transaction ID: C1799116 FL Ponte Vedra Beach 32082-2572 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesia Consultants Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 624.90 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13		14		15		16		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial) Richard R. McNeer M.D.  Mailing Address 18340 SW 122 St.  City Miami  FEC ID number of contributing federal political committee.  Name of Employer University of Miami Dept of Anesthesio  Receipt For:  Primary General Other (specify)	State Zip Code FL 33196  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  08 01 2012  Transaction ID: C1808562  Amount of Each Receipt this Period  83.00
Full Name (Last, First, Middle Initial)  Richard R. McNeer M.D.  Mailing Address 18340 SW 122 St.  City  Miami  FEC ID number of contributing federal political committee.  Name of Employer  University of Miami Dept of Anesthesio  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 33196  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  747.30	Date of Receipt  M M M / 30 2012  Transaction ID : C1816612  Amount of Each Receipt this Period  83.30
Full Name (Last, First, Middle Initial)  Jaideep H. Mehta M.D.  Mailing Address UTHSC, Dept of Anesthesiologe 6431 Fannin St., MSB 5.020  City Houston  FEC ID number of contributing federal political committee.  Name of Employer  UT Houston  Receipt For:  Primary General Other (specify)	State Zip Code TX 77030  C  Occupation Anesthesiologist  Aggregate Year-to-Date  333.60	Date of Receipt  08 06 2012  Transaction ID: C1802671  Amount of Each Receipt this Period  41.70
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	208.00
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) Walter J. Merrell M.D. Date of Receipt Mailing Address 1450 Alabama Dr. 2012 City State Zip Code Transaction ID: C1805554 FL Winter Park 32789 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Eric J. Miano M.D. Date of Receipt Mailing Address 12130 Sawhill Blvd 80 2012 07 City State Zip Code Transaction ID: C1804159 VA Spotsylvania 22553 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Spotsylvania Regional Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Douglas T. Miller M.D. Date of Receipt Mailing Address 2699 Lee Rd Ste 510 2012 80 27 City State Zip Code Transaction ID: C1814714 FL Winter Park 32789-1742 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation ago md Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) James K. Miller M.D. Date of Receipt Mailing Address 1924 Alcoa Hwy # U109 Anes. Dept. 01 2012 City State Zip Code Transaction ID: C1808577 TN Knoxville 37920-1511 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation University of Tennessee Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael D. Miller M.D. Date of Receipt Mailing Address 15936 Oak Park Ct 80 2012 06 City State Zip Code Transaction ID: C1802673 Westfield IN 46074-9140 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation **ACI-LLC** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 624.10 Other (specify) Full Name (Last, First, Middle Initial) c. Christopher G. Millson M.D. Date of Receipt Mailing Address 2400 Wimbledon Dr 2012 80 15 City Zip Code State Transaction ID: C1807489 NV Las Vegas 89107-2364 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Desert Anesthesiologists physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 207.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Commit	ttee
Full Name (Last, First, Middle Initial)  Michael Q. Milz M.D.  Mailing Address 5211 Terre Bone Trl  City  Eau Claire  FEC ID number of contributing federal political committee.  Name of Employer  Eau Claire Anes  Receipt For:  Primary  Other (specify)	State Zip Code WI 54701-9380  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 30 2012  Transaction ID : C1816836  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Mitchell F. Minana M.D.  Mailing Address 1306 E Welden Dr  City Spokane  FEC ID number of contributing federal political committee.  Name of Employer PHYSICIAN ANETHESIOLOGIST GROUP  Receipt For:  Primary General Other (specify)	State Zip Code WA 99223  C  Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  C. Sharon D. Minott M.D.  Mailing Address 2300 Haggerty Rd Ste 2100  City  West Bloomfield  FEC ID number of contributing federal political committee.  Name of Employer  AAKC  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48323-2191  C Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼	Date of Receipt  M M M / 31
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		850.00

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Barry Moody M.D. Date of Receipt Mailing Address 216 Marengo St., Suite F 2012 21 City State Zip Code Transaction ID: C1811743 Florence AL 35630 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Barry J. Moody, DMD, MD, PC physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Avijit Mookerjee M.D. Date of Receipt Mailing Address 5150 Winlane 80 2012 31 City State Zip Code Transaction ID: C1817347 Bloomfield Hills MI 48302 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **AAKC ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas A. Moore II, M.D. Date of Receipt Mailing Address 1748 Vestwood Hills Dr 2012 80 01 City State Zip Code Transaction ID: C1808572 ΑL Vestavia 35216 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Physician University of Alabama School of Medici Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 875.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) George A. Moresea M.D. Date of Receipt Mailing Address 1232 Ashwood Rd 30 2012 City Zip Code State Transaction ID: C1816598 OH Akron 44312-5800 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Stark County Anesthesia, Inc. anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 333.20 Other (specify) Full Name (Last, First, Middle Initial) B. Robert R. Morrison M.D. Date of Receipt Mailing Address 5801 Spinnaker Pointe 80 2012 07 City State Zip Code Transaction ID: C1803254 MO Parkville 64152-6102 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Ad Vivum Anesthesiology, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Scott C. Morrow M.D. Date of Receipt Mailing Address 8252 Tivoli Drive 2012 80 25 City State Zip Code Transaction ID: C1814593 FL Orlando 32836-8768 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 833.30 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) Phillip J. Mosca M.D. Date of Receipt Mailing Address 135 Sheffield Dr 2012 City Zip Code State Transaction ID: C1807462 Freehold NJ 07728-7771 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Phillip J. Mosca, M.D., LLC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Frank Moya M.D. Date of Receipt Mailing Address 1450 Madruga Ave Ste 207 80 2012 13 City State Zip Code Transaction ID: C1806125 Coral Gables FL 33146 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Retired Retired physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jianlong Mu M.D. Date of Receipt Mailing Address 5 Harvest Ln 2012 80 25 City Zip Code State Transaction ID: C1814535 DF Hockessin 19707-2088 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Anesthesia Service, PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

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ITEI	MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check or X 11a 13	nly one) 11b 14	11c	12 16	17
	information copied from such Reports and S							
N	AME OF COMMITTEE (In Full) American Society of Anesthesia		· ·					
<b>A</b> N	ull Name (Last, First, Middle Initial)  Michael L. Mueller M.D.  ailing Address 1520 Chandler Rd SE			Date o			2012	Y
Ci H	ty luntsville	State AL	Zip Code 35801-1476		nsaction ID nt of Each			
	EC ID number of contributing deral political committee.	С					1000	.00
C	omprehensive Anesthesia Services eceipt For: Primary Other (specify)	Occupation Anesthesiol Aggregate						
	ull Name (Last, First, Middle Initial)			Date (	of Receipt			
M Ci	ailing Address 221 Elm Hill St	State	Zip Code	08	16	3	2012	Y
	pringfield	VT	05156-2424		nt of Each			
FE	EC ID number of contributing deral political committee.	С			The of Eddin	Toolpt .	83.	.30
	ame of Employer A Medical Center	Occupation anesthesiol						
Re	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 666.40					
CF	ull Name (Last, First, Middle Initial) Robert F. Murray III, M.D.			Date of	of Receipt			
_	ailing Address 19 Elm Park Blvd.			08	17	7	2012	Y
Ci P	ty Pleasant Ridge	State MI	Zip Code 48069-1106		nsaction ID nt of Each			
fe	EC ID number of contributing deral political committee.	С				- 1	83	.30
	ame of Employer	Occupation						
William Beaumont Hospital Physician Receipt For:				_				
	Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.40					
SUE	BTOTAL of Receipts This Page (optional)				- 7		1166.	60
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## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 126 OF 210 Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) John D. Nachtigal M.D. Date of Receipt Mailing Address 3901 Rainbow Blvd MS 1034 07 2012 City Zip Code State Transaction ID: C1804186 KS Kansas City 66160 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Assistant Professor University of Kansas Physicians Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Y. Nakajima M.D. Date of Receipt Mailing Address PO Box 4918 80 2012 24 City State Zip Code Transaction ID: C1814523 FL Orlando 32802-4918 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Wolverine Anesthesia Consultants Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial)

c. Balajee G. Nallamothu M.D. Date of Receipt Mailing Address 2930 W Hickory Grove Rd 2012 80 23 City Zip Code State Transaction ID: C1812785 MI Bloomfield Hills 48302-0931 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation SOAA anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

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

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

FOR LINE NUMBER: PAGE 127 OF 210 Use separate schedule(s) (check only one) X 11a 11b 12 11c

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) Norah N. Naughton M.D. Date of Receipt Mailing Address 4270 Plymouth Road 2012 25 City Zip Code State Transaction ID: C1814543 Ann Arbor MI 48109 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation University of Michigan Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) B. James E. Navratil M.D. Date of Receipt Mailing Address 9288 E Mountain Spring Rd 80 26 2012 City State Zip Code Transaction ID: C1814650 Scottsdale ΑZ 85255-6608 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Valley Anesthesiology Consultants, Ltd Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin S. Neff M.D. Date of Receipt Mailing Address 25870 Woodlore Rd 2012 80 31 City State Zip Code Transaction ID: C1817332 MI Franklin 48025 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST AAKC** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 833.30 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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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Society of Anesthesic	logists Political Action Committee	
Full Name (Last, First, Middle Initial)  A. Eric J. Neller M.D.  Mailing Address 9316 Autumn Road		Date of Receipt
		08 02 2012
City	State Zip Code OK 73151	Transaction ID : C1802440
Oklahoma City	OK 73151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Eric Neller MD PLLC	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Khanh Nguyen M.D.		Date of Receipt
Mailing Address 3 Northwood PI		08 07 Y = Y = Y = Y = Y
City	State Zip Code  NJ 07722-1438	Transaction ID : C1804183
Colts Neck	NJ 07722-1438	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Anesthebest, LLC	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Michael S. Nichols A.AC		Date of Receipt
Mailing Address 2580 Hillandale Cir		08 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1807471
Cumming	GA 30041-6320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.30
Name of Employer	Occupation	
Case Western Reserve University MSA Pr	Anesthesiologist Assistant	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	666.40	
SUBTOTAL of Receipts This Page (optional)		1083.30
TOTAL This Period (last page this line number	only)	

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 129 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

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ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 14

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	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full)	and address of any pointed committee to	2 22 35
, ,	ologists Political Action Committee	9
Full Name (Last, First, Middle Initial)  Nilliam W. Nichols M.D.		Date of Receipt
Mailing Address 1515 37th Ave		08 20 2012
City	State Zip Code	Transaction ID : C1811682
Seattle	WA 98122-3469	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Physicians Anesthesia Service	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial)  3. Daniel G. Nicoli M.D.		Date of Receipt
Mailing Address 5540 Tanglewood Dr.		M = M / D = D / Y = Y = Y
City	State Zip Code	08 06 2012
Ann Arbor	MI 48105-9549	Transaction ID : C1803165  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Anesthesia Associates of Ann Arbor	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) C. Craig A. Nordhues M.D.		Date of Receipt
Mailing Address 104 Inverness Dr		08 11 2012
City	State Zip Code	Transaction ID : C1805500
Dothan	AL 36305-7287	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Anesthesia Consultants Medical Grp	Staff Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
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) Patrick J. Noud M.D. Date of Receipt Mailing Address 6914 NW 126th Ave 2012 City State Zip Code Transaction ID: C1811153 FL Parkland 33076-1964 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation ANESCO North Broward Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Blessing B. Nwosu M.B., B.S. Date of Receipt Mailing Address 188 Santure St. 80 21 2012 City State Zip Code Transaction ID: C1811819 MI Monroe 48162-4128 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation HARPER UNIVERSITY HOSPITAL **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard P. O' Flynn M.D. Date of Receipt Mailing Address 10 White Pine Ln. 2012 80 12 City State Zip Code Transaction ID: C1805544 PΑ Rose Valley 19063 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Society Hill Anesthesia Consultants at Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X) IT

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	Detailed Summary Page		11a		11b	11	c	_ 1	2		
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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)											

Full Name (Last, First, Middle Initial) Jerome F. O'Hara Jr., M.D.		Date of Receipt
Mailing Address 2931 Hunters Woods Ln		08 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Willoughby Hills	State Zip Code OH 44094	Transaction ID : C1816589  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cleveland Clinic	Occupation Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Oluwatosin Oladipupo M.D.		Date of Receipt
Mailing Address 1836 S Shores Dr		08 23 2012
City Decatur	State Zip Code IL 62521-5529	Transaction ID : C1812822  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Associated Anes. of Decatur	Occupation Anesthesiologist	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 966.00	
Full Name (Last, First, Middle Initial) Thomas A. Olen D.O.		Date of Receipt
Mailing Address 2141 N. Yasimin Ct.		08 04 _ 2012 _
City Midland	State Zip Code MI 48642-8897	Transaction ID : C1802518  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer MidMichigan Anesthesiology Group PC	Occupation Anesthesiologist	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  332.80	
	<b>_</b>	391.60

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Bryan Orme M.D. Date of Receipt Mailing Address 10001 E 33rd Street 2012 26 City Zip Code State Transaction ID: C1814657 OK Jones 73049 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Affiliated Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Walid A. Osta M.D. Date of Receipt Mailing Address 27222 Timber Trl 80 2012 31 City State Zip Code Transaction ID: C1817334 Dearborn Hts MI 48127-3386 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. James A. Ottevaere M.D. Date of Receipt Mailing Address 8115 160th St 30 2012 80 City Zip Code State Transaction ID: C1816837 WI Chippewa Falls 54729-8008 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Eau Claire Anesthesiologists Ltd. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 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) Lynn D. Owen D.O. Date of Receipt Mailing Address 411 Laurel St., #3170 2012 City State Zip Code Transaction ID: C1812965 Des Moines IΑ 50314 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Medical Center Anesthesiologists, PC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin A. Pace D.O. Date of Receipt Mailing Address 231 Charleston Court, South 80 17 2012 City State Zip Code Transaction ID: C1811250 AL Montgomery 36117 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Montgomery Anesthesia Assoc. **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mansukhlal G. Padalia M.D. Date of Receipt Mailing Address 2115 Orleans Dr. 2012 80 24 City State Zip Code Transaction ID: C1813496 FL Tallahassee 32308 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Anesthesiology Assoc. of Tallahassee Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 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 or for commercial purposes, other than using the	Statements may not be sold or used by any persone 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 Anesthesi	ologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  1. Juhan Paiste M.D.		Date of Receipt
Mailing Address 1245 S. Cedar Crest Blvd.		M = M / D = D / Y = Y = Y
Suite 301 City	State Zip Code	08 25 2012
Allentown, PA	PA 18103	Transaction ID : C1814544  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.30
Name of Employer Allentown Anesthesia Associates, Inc.	Occupation MD	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 666.40	
Full Name (Last, First, Middle Initial)  Chol Y. Pak M.D.  Mailing Address 5716 NW El Rey Dr	•	Date of Receipt
		08 05 2012
City	State Zip Code	Transaction ID : C1802541
Camas	WA 98607-9120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Columbia Anesthesia Group	Occupation Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  C. Brian S. Pallohusky M.D.		Date of Receipt
Mailing Address 4600 E Berkeley St		08 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Springfield	State Zip Code MO 65809-3528	Transaction ID : C1808559
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  83.00
Name of Employer	Occupation	
Mercy Hospital Springfield	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	951.00	
SUBTOTAL of Receipts This Page (optional)		216.30
TOTAL This Period (last page this line numbe	r only)	

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PAGE 136 OF 210 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) Richard E. Park M.D. Date of Receipt Mailing Address 11299 Ross Ct 2012 31 City Zip Code State Transaction ID: C1816894 Union KY 41091-9697 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation SEMC Anes. Dept. physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott G. Parkhill M.D. Date of Receipt Mailing Address 300 S. Arlington Ave. 80 14 2012 City State Zip Code Transaction ID: C1807455 NV Reno 89501 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Associated Anes. of Reno anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Harry G. Parr D.O. Date of Receipt Mailing Address 4725 Tully Rd. 2012 80 15 City Zip Code State Transaction ID: C1807472 MI Bloomfield Hills 48302 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Physician South Oakland Anesthesia Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 1083.30 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) Kathleen G. Parr M.D. Date of Receipt Mailing Address 5008 IIchester RD 2012 24 City Zip Code State Transaction ID: C1814520 MD Ellicott City 21043 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Parkway Anesthesia Associates Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Padmavathi Patel M.D. Date of Receipt Mailing Address 3990 John R 80 2012 31 City State Zip Code Transaction ID: C1817352 MI Detroit 48201 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Harper Univ. Hospital **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael A. Patt M.D. Date of Receipt Mailing Address 1510 Surria Ct. 2012 80 31 City Zip Code State Transaction ID: C1817349 MI Bloomfield Hills 48304 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **Medical Doctor** SOAA 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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	13	14	15	16	17

	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 Anesthesi	iologists Political Action Committee	)
Full Name (Last, First, Middle Initial) Cheryl A. Patterson M.D.  Mailing Address 972 Mc Donald Dr.  City Northville  FEC ID number of contributing federal political committee.  Name of Employer Anesthesia Associates of Ann Arbor  Receipt For: Primary General Other (specify)	State Zip Code MI 48167  C  Occupation physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  08 25 2012  Transaction ID: C1814538  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Toni R. Patterson D.O.  Mailing Address 927 Arlington Oaks Ter  City Chesterfield  FEC ID number of contributing federal political committee.  Name of Employer Physician Anesthesia Services  Receipt For: Primary General Other (specify)	State Zip Code MO 63017-5903  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / 20
Full Name (Last, First, Middle Initial)  William J. Pekarske M.D.  Mailing Address 1281 E. Calle De La Cabra  City Tucson  FEC ID number of contributing federal political committee.  Name of Employer  Southern Arizona Anesthesia Services  Receipt For:  Primary General Other (specify)	State Zip Code AZ 85718  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  666.40	Date of Receipt  M M M / 30 2012  Transaction ID : C1816619  Amount of Each Receipt this Period  83.30
SUBTOTAL of Receipts This Page (optional)	<u> </u>	583.30
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210 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) Samuel Perov M.D. Date of Receipt Mailing Address 5027 W. Bloomfield Lake Rd 2012 31 City Zip Code State Transaction ID: C1817337 West Bloomfield MI 48323 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST Detroit Receiving Hospital** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeremie J. Perry M.D. Date of Receipt Mailing Address 2410 Whispering Oaks Ct. 80 2012 01 City State Zip Code Transaction ID: C1808569 TX Abilene 79606-4366 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Name of Employer Occupation Hendrick Anesthesia Network Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 664.00 Other (specify) Full Name (Last, First, Middle Initial) c. Theodore A. Peterson M.D. Date of Receipt Mailing Address 3632 21st Ave. S. 30 2012 80 City Zip Code State Transaction ID: C1816812 MN St. Cloud 56301-8935 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Anesthesia Associates of St. Cloud Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 583.00 SUBTOTAL of Receipts This Page (optional).....

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	Statements may not be sold or used by any per- e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committee	e
Full Name (Last, First, Middle Initial) Lang-Ha T. Pham M.D.  Mailing Address 10015 Petra Ct NE		Date of Receipt
Mailing Address 10015 Petra Ct NE		08 07 2012
City	State Zip Code	Transaction ID : C1804175
Albuquerque	NM 87122-3340	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Presbyterian Hospital, Albuquerque	MD	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Keith N Phillippi M.D.		Date of Receipt
Mailing Address 109 Shoreline Dr		08 24 2012
City	State Zip Code GA 31211-6331	Transaction ID : C1814180
Macon FEO ID analysis of analysis time.	GA 31211-6331	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Anesthesia Associates of Macon	Physician	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Amy M. Pichoff M.D.		Date of Receipt
Mailing Address 3901 Rainbow Blvd MC 103  Department of Anesthesiology	ау	08 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Kansas City	State         Zip Code           KS         66103-2937	Transaction ID : C1805638  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
University Kansas Medical Center	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
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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) Wesley V. Picolo Jr., M.D. Date of Receipt Mailing Address 7401 SW 5th St. 2012 24 City Zip Code State Transaction ID: C1813504 FL Plantation 33317 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Sheridan Health Care anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Margaret A. Pitts M.D. Date of Receipt Mailing Address 25 Birchdale Rd 80 2012 01 City State Zip Code Transaction ID: C1808556 NH Bow 03304-4405 Amount of Each Receipt this Period FEC ID number of contributing 83.00 federal political committee. Name of Employer Occupation Anesthesia Associates PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 664.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeffrey Plagenhoef M.D. Date of Receipt Mailing Address 1118 Ross Clark Circle, Suite 700 2012 Anesthesia Consultants Medical Gro 80 15 City Zip Code State Transaction ID: C1807490 ΑL Dothan 36301 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Anesthesia Consultants Medical Group anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 416.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)		
, ,	ologists Political Action Committee	
<u>'</u>		
Full Name (Last, First, Middle Initial)  A. David M. Polaner M.D.		Date of Receipt
Mailing Address 13123 E 16th Ave		M M / D D / Y Y Y Y
Dept. of Anesthesiology, B090		08 29 2012
City	State Zip Code	Transaction ID : C1816509
Aurora	CO 80045-7106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
University of Colorado	physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	gggg 10al to Dato ¥	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Dean Polce D.O.		Date of Receipt
Mailing Address 3092 Red Arrow Dr		M = M / D = D / Y = Y = Y
011		08 16 2012
City	State Zip Code	Transaction ID : C1808528
Las Vegas	NV 89135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Anesthesiology Consultants, Inc	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00.0	
Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)		
Roma C. Polce M.D.		Date of Receipt
Mailing Address 3092 Red Arrow Dr.		08 01 2012
City	State Zip Code	Transaction ID: C1808578
Las Vegas	NV 89135-1303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer	Occupation	
VAMC Southern Nevada	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real-to-Date ₹	
Other (specify)	1330.40	
SUBTOTAL of Receipts This Page (optional)		433.00
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TOTAL This Period (last page this line number	oniy)	

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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	<del></del>
Full Name (Last, First, Middle Initial)  A. Roma C. Polce M.D.		Date of Receipt
Mailing Address 3092 Red Arrow Dr.		08 16 2012
City Las Vegas	State Zip Code NV 89135-1303	Transaction ID : C1808520
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  83.30
Name of Employer  VAMC Southern Nevada  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation Anesthesiologist  Aggregate Year-to-Date ▼  1330.40	
Full Name (Last, First, Middle Initial) Linda S. Polley M.D.  Mailing Address 12 Ridgeway St		Date of Receipt
City Ann Arbor	State Zip Code MI 48104-1739	7 Transaction ID : C1814529  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer University of Michigan Health System	Occupation anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  2. Julia E. Pollock M.D.		Date of Receipt
Mailing Address 1100 Ninth Avenue B2-AN		08 28 2012
City Seattle	State Zip Code WA 98111	Transaction ID : C1816297  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	-
Virginia-Mason Medical Center Receipt For:	anesthesiologist	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1583.30
TOTAL This Period (last page this line number	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) Karl A. Poterack M.D. Date of Receipt Mailing Address 5777 E Mayo Blvd 2012 28 City State Zip Code Transaction ID: C1816420 Phoenix ΑZ 85054-4502 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Mayo Foundation anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Johnathan L. Pregler M.D. Date of Receipt Mailing Address 10556 Dunleer Dr 08 2012 15 City State Zip Code Transaction ID: C1807467 CA Los Angeles 90064-4318 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation UCLA Dept of Anesthesiology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. John Q. Public Date of Receipt Mailing Address 520 N. Northwest Hwy 2012 80 01 City State Zip Code Transaction ID: C1808554 IL Park Ridge 60068 Amount of Each Receipt this Period FEC ID number of contributing 41.00 С federal political committee. Name of Employer Occupation ASA Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) 1124.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTE		lagista Dalitical Astion Committee	
American Soci	ety of Anesthesio	ogists Political Action Committee	
Full Name (Last, First Jacob S. Pugsley Mailing Address 123:	M.D.		Date of Receipt
-			08 08 2012
City Salt Lake City		State Zip Code UT 84103	Transaction ID : C1804649
FEC ID number of co federal political comm	•	C	Amount of Each Receipt this Period  250.00
Name of Employer		Occupation	
Mountain West Anesth	esia	Physician	
Receipt For: Primary Other (specify)	General ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First Jonathan S. Rad	lin M.D.		Date of Receipt
Mailing Address 1272	0 Frank Dr S		08 23 2012
City		State Zip Code	Transaction ID : C1813472
Seminole		FL 33776-1726	Amount of Each Receipt this Period
FEC ID number of co federal political comm		C	250.00
Name of Employer Bay Area Anesthesia		Occupation	
Receipt For:		Physician	
Primary Other (specify)	General ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First C. Owen R. Rahm			Date of Receipt
Mailing Address 4580	Island Reef Dr		08 06 2012
City Wellington		State Zip Code FL 33449-8394	Transaction ID : C1803168  Amount of Each Receipt this Period
FEC ID number of co federal political comm	•	C	250.00
Name of Employer		Occupation	
Sheridan Healthcare		Anesthesiologist	
Receipt For: Primary	Company	Aggregate Year-to-Date ▼	
Other (specify)	General ▼	250.00	
SUBTOTAL of Receipts	This Page (optional)		750.00
TOTAL This Period (las	t page this line number o	nly)	
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NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Craig D. Ramsdell M.D. Date of Receipt Mailing Address 56 Lochmoor Blvd. 2012 City State Zip Code Transaction ID: C1811254 MI 48236 **Grosse Pointe Shores** Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesiologist South Oakland Anesthesia Associates, P Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stephanie L. Randall M.D. Date of Receipt Mailing Address 6911 Van Dorn St Ste 2 80 2012 10 City State Zip Code Transaction ID: C1805360 NE 68506-6801 Lincoln Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Associated Anesthesiologists, PC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sripad P. Rao M.D. Date of Receipt Mailing Address 1504 Bay Rd Apt 3307 2012 80 01 City State Zip Code Transaction ID: C1808558 FL Miami Beach 33139-3281 Amount of Each Receipt this Period FEC ID number of contributing C 83.00 federal political committee. Name of Employer Occupation Anesthesiologist Ryder Trauma Center Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 664.00 Other (specify) 833.00 SUBTOTAL of Receipts This Page (optional).....

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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) Puli G. Reddy M.D. Date of Receipt Mailing Address 1118 Ross Clark Circle, #700 2012 28 City Zip Code State Transaction ID: C1816302 Dothan AL 36301 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Anes. Consultants Medical Group anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. John R. Reisinger M.D. Date of Receipt Mailing Address 1526 Northway Dr 80 22 2012 City State Zip Code Transaction ID: C1812780 Saint Cloud MN 56303 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Central Minnesota Anesthesia, Ltd. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mikhail Reznikov M.D. Date of Receipt Mailing Address 6899 Reed Ct. 2012 80 31 City Zip Code State Transaction ID: C1817338 MI West Bloomfield 48322 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST AAKC** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 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 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) Keith A. Riabov M.D. Date of Receipt Mailing Address 3 Warwick Rd 2012 31 City State Zip Code Transaction ID: C1817307 07928-1516 Chatham NJ Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Self Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda J. Rice M.D. Date of Receipt Mailing Address 1139 42nd Ave N 80 02 2012 City State Zip Code Transaction ID: C1802446 Saint Petersburg FL 33703-4535 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation All Childrens Hospital pediatric anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify)

Culoi (openily) 🔻		
Full Name (Last, First, Middle Initial)  C. Thomas J. Rich M.D.		Date of Receipt
Mailing Address 2900 Keelingwood Ct.		08 06 2012
City	State Zip Code	Transaction ID : C1802675
Virginia Beach	VA 23454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer	Occupation	_
Atlantic Anesthesia, Inc.	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	249.60	

2291.60

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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) Don G. Richter M.D. Date of Receipt Mailing Address 15135 Stearns PI 01 2012 City Zip Code State Transaction ID: C1799119 KS Shawnee Mission 66221-9503 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Midwest Anesthesia, Assoc physician anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cameron J. Ricks M.D. Date of Receipt Mailing Address 33965 Malaga Dr 80 2012 16 City State Zip Code Transaction ID: C1808521 Dana Point CA 92629-2456 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation **UC Irvine Dept Anes** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 249.60 Other (specify) Full Name (Last, First, Middle Initial) Joseph M. Rifici A.A.-C Date of Receipt Mailing Address Lakeside ANES 2532 LKS5007 2012 80 15 11100 Euclid Ave. City State Zip Code Transaction ID: C1807484 OH Cleveland 44106-1716 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Univ Hosp of Cleveland Case Med Ctr Anesthesiologist Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 374.90 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Robert K. Rigsby M.D. Date of Receipt Mailing Address 235 Live Oak Ln. 2012 26 City Zip Code State Transaction ID: C1814612 FL Altamonte Springs 32714 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **JLRmed** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeremy M. Roberts D.O. Date of Receipt Mailing Address 4056 Scott B Dr 08 31 2012 City State Zip Code Transaction ID: C1817348 Saint Clair MI 48079-3564 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation ASAPC C/O ABC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Vonn E. Roberts M.D. Date of Receipt Mailing Address 5111 Cavvy Rd 2012 80 16 City Zip Code State Transaction ID: C1810350 NF Lincoln 68516-3415 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Associated Anesthesiologists physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) American Society of Anesthes	siologists Political Action Committee	e
Full Name (Last, First, Middle Initial)  Babak Roboubi M.D.		Date of Receipt
Mailing Address 7305 Helmsdale Rd.		08 18 2012
City	State Zip Code	Transaction ID : C1811162
Bethesda	MD 20817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	+
Washington hospital center	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  Ignacio J. Rodriguez M.D.		Date of Receipt
Mailing Address 2387 W 68th St Ste 401		08 01 2012
City	State Zip Code	Transaction ID : C1808575
Hialeah	FL 33016-6890	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer	Occupation	1
South Miami Pain Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General  Other (specify) ▼	664.00	
Full Name (Last, First, Middle Initial)  John Rogoski D.O.		Date of Receipt
Mailing Address Dept. of Anesthesiology Doan Hall N411		08 18 2012
City	State Zip Code	Transaction ID : C1811144
Columbus	OH 43210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.30
Name of Employer	Occupation	1
Wexner Medical Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	666.40	
SUBTOTAL of Receipts This Page (optional).		666.30
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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) Melissa D. Rose M.D. Date of Receipt Mailing Address 109 Masters Way 20 2012 City Zip Code State Transaction ID: C1811315 TN Hendersonville 37075 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Anesthesia Services Associates, PLLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Frank Rosemeier M.D. Date of Receipt Mailing Address 10004 Crystalline Ct 80 2012 13 City State Zip Code Transaction ID: C1806119 FL Orlando 32836-6024 Amount of Each Receipt this Period FEC ID number of contributing 377.00 federal political committee. Name of Employer Occupation JLR Medical Group Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 377.00 Other (specify) Full Name (Last, First, Middle Initial) c. Frank A. Rosinia M.D. Date of Receipt Mailing Address 23 Idlewood PI 2012 80 18 City Zip Code State Transaction ID: C1811147 LA River Ridge 70123-1525 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Chairman, Department of Anesthesiology Tulane University School of Medicine Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 710.30 SUBTOTAL of Receipts This Page (optional).....

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for commercial purposes, other than using the name and a	ddress of any political committee	to sol	icit cor	ntribut	tions	fron	n such	CO	mmitt	ee.	

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Society of Anesthes	siologists Political Action Committee	•
Full Name (Last, First, Middle Initial)  A. Ronald J. Rothstein M.D.  Mailing Address 1728 Via Boronada		Date of Receipt
City	State Zip Code	08 20 2012 Transaction ID : C1811715
Palos Verdes Estates	CA 90274	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer  Torrance Anesthesia Medical Group	Occupation Anesthesiologist	
Receipt For:  Primary  Other (specify)	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Lawrence J. Roy M.D.  Mailing Address 2420 Freeman Manor Dr	·	Date of Receipt
City Jones	State Zip Code OK 73049-8747	08 16 2012  Transaction ID : C1808529  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.30
Name of Employer Oklahoma Anesthesia Consultants	Occupation Anesthesioligist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 666.40	
Full Name (Last, First, Middle Initial)  C. Michael G. Royce M.D.		Date of Receipt
Mailing Address 2469 E 33rd St		08 062012 _
City Tulsa	State Zip Code OK 74105-2316	Transaction ID : C1803143  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Assoc. Anesthesiologists, Inc.	Occupation Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1333.30
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#### SCHEDULE A (FEC Form 3X) ITEMI

FOR LINE NUMBER: PAGE 154 OF 210

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rmation copied from such Reports and Statements ma	ay not be sold or used by any pe	rson f	or the	pur	pose o	of so	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) Stephen M. Rublaitus D.O. Date of Receipt Mailing Address 278 S Kenmore Avenue 2012 City State Zip Code Transaction ID: C1805510 Elmhurst IL 60126 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation **Dupage Valley Anes** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Konstantin I. Rusin M.D. Date of Receipt Mailing Address 1732 Foxdale Lane 80 2012 31 City State Zip Code Transaction ID: C1817339 MI Ann Arbor 48108 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **AAKC ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Russell M.D. Date of Receipt Mailing Address 4190 Skyline Ranch Court 2012 80 28 Zip Code City State Transaction ID: C1816360 SD Rapid City 57701 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation WRAC, Inc Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional).....

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PAGE 155 OF 210 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) Christa Rylant M.D. Date of Receipt Mailing Address 13321 N Meridian Ave Ste 402 2012 27 City Zip Code State Transaction ID: C1814812 OK Oklahoma City 73120-8356 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Affiliated Anesthesiologists LLC Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rita Fattouch Saikali M.D. Date of Receipt Mailing Address 52 Prince of Wales Ct 80 2012 29 City State Zip Code Transaction ID: C1816500 Williamsville NY 14221-1900 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Wagdy Ghaly MD PC Resident Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard G. Saloom M.D. Date of Receipt Mailing Address 1757 Imperial Blvd 2012 80 23 City State Zip Code Transaction ID: C1813482 LA Lake Charles 70605 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Imperial Calcasieu Surgery Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional).....

# SCHEDULE A (FEC Form 3X)

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	NAME OF COMMITTEE (In Full)										
$\rangle$	American Society of Anesthes	iologists P	olitical Action Committe	ee							
Α.	Full Name (Last, First, Middle Initial) Bruce S. Saltzman M.D.				Date of	f Re	ceipt				
	Mailing Address 1581 Brickell Ave., Apt. #230	01			08	/	27	/ Y	2012		
	City	State	Zip Code		Trans	acti	ion ID :	C181626	6		
	Miami	FL	33129-1241		Amount	t of	Each R	eceipt th	is Perio	od	
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	University of Miami	ANESTHES	SIOLOGIST								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		250.00								
	Other (speedily)			4							
<del></del> В.	Full Name (Last, First, Middle Initial) Mahesh P. Sardesai M.D.				Date of	f Re	ceipt				
	Mailing Address 1304 Fairstead Lane				M = M 08	′	18	/ Y	2012		
	City	State	Zip Code					C181114			
	Pittsburgh	PA	15217		Amount	t of	Each R	eceipt th	is Perio	od	
	FEC ID number of contributing federal political committee.	С				_	7	7		83.30	)
	Name of Employer	Occupation									
	UPMC Shadyside	Anesthesiol	ogist								
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		666.40								
<del></del>	Full Name (Last, First, Middle Initial) John D. Scheub M.D.				Date of	f Re	ceipt				
	Mailing Address 585 Neck Road				08	7	27	/ Y	2012		1
	City	State	Zip Code		Trans	act	ion ID :	C181625	54		
	Rochester	MA	02770		Amount	t of	Each R	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С				Ξ	7	,	2	50.0	0
Name of Employer Occupation											
	Upper Cape Anesthesia	Anesthesio	logist								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General  Other (specify) ▼		250.00								
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Detailed Summary Page	X 11a 11b 11c 12	
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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 Full Name (Last, First, Middle Initial) Anthony Schinelli M.D. Date of Receipt Mailing Address 1855 Vermack Ct. 30 2012 City State Zip Code Transaction ID: C1816597 GΑ 30338-5127 Dunwoody Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation **PSA** physcian Receipt For: Aggregate Year-to-Date ▼ Primary General

Full Name (Last, First, Middle Initial) James C. Scott M.D.		Date of Receipt
Mailing Address 1512 Cornell Dr NE		08 08 2012
City	State Zip Code	Transaction ID : C1804276
Albuquerque	NM 87106-3704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Albuquerque VAMC	physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

208.00

Full Name (Last, First, Middle Initial) James A. Scowcroft M.D. Date of Receipt Mailing Address 3601 W 139th St 2012 03 80 Anesthesia Assoc. of Kansas City City Zip Code State Transaction ID: C1802477 KS Overland Park 66224-1127 Amount of Each Receipt this Period FEC ID number of contributing C 41.60 federal political committee. Name of Employer Occupation Physician Anesthesia Assoc. of Kansas City Receipt For: Aggregate Year-to-Date ▼ Primary General 208.00 Other (specify)

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# SCHEDULE A (FEC Form 3X)

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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Society of Anesthesi	ologists Political Action Committe	ee
Full Name (Last, First, Middle Initial)  A. Alvaro M. Segura-Vasi M.D.  Mailing Address 216 Marengo St Ste F  City Florence  FEC ID number of contributing federal political committee.  Name of Employer  Beer,Simon, Williams,Moody and Asso  Receipt For:  Primary General Other (specify)	State Zip Code AL 35630-6034  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 30 2012  Transaction ID : C1816657  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Kurt A. Senn M.D.  Mailing Address 3104 Blue Lake Dr., #110  City  Birmingham  FEC ID number of contributing federal political committee.  Name of Employer  Anesthesiologists Associated, P.C.  Receipt For:  Primary General Other (specify)	State Zip Code AL 35243  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼  500.00	Date of Receipt  08 28 2012  Transaction ID : C1816391  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Daniel W. Sewell M.D.  Mailing Address PO Box 51947  City  Knoxville  FEC ID number of contributing federal political committee.  Name of Employer  University Anesthesiologists  Receipt For:  Primary  General  Other (specify)	State Zip Code TN 37950-1947  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  08 20 2012  Transaction ID : C1811203  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)		1250.00
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FOR LINE NUMBER: PAGE 159 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

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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) George Sheplock M.D. Date of Receipt Mailing Address 705 Riley Hospital Drive, Rm 2001 2012 City Zip Code State Transaction ID: C1807485 IN Indianapolis 46202-5200 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Riley Hospital for Children Pediatric Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) B. Richard Y. Shin M.D. Date of Receipt Mailing Address 4123 Stoneleigh 80 31 2012 City State Zip Code Transaction ID: C1817340 Bloomfield Hills MI 48302 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **AAKC ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sally M. Shughart M.D. Date of Receipt Mailing Address 1837 Greenwood Rd SW 2012 80 01 City Zip Code State Transaction ID: C1799112 Roanoke VA 24015 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation ACV, Inc Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 583.30 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) Ben Shwachman M.D. Date of Receipt Mailing Address 315 N. 3rd Ave., Suite 200 2012 City Zip Code State Transaction ID: C1814517 CA Covina 91723-1915 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **PHYSICIAN** Self-Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ben Shwachman M.D. Date of Receipt Mailing Address 315 N. 3rd Ave., Suite 200 80 24 2012 City State Zip Code Transaction ID: C1814516 CA Covina 91723-1915 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self-Employed **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Karen S. Sibert M.D. Date of Receipt Mailing Address 4146 Sunnyslope Ave. 2012 80 16 City State Zip Code Transaction ID: C1808516 CA Sherman Oaks 91423 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Cedars-Sinai Medical Center Anes. Dept Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 583.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 161 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 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) Dean Sider M.D. Date of Receipt Mailing Address 2699 Lee Rd Ste 510 2012 21 City State Zip Code Transaction ID: C1811817 FL Winter Park 32789-1742 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Sheridan Healthcorp Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel L. Silvasi M.D. Date of Receipt Mailing Address 2655 Amberly 80 80 2012 City State Zip Code Transaction ID: C1804656 Bloomfield Hills MI 48301 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation American Anesthesiology of Michigan Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kirsten J. Simanonok M.D. Date of Receipt Mailing Address N78 W14573 Appleton Ave., #212 80 20 2012 Zip Code State Transaction ID: C1811240 WI Menomonee Falls 53051 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee.

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250.00

Occupation

Anesthesiologist

Aggregate Year-to-Date ▼

Name of Employer

Primary

Receipt For:

Orthopaedic Hospital Of Wisconsin

Other (specify)

General

federal political committee.

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Detailed Summary Page	X 11a 11b	11c 12
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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 Full Name (Last, First, Middle Initial) Joseph E. Simpson M.D. Date of Receipt Mailing Address 1524 Agawela Ave. 2012 City State Zip Code Transaction ID: C1805369 TN 37919-8317 Knoxville Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Anesthesiologist University Anesthesiologists Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Harpreet Singh M.D. Date of Receipt Mailing Address 4930 Charing Cross Road 80 2012 31 City Zip Code State Transaction ID: C1817341 Bloomfield Hills MΙ 48304 Amount of Each Receipt this Period FEC ID number of contributing

Name of Employer  AAKC  Receipt For:  Primary General  Other (specify) ▼	Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) C. Patrick W. Slatev M.D.  Mailing Address 1909 Mulholland Dr  City	State Zip Code	Date of Receipt  08 26 2012  Transaction ID : C1814659
Edmond  FEC ID number of contributing federal political committee.  Name of Employer  Affiliated Anesthesiologists  Receipt For:	OK 73012-4119  C  Occupation anesthesiologist  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  1000.00
Primary General  Other (specify) ▼	1000.00	1750.00

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250.00

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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) Robert H. Small M.D. Date of Receipt Mailing Address 410 W 10th Ave Dept of Anes - N411 Doan Hall 2012 City Zip Code State Transaction ID: C1807470 OH Columbus 43210 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation The Ohio State University Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) **B.** Blair Smith M.D. Date of Receipt Mailing Address 1046 Lake Colony Ln 80 2012 04 City State Zip Code Transaction ID: C1802516 AL Vestavia 35242 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation **UAB** Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Floyd L. Smith M.D., Ph.D. Date of Receipt Mailing Address 3410 Overholser Dr. 2012 80 20 City State Zip Code Transaction ID: C1811708 OK Bethany 73008-3554 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Mercy Hospital Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 416.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 164 OF 210 Use separate schedule(s) (check only one) X 11a 11b 11c 12

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) Jeremy B. Smith M.D. Date of Receipt Mailing Address 525 Boulder Lake Way 07 2012 City State Zip Code Transaction ID: C1803205 Vestavia AL 35242-2105 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation UAB Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joel D. Smith D.O. Date of Receipt Mailing Address 60 Tukey Rd. 80 22 2012 City State Zip Code Transaction ID: C1811860 ME Oakland 04963 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Maine General Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Perry W. Smith M.D. Date of Receipt Mailing Address 4017 Old Leeds Rdg 2012 80 01 City State Zip Code Transaction ID: C1799156 AL Mountain Brk 35213 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **UAB** anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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American Society of Anesthesiologists Political Action Committee  Full Name (Last, First, Middle Initial)  Mark T. Sontag M.D.  Maling Address 1101 W Clairemont Ave Ste 2C  Eau Claire Anes  State Zip Code  Eau Claire Anesthesiologists  Receipt For:  Occupation  Anesthesiologist  FEG ID number of contributing federal political committee.  City Anesthesiologist  Feau Claire Anesthesiologists  Anesthesiologist  Anesthesiologist  Fee primary General  Other (specify) ▼  Occupation  Altis Zip Code  Mil 48201-2018  FEC ID number of contributing federal political committee.  City Detroit  Mil 48201-2018  FEC ID number of contributing federal political committee.  Name of Employer  Name (Last, First, Middle Initial)  National Anesthesiologist  Aggregate Year-to-Date ▼  Occupation  ANESTHESIOLOGIST  Rocoipt For:  Other (specify) ▼  State Zip Code  Mil 48201-2018  FEG ID number of contributing federal political committee.  City Occupation  ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  Occupation  Altes Thesiologist  Polit Name (Last, First, Middle Initial)  National Aggregate Year-to-Date ▼  Occupation  Altes Thesiologist  Aggregate Year-to-Date ▼  Occupation  Anesthesiologist  Receipt For:  Aggregate Year-to-Date ▼  Occupation  Anesthesiologist  Receipt For:  Aggregate Year-to-Date ▼  Occupation  Anesthesiologist  Receipt For:  Aggregate Year-to-Date ▼  Occupation  Anesthesiologist  Anesthesiologist  Aggregate Year-to-Date ▼  Occupation  Anesthesiologist  Anesthesiologist  Aggregate Year-to-Date ▼  Occupation  Altes Thesion Thesion Thesion Page (optional)  Anesthesiologist  Aggregate Year-to-Date ▼  Occupation  Altes Thesion Thesio	Any information copied from such Reports and Sor 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.
A. Mark T. Sontag M.D.  Mailing Address 1101 W Clairemont Ave Ste 2C  Eau Claire  Eau Claire Anes  City  State Zip Code  Wil 54701-8161  FEC ID number of contributing federal political committee.  Name of Employer  Eau Claire Anesthesiologists  Receipt For:  Primary General  City  State Zip Code  Angergate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Vitaly D. Soskin M.D., Ph.D  Mailing Address 3990 John R St, Box 162  City  Date of Receipt Initial  Date of Receipt Initial  Anount of Each Receipt Initial  Date of Receipt Initial  Anount of Each Receipt Initial  Date of Receipt Initial  Anount of Each Receipt Initial  City  Primary General  Other (specify) ▼  State Zip Code  Anount of Each Receipt Initial  Date of Receipt  Transaction ID: C1817342  Anount of Each Receipt Initial  Anount of Each Receipt Initial  Date of Receipt  Transaction ID: C1817342  Anount of Each Receipt Initial  Anount of Each Receipt Initial  Date of Receipt  Transaction ID: C1817342  Anount of Each Receipt Initial  Date of Receipt  Transaction ID: C1817342  Anount of Each Receipt Initial  Anount of Each Receipt Ini	, ,	ologists Political Action Committee	•
State   Zip Code   Wil   54701-6161	Mark T. Sontag M.D.  Mailing Address 1101 W Clairemont Ave Ste 2	ec	M = M / D = D / Y = Y = Y
Eau Claire  FEC ID number of contributing federal political committee.  Name of Employer  Equil Name (Last, First, Middle Initial)  Vitaly D. Soskin M.D., Ph.D  Mailing Address 3990 John R St, Box 162  City  Detroit  FEC ID number of contributing federal political committee.  Name of Employer  Qother (specify) ▼  State Zip Code  MI 48201-2018  FEC ID number of contributing federal political committee.  Coccupation  AnsSTHESIOLOGIST  Receipt For:  Primary General  Other (specify) ▼  State Zip Code  MI 48302  FEC ID number of contributing federal political committee.  City  State Zip Code  AnSSTHESIOLOGIST  Aggregate Year-to-Date ▼  Other (specify) ▼  Date of Receipt this Period  Date of Receipt  Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Date of Re		State Zin Code	
FEC ID number of contributing tederal political committee.  Name of Employer Eau Claire Anesthesiologists Receipt For:    Primary   General     Other (specify) ▼     Other (specify) ▼     Pull Name (Last, First, Middle Initial)   Pull Name (Last, First, Middle Initial)   Other (specify) ▼     Other (specify) ▼     Date of Receipt     Other (specify) ▼     Other (specify) ▼	•	•	
Eau Claire Anesthesiologists Receipt For:  Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · · · ·	C	
Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial) 3. Vitaly D. Soskin M.D., Ph.D  Mailing Address 3990 John R St, Box 162  City State Zip Code MI 48201-2018  FEC ID number of contributing (ederal political committee.  Name of Employer Wayne State University School of Medic ANESTHESIOLOGIST  Receipt For: Primary General Other (specify) ▼ 250.00  Full Name (Last, First, Middle Initial)  ROY G. Sotto M.D.  Mailing Address 355 Sycamore Ct  City State Zip Code MI 48302  FEC ID number of contributing (ederal political committee.  C Date of Receipt  Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1817342  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1803225  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Transaction ID : C1803225  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼ 249.60	• •	· '	
Agregate Year-to-Date    State   Zip Code   Transaction ID : C1817342	Receipt For: Primary General		
City State Zip Code Detroit MI 48201-2018  FEC ID number of contributing federal political committee.  Name of Employer Wayne State University School of Medic Receipt For: Primary General Other (specify) ▼	3. Vitaly D. Soskin M.D., Ph.D		Date of Receipt
Detroit  MI 48201-2018  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Wayne State University School of Medic Receipt For:  Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial) Roy G. Soto M.D.  Mailing Address 355 Sycamore Ct  City Bloomfield Hills  MI 48302  FEC ID number of contributing federal political committee.  Name of Employer  William Beaumont Hospital Receipt For:  Primary General  Occupation Anesthesiologist Receipt For:  Primary General Other (specify) ▼  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : C1803225  Amount of Each Receipt this Period  41.60		Ctata 7in Cada	08 31 2012
FEC ID number of contributing federal political committee.  Name of Employer Wayne State University School of Medic Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Roy G. Soto M.D.  Mailing Address 355 Sycamore Ct  City Bloomfield Hills FEC ID number of contributing federal political committee.  Name of Employer William Beaumont Hospital Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: C1803225  Amount of Each Receipt this Period  41.60  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  249.60	•		
Wayne State University School of Medic Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Roy G. Soto M.D.  Mailing Address 355 Sycamore Ct  City State Zip Code MI 48302  FEC ID number of contributing federal political committee.  Name of Employer  William Beaumont Hospital Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Date of Receipt  Date of Receipt  Transaction ID: C1803225  Amount of Each Receipt this Period  41.60	•	С	
Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial) C. Roy G. Soto M.D.  Mailing Address 355 Sycamore Ct  City Bloomfield Hills FEC ID number of contributing federal political committee.  Name of Employer William Beaumont Hospital Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Table 10 Date of Receipt  M M A8302  Transaction ID : C1803225  Amount of Each Receipt this Period  41.60	Wayne State University School of Medic	· '	
Date of Receipt  Mailing Address 355 Sycamore Ct  City Bloomfield Hills Bloomfield Hills FEC ID number of contributing federal political committee.  Name of Employer William Beaumont Hospital Receipt For: Primary Other (specify) ▼  Date of Receipt  M M M M M M M M M M M M M M M M M M M	Primary General		
Mailing Address 355 Sycamore Ct  City Bloomfield Hills MI 48302  FEC ID number of contributing federal political committee.  Name of Employer William Beaumont Hospital Receipt For: Primary Other (specify) ▼  Primary  General  Other (specify) ▼  Primary  Aggregate Year-to-Date ▼  Transaction ID : C1803225  Amount of Each Receipt this Period  41.60			Date of Receipt
Bloomfield Hills  MI 48302  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  William Beaumont Hospital  Receipt For:  Primary  General  Other (specify) ▼  Amount of Each Receipt this Period  41.60  Amount of Each Receipt this Period  41.60	Mailing Address 355 Sycamore Ct		M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee.  Name of Employer  William Beaumont Hospital  Receipt For:  Primary  General  Other (specify) ▼  Aggregate Year-to-Date ▼  249.60	•	•	
William Beaumont Hospital  Receipt For:  Primary  General  Other (specify) ▼  Anesthesiologist  Aggregate Year-to-Date ▼  249.60	•	C	
Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  249.60	Name of Employer	Occupation	
Primary General Other (specify) ▼ 249.60		Anesthesiologist	
701.60	Primary General		
TOTAL This Period (last page this line number only)			791.60

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NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial)  Fouad Souki M.D.  Mailing Address 253 NE 2nd St Apt 1709		Date of Receipt
Maining / Nacional 255 NE 2Nd of Apr 1705		08 02 2012
City	State Zip Code	Transaction ID: C1802444
Miami	FL 33132-2292	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	
Jackson Health System	Anesthesiology	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Christopher L. Southwick M.D.		Date of Receipt
Mailing Address 10028 Perry Dr		M M / D D / Y Y Y Y Y
City	State Zip Code	08 19 2012 Transaction ID : C1811186
Overland Park	KS 66212-5418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Southwick LLC	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  C. George J. Spessot M.D.		Date of Receipt
Mailing Address 71 Judson Place		08 01 2012
City  Rockville Centre	State Zip Code NY 11571-0495	Transaction ID : C1808542
	11371-0493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer	Occupation	
NYU Hospital for Joint Diseases	Anesthesiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	664.00	
SUBTOTAL of Receipts This Page (optional)		1483.00
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) Rachel A. Spitznagel M.D. Date of Receipt Mailing Address 8200 Dodge St 2012 City Zip Code State Transaction ID: C1810521 ΝE Omaha 68114-4113 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Childrens Hospital and Medical Center anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brett M. Sprtel M.D. Date of Receipt Mailing Address 11934 Crossing Deer Ct 80 2012 09 City State Zip Code Transaction ID: C1804678 MI 48653-7538 Roscommon Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Mercy Hospital Grayling Dept of Anesth Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 747.60 Other (specify) Full Name (Last, First, Middle Initial) c. Douglas S. Spurgeon M.D. Date of Receipt Mailing Address 6911 Van Dorn, Suite 2 2012 80 09 City State Zip Code Transaction ID: C1804665 NF Lincoln 68506 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Associated Anesthesiology, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 583.30 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) Richard A. Stark M.D. Date of Receipt Mailing Address 915 E. Eagle Lake Dr. 30 2012 City Zip Code State Transaction ID: C1816790 49009-8426 Kalamazoo MI Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Kalamazoo Anesthesiology, PC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Erica Stein M.D. Date of Receipt Mailing Address 410 W 10th Ave., Anes. Dept. N411 Doan Hall 80 17 2012 City State Zip Code Transaction ID: C1810594 OH Columbus 43210-1240 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation ohio state university physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) **c.** John H. Stephenson M.D. Date of Receipt Mailing Address 5671 Peachtree Dunwoody Road 2012 80 14 Suite 530 City State Zip Code Transaction ID: C1806725 GΑ Atlanta 30342 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Physician Specialists in Anesthesia, P Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 832.40 Other (specify) 1166.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) Joseph Talarico D.O. Date of Receipt Mailing Address University of Pittsburgh Medical C 200 Lothrop St C-205 2012 15 City Zip Code State Transaction ID: C1807473 PΑ Pittsburgh 15213-2536 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Assistant Professor Univ. of Pittsburgh Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) B. Samuel E. Talsma M.D. Date of Receipt Mailing Address 2110 Dorset Rd. 80 2012 07 City State Zip Code Transaction ID: C1803224 MI Ann Arbor 48104 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation anesthesia assoc of ann arbor physician Receipt For: Aggregate Year-to-Date ▼ Primary General 999.80 Other (specify) Full Name (Last, First, Middle Initial) c. David A. Tavares Jr., M.D. Date of Receipt Mailing Address 3528 Crossbow Drive 2012 80 25 City Zip Code State Transaction ID: C1814600 TX Frisco 75033 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Ascendant Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 624.90 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) Robert Tawil M.D. Date of Receipt Mailing Address 17001 Jeanette 2012 31 City Zip Code State Transaction ID: C1817343 Southfield MI 48075-7020 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation AAKC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheryl M. Taylor M.D. Date of Receipt Mailing Address 24 Farringdon Dr 80 80 2012 City State Zip Code Transaction ID: C1804638 SC Greenville 29615-4238 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Foothills Anesthesia Consultants PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Geoffrey L. Taylor M.D. Date of Receipt Mailing Address 4708 Val Verde Dr 2012 80 20 City Zip Code State Transaction ID: C1811308 OK Oklahoma City 73142 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Affiliated Anesthesia LLC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) Julie M. Thompson M.D. Date of Receipt Mailing Address 8208 NW 134th Ter 2012 City Zip Code State Transaction ID: C1812736 OK Oklahoma City 73142-5012 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Affialiated Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Kyle Thompson M.D. Date of Receipt Mailing Address 333 W Hampden Ave #600 80 2012 30 City State Zip Code Transaction ID: C1816596 CO Englewood 80110 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation South Denver Anesthesiologists, P.C. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 791.40 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen W. Thompson M.D. Date of Receipt Mailing Address 1205 Country Lane 2012 80 22 City State Zip Code Transaction ID: C1812068 FL Orlando 32804-6511 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Anesthesiologists of Greater Orlando Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 833.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) David N. Thrush M.D. Date of Receipt Mailing Address 865 Seddon Cove Way 05 2012 City State Zip Code Transaction ID: C1802539 FL Tampa 33602-5704 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Moffitt Cancer Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. John D. Thurn M.D. Date of Receipt Mailing Address 8136 Rosewood Drive 80 80 2012 City State Zip Code Transaction ID: C1804280 Prairie Village KS 66208 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Kansas University Med. Ctr. Dept of An Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Ting M.D. Date of Receipt Mailing Address 1800 Northlawn Blvd 2012 80 20 City State Zip Code Transaction ID: C1811729 MI Birmingham 48009-1886 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Physician South Oakland Anesthesia Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 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) Pikul Tontapanish M.D. Date of Receipt Mailing Address Harpor Hosp. Div., Dept. of Anes. P.O. Box 1009 2012 31 City State Zip Code Transaction ID: C1817344 MI Jackson 49204 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation AAKC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronald L. Torline M.D. Date of Receipt Mailing Address 14109 Kessler St 80 2012 07 City State Zip Code Transaction ID: C1803241 Overland Park KS 66221-2123 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **KUAF** anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Troy Tortorici M.D. Date of Receipt Mailing Address 17401 Hawks View Ct 2012 80 01 City Zip Code State Transaction ID: C1808553 OK Edmond 73012 Amount of Each Receipt this Period FEC ID number of contributing 41.00 С federal political committee. Name of Employer Occupation Northwest Anesethesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 328.00 Other (specify) 791.00 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) James A. Totten M.D. Date of Receipt Mailing Address 3073 OBrien Dr 2012 27 City Zip Code State Transaction ID: C1816251 FL Tallahassee 32309-2752 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Tallahassee Memorial Hospital Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Terrence L. Trentman M.D. Date of Receipt Mailing Address 4811 E Patrick Ln 80 25 2012 City State Zip Code Transaction ID: C1814605 ΑZ Phoenix 85054-4502 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Mayo Clinic in Arizona physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Narendra S. Trivedi M.D. Date of Receipt Mailing Address 8143 E. Bailey Way, 2012 80 27 State Zip Code Transaction ID: C1816241 CA Anaheim Hills 92808 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Kaiser Permanente Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

#### SCHEDULE A (FEC Form 3X) IT

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Ar or NAME OF COMMITTEE (In Full) American Society of Anesthesiologists Political Action Committee Full Name (Last, First, Middle Initial) Christopher A. Troianos M.D. Date of Receipt Mailing Address 427 Heights Dr 2012 City Zip Code State Transaction ID: C1807474 PΑ Gibsonia 15044-6032 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation Allegheny Health Network Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) **B.** Terrence Truxillo M.D. Date of Receipt Mailing Address Department of Anesthesiology 1514 Jefferson Highway 80 2012 14 City State Zip Code Transaction ID: C1806724 **New Orleans** LA 70121-2429 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Ochsner Medical Center Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 332.80 Other (specify) Full Name (Last, First, Middle Initial) c. Avery Tung M.D., FCCM Date of Receipt Mailing Address 1711 Elmwood Avenue 2012 80 05 City State Zip Code Transaction ID: C1802555 IL Wilmette 60091-1555 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Professor Quality Chief for Anesthesia University of Chicago Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 374.90 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 177 OF 210 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 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) William S. Turnage M.D. Date of Receipt Mailing Address 400 Health Park Blvd. 2012 City State Zip Code Transaction ID: C1805643 FL St. Augustine 32086 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation Coastal Anes Consultants Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gary F. Tzeng M.D. Date of Receipt Mailing Address 582 S Rex Blvd 80 2012 17 City State Zip Code Transaction ID: C1810591 IL **Elmhurst** 60126-4259 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation DVA physician Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Mathew R. Van Vleck M.D. Date of Receipt Mailing Address 1755 Lincolnshire Dr. 2012 80 01 City Zip Code State Transaction ID: C1808576 MI Rochester Hills 48309 Amount of Each Receipt this Period FEC ID number of contributing 83.00 С federal political committee. Name of Employer Occupation SOAA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)	Ξ	_	7		Ξ	7	Ξ	266	66.30	0
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664.00

Primary

Other (specify)

General

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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) Matthew B. Vance M.D. Date of Receipt Mailing Address PO Box 51947 20 2012 City Zip Code State Transaction ID: C1811666 TN Knoxville 37950-1947 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation University Anesthesiologists Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** David J. Vangura M.D. Date of Receipt Mailing Address 62 Jefferson Ave 80 2012 80 City State Zip Code Transaction ID: C1804647 FL Ponte Vedra 32082-2809 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Florida Anesthesia Associates Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Hector Vila Jr., M.D. Date of Receipt Mailing Address 4304 W Azeele St 2012 80 17 City State Zip Code Transaction ID: C1810593 FL Tampa 33609-3824 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Hector Vila Jr MD PA Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) 883.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 179 OF (check only one) X 11a 11b 11c

210 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) Annette Vizena M.D. Date of Receipt Mailing Address 1236 East Elizabeth, Suite 1 2012 City Zip Code State Transaction ID: C1806124 CO Fort Collins 80524-4000 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation North Co Anesthesia Proffesional Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. J. Michael Vollers M.D. Date of Receipt Mailing Address 1 Childrens Way Slot 203, S-319 80 14 2012 City State Zip Code Transaction ID: C1806718 AR Little Rock 72202-3510 Amount of Each Receipt this Period FEC ID number of contributing 83.30 federal political committee. Name of Employer Occupation University of Arkansas for Medical Sci Professor of Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 666.40 Other (specify) Full Name (Last, First, Middle Initial) c. Lance W. Wagner M.D. Date of Receipt Mailing Address 150 55th St 2012 80 15 City Zip Code State Transaction ID: C1807482 NY Brooklyn 11220-2559 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Lutheran Medical Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 233.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17
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NAME OF COMMITTEE (In Full) American Society of Anesthesiology	ogists Political Action Committe	ee
University of Alabama in Birmingham	State Zip Code AL 35249-1900  C  Occupation  ohysician  Aggregate Year-to-Date ▼  500.00	Date of Receipt    M
South Oakland Anesthesia Associates	State Zip Code MI 48323  C  Occupation  Anesthesiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Rainier Anesthesia Associates	State Zip Code WA 98372-3257  C  Occupation  Anesthesiologist  Aggregate Year-to-Date ▼  350.00	Date of Receipt  M M M
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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									

<u>/</u>		
Full Name (Last, First, Middle Initial)  Ebon J. Wallace-Talifarro M.D.  Mailing Address 7205 Meadowgrass Court		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Caledonia	State Zip Code MI 49316	Transaction ID : C1803223  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	50.00
Central Anesthesia Services	Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Hong Wang M.D., Ph.D  Mailing Address 50634 Drakes Bay Dr		Date of Receipt
City	State Zip Code	08 31 2012 Transaction ID : C1817345
Novi  FEC ID number of contributing federal political committee.	MI 48374-2548	Amount of Each Receipt this Period 250.00
Name of Employer Detroit Medical Center Department of A	Occupation ANESTHESIOLOGIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Erikka L. Washington M.D.		Date of Receipt
Mailing Address 6431 FANNIN  msb 5.020  City	State Zip Code	08 14 2012  Transaction ID : C1806723
HOUSTON	TX 77030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer UTHSC-Houston Dept of Anesthesiology	Occupation Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 249.60	
SUBTOTAL of Receipts This Page (optional).		341.60
TOTAL This Period (last page this line number	er only)	

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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	
NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	
Full Name (Last, First, Middle Initial) Lucy A. Waskell M.D., Ph.D  Mailing Address 2204 Devonshire Road  City Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer  Research Service 11R  Receipt For:  Primary General Other (specify)	State Zip Code MI 48104-2702  C  Occupation ANESTHESIOLOGIST  Aggregate Year-to-Date ▼  250.00	Date of Receipt  08 30 2012  Transaction ID: C1816815  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Barbara Y. Watanabe M.D.  Mailing Address 141 S 293rd PI  City Federal Way  FEC ID number of contributing federal political committee.  Name of Employer Pacific anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code WA 98003-3658  C  Occupation MD anesthesiologist  Aggregate Year-to-Date ▼  250.00	Date of Receipt  08 25 2012  Transaction ID : C1814608  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Robert D. Watson Jr., M.D.  Mailing Address 1970 Bradshire Dr.  City Mobile  FEC ID number of contributing federal political committee.  Name of Employer University of South Alabama Receipt For:  Primary General Other (specify)	State Zip Code AL 36695  C  Occupation Anesthesiologist  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / 27 2012  Transaction ID : C1814807  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	750.00
TOTAL This Period (last page this line number	only)	

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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 Full Name (Last, First, Middle Initial) Mary B. Weber M.D. Date of Receipt Mailing Address P.O. Box 50546 04 2012 City State Zip Code Transaction ID: C1802526 82605 WY Casper Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation WMD physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 В.

, , , , , , , , , , , , , , , , , , ,	4 4	
Full Name (Last, First, Middle Initial) Andrew S. Weisinger M.D.		Date of Receipt
Mailing Address 405 Beaumont Park Circle		08 27 2012 _
City	State Zip Code	Transaction ID : C1816262
Blythewood	SC 29016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Cardiovascular Anes.	Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Alan Weiss M.D.		Date of Receipt
Mailing Address 960 Royal Arms Dr		M M / D D / Y Y Y Y

C. City State Zip Code ОН Girard 44420 FEC ID number of contributing C federal political committee. Name of Employer Occupation anesthesiologist Bel-Park Anes. Assoc. Inc.

Aggregate Year-to-Date ▼

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	08		15		2012		
	Transa	ctio	n ID : C	180	7492		
ļ A	Amount	of E	ach Re	ceip	t this Perio	od	
		,				83.30	

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666.40

Receipt For:

Primary

Other (specify)

General

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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) Steven L. Weissman M.D. Date of Receipt Mailing Address 155 Baltic Circle 01 2012 City Zip Code State Transaction ID: C1808560 FL Tampa 33606 Amount of Each Receipt this Period FEC ID number of contributing 41.00 federal political committee. Name of Employer Occupation Florida Hospital Tampa Physician - Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 287.00 Other (specify) Full Name (Last, First, Middle Initial) B. Natalie C. Wells M.D. Date of Receipt Mailing Address 2699 Lee Rd Ste 510 80 2012 27 City State Zip Code Transaction ID: C1816252 Winter Park FL 32789-1742 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Sheridan Healthcare Anesthesiologists Anesthesiologist, MD Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Douglas A. Wemmer M.D. Date of Receipt Mailing Address 426 San Remo Wy. 2012 80 25 City State Zip Code Transaction ID: C1814590 CA San Diego 92106 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Wemmer Associates Medical Group Inc Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 541.00 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) Roger F. West Jr., M.D. Date of Receipt Mailing Address 9134 Walnut Grove Dr. 2012 20 City Zip Code State Transaction ID: C1811653 Indianapolis IN 46236-8533 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas T. West M.D. Date of Receipt Mailing Address 405 Starling Dr 80 05 2012 City State Zip Code Transaction ID: C1802559 LA Slidell 70461-3020 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Northlake Anesthesiologists, APMC Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Gregory L. Whitaker D.O. Date of Receipt Mailing Address 1228 E Baltimore Dr 2012 80 03 City Zip Code State Transaction ID: C1802479 TX El Paso 79902-2121 Amount of Each Receipt this Period FEC ID number of contributing 83.30 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 249.90 Other (specify) 1333.30 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	2
Full Name (Last, First, Middle Initial)  Robert M. Whitcomb M.D.  Mailing Address 221 Church Rd.		Date of Receipt
Mailing Address 221 Church Rd.		08 30 2012
City	State Zip Code	Transaction ID : C1816787
Winnetka	IL 60093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Elmhurst Memorial Hospital	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)	200.00	
3. Erik White M.D.		Date of Receipt
Mailing Address 4902 21st Ave Ct NW		08 25 2012
City	State Zip Code	Transaction ID : C1814553
Gig Harbor	WA 98335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Pacific Anesthesia	anesthesiologist	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  C. John W. Whiteley M.D.	•	Date of Receipt
Mailing Address 4679 Meadow Springs Dr		08 24 2012
City Watkinsville	State Zip Code GA 30677-4649	Transaction ID : C1813503  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer	Occupation	
Athens Regional Med Ctr	Anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	291.60	
SUBTOTAL of Receipts This Page (optional).		541.60
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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) Dana Williams M.D. Date of Receipt Mailing Address 1725 Pine St 2012 City Zip Code State Transaction ID: C1811252 Montgomery AL 36106-1109 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Montgomery Anesthesia Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jon S. Williams M.D. Date of Receipt Mailing Address 3333 Riverbend Dr Dept of Anes 80 2012 26 City State Zip Code Transaction ID: C1814638 OR Springfield 97477-8800 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Kansas University Medical Center Faculty Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael J. Williams M.D. Date of Receipt Mailing Address 725 Kings Hwy 2012 80 07 City Zip Code State Transaction ID: C1803233 NJ Moorestown 08057-2621 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Thomas Jefferson Univ. Anes.Dept Assistant Professor of Anesthesiology Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 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) N. Jeannie Williams M.D. Date of Receipt Mailing Address 9725 Sunset Circle 2012 City Zip Code State Transaction ID: C1806123 KS Lenexa 66220 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation ANES ASSOC OF KC **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy G. Williams M.D. Date of Receipt Mailing Address 145 Wildwood Trl 80 2012 24 City State Zip Code Transaction ID: C1813531 AL Florence 35630-0736 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Beer, Simon, Williams and Associates Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) William J. Wood M.D. Date of Receipt Mailing Address 1101 W Clairemont Ave Ste 2C 30 80 2012 Eau Claire Anesthesiologists Ltd City State Zip Code Transaction ID: C1816840 WI Eau Claire 54701-6161 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Eau Claire Anesthesiologists Ltd. Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) American Society of Anesthesic	ologists Political Action Committee	,
Full Name (Last, First, Middle Initial)  Derek Woodrum M.D.		Date of Receipt
Mailing Address 1500 E Medical Center Dr		M M / D D / Y Y Y Y Y
1H247UH Box 5048 City	State Zip Code	08 22 2012 Transaction ID : C1812088
Ann Arbor	MI 48109-5000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
University of Michigan Anesthesiology	Anesthesiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  W. Bradley Worthington M.D.		Date of Receipt
Mailing Address 101 Hillwood Blvd		M = M / D = D / Y = Y = Y
City	State Zip Code	08 16 2012 Transaction ID : C1808523
Nashville	TN 37205-2811	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	83.30
Name of Employer	Occupation	
Hospital for Spinal Surgery	anesthesiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	666.40	
Full Name (Last, First, Middle Initial) C. Ervin S. Yen M.D.		Date of Receipt
Mailing Address 1700 Elmhurst Avenue		08 29 2012
City	State Zip Code	Transaction ID : C1816526
Oklahoma City	OK 73120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	833.30
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) Xiaobin Yi M.D. Date of Receipt Mailing Address 7412 Ethel Ave 07 2012 City Zip Code State Transaction ID: C1804187 MO Richmond Heights 63117-1608 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Washington University in St. Louis Dep physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chang S. Yoon M.D. Date of Receipt Mailing Address 1720 N Duckcross Cv 80 2012 02 City State Zip Code Transaction ID: C1802454 KS Wichita 67206-3323 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **MID-Continent Anesthesiology** ANESTHESIOLOGIST PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nerrin B. Zaharias M.D. Date of Receipt Mailing Address 801 Royal Terr. 2012 80 21 City State Zip Code Transaction ID: C1811840 ΑL Birmingham 35242-7222 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Anesthesia Group East Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 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) Matthew W. Zeleznik M.D. Date of Receipt Mailing Address 5671 Peachtree Dunwoody Rd. Ste 53 2012 City State Zip Code Transaction ID: C1812083 Atlanta GΑ 30342 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Physician Specialists in Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.60 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew W. Zeleznik M.D. Date of Receipt Mailing Address 5671 Peachtree Dunwoody Rd. Ste 53 80 22 2012 City State Zip Code Transaction ID: C1812084 GA Atlanta 30342 Amount of Each Receipt this Period FEC ID number of contributing 41.60 federal political committee. Name of Employer Occupation Physician Specialists in Anesthesia Anesthesiologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.60 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 291.60 SUBTOTAL of Receipts This Page (optional)..... 178262.10 TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)		0	
American Society of Anesthesiol	ogists Political Action	1 Committee	)
Full Name (Last, First, Middle Initial)			
A. First Data			Date of Disbursement
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Mailing Address P.O. Box 6600			08 31 2012
City	State Zip Code		Transaction ID : D137168
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Candidate Name		Category/	2664.39
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NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	ists Political Action (	Committee	
Full Name (Last, First, Middle Initial)			
A. AMERIPAC: THE FUND FOR A GI	REATER AMERICA		Date of Disbursement
Mailing Address 607 14th Street, NW, Suite 800			08 29 2012
City	State Zip Code		Transaction ID : D135736
Washington	DC 20005		Transaction ID . D133730
Purpose of Disbursement 2012 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Office Sought: House Disbursen	nent For: 2012	Туре	
	Primary General		
President	Other (specify) ▼		
State: District:	2012 Contributio	n	
Full Name (Last, First, Middle Initial)			
B. BERA 2012 VICTORY FUND			Date of Disbursement
Mailing Address 5429 MADISON AVENUE			08 15 _ 2012 _
City S Sacramento	State Zip Code CA 95841		Transaction ID : D135504
Purpose of Disbursement	93041		
2012 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Office Sought: House Disbursen	nent For: 2012	Туре	, , ,
	Primary General		
	Other (specify) ▼		
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C. DJOU FOR HAWAII			Date of Disbursement
Mailing Address P.O. BOX 235280			08 01 2012
Mailing Address F.O. BOX 233200			00 01 2012
,	State Zip Code		Transaction ID : D135259
Honolulu Purpose of Disbursement	HI 96823		
2012 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Mr. Charles Djou		Type	2000.00
	nent For: 2012		
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American Society of Anesthesiolog	ists Political Action (	Committee	
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Mailing Address 607 14TH STREET NW SUITE 800	)		08 01 2012
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City	State Zip Code		
WASHINGTON	DC 20005		Transaction ID: D135364
Purpose of Disbursement			
2012 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	5000.00
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Senate	Primary General		
President	Other (specify) ▼		
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Full Name (Last, First, Middle Initial)	2012 0011110411		
	NI CANADAIGNI CON	45 41777	Date of Disbursement
B. MARC VEASEY CONGRESSION	AL CAMPAIGN CON	/IIVII I EE	
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Fort Worth	State Zip Code TX 76105		Transaction ID : D135662
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Fort Worth Purpose of Disbursement 2012 General Contribution Candidate Name		Category/	
Fort Worth Purpose of Disbursement 2012 General Contribution Candidate Name Mr. Marc Allison Veasey	TX 76105		Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought: House Disburser	TX 76105	Category/	Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate  Disburser	nent For: 2012 Primary General	Category/	Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate President  Disburser	TX 76105	Category/	Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate  Disburser	nent For: 2012 Primary General	Category/	Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate President  Disburser	nent For: 2012 Primary General	Category/	Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:    House   Disburser	nent For: 2012 Primary   General Other (specify)	Category/ Type	Amount of Each Disbursement this Period
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate President State: TX District: 33  Full Name (Last, First, Middle Initial)  C. PEOPLE FOR ENTERPRISE TRADE	nent For: 2012 Primary   General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 5000.00
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate President State: TX District: 33  Full Name (Last, First, Middle Initial)	nent For: 2012 Primary   General Other (specify)	Category/ Type	Amount of Each Disbursement this Period 5000.00  Date of Disbursement
Fort Worth Purpose of Disbursement 2012 General Contribution  Candidate Name  Mr. Marc Allison Veasey  Office Sought:  House Senate President State: TX District: 33  Full Name (Last, First, Middle Initial)  C. PEOPLE FOR ENTERPRISE TRADE  Mailing Address 7804 Evening Lane	nent For: 2012 Primary General Other (specify)   E AND ECONOMIC G	Category/ Type	Amount of Each Disbursement this Period 5000.00  Date of Disbursement
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	Mailing Address 512 MISSOURI AVE					08	0	1	2012	
	•	State OH	Zip Code 45226			Trans	saction ID	: D135264		
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U.	COLLINS FOR CONGRESS					Date of	Disburse		YY	V
	Mailing Address PO BOX 1295					08	2		2012	
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	,	State GA	Zip Code 30503			Trans	saction ID	: D135607		
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	Rep. Doug Allen Collins  Office Sought: House Disbursen	nent For	2012	Туре			- 7	- 7		
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NAME OF COMMITTEE (In Full)				
American Society of Anesthesiology	gists Political Action	Committee		
Full Name (Last, First, Middle Initial)				
A. GARY MILLER FOR CONGRESS			Date of Disbursemer	
Mailing Address 721 S. Brea Canyon Road, Suite	7		08 08	2012
City	State Zip Code		Transaction ID - Dr	125260
Diamond Bar	CA 91789		Transaction ID : D1	133360
Purpose of Disbursement 2012 General Contribution		011	Amount of Each Disk	oursement this Period
Candidate Name		Category/		2000.00
Rep. Gary G. Miller  Office Sought:  House Disburse	ment For: 2012	Туре		255.00
Senate President	ment For: 2012  Primary			
State: CA District: 42				
Full Name (Last, First, Middle Initial)			5	
B. GEORGE HOLDING FOR CONG	RESS		Date of Disbursemer	/
Mailing Address PO BOX 97187			08 08	2012
City RALEIGH	State Zip Code NC 27624		Transaction ID : D	135357
Purpose of Disbursement 2012 General Contribution		011	Amount of Each Disk	oursement this Period
Candidate Name		Category/		
Rep. George E.B. Holding		Type		5000.00
Office Sought:    House   Disburse	ment For: 2012 Primary			
Full Name (Last, First, Middle Initial)				
C. HUFFMAN FOR CONGRESS 201	4		Date of Disbursemer	nt
Mailing Address P.O. BOX 151563			08 / 01	2012
City	State Zip Code			
SAN RAFAEL	CA 94915		Transaction ID : D	135263
Purpose of Disbursement 2012 General Contribution				
Candidate Name		011	Amount of Each Disk	oursement this Period
Rep. Jared Huffman		Category/ Type		2500.00
	ment For: 2012	туре		7
Senate President	Primary ☐ General Other (specify) ▼			
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NAME OF COMMITTEE (In Full)				
American Society of Anesthesiol	ogists Political Action	Committee		
Full Name (Last, First, Middle Initial)				
A. BUCSHON FOR CONGRESS			Date of Disbursement	
Mailing Address PO Box 250				2012
City	State Zip Code		Transaction ID - D420002	
Newburgh	IN 47629		Transaction ID : D136293	
Purpose of Disbursement 2012 General Contribution		011	Amount of Each Disbursemer	nt this Period
Candidate Name		Category/		4000.00
Rep. Larry Bucshon  Office Sought:  House Disbur	sement For: 2012	Туре		
Senate President	Primary General Other (specify) ▼			
State: IN District: 08				
Full Name (Last, First, Middle Initial)				
B. LYNN JENKINS FOR CONGRE	SS		Date of Disbursement	
Mailing Address P.O. Box 1441				2012
City Topeka	State Zip Code KS 66601		Transaction ID : D135359	
Purpose of Disbursement 2012 General Contribution		011	Amount of Each Disbursemer	nt this Period
Candidate Name		Category/		5000.00
Rep. Lynn Jenkins		Type		3000.00
	sement For: 2012			
Senate President	Primary			
State: KS District: 02	Carior (openity)			
Full Name (Last, First, Middle Initial)  C. FRIENDS OF MICHELLE			Date of Disbursement	
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Mailing Address 2015 DIETZ PL NW			08 30 2	2012
City	State Zip Code		Transaction ID : D135502	
ALBUQUERQUE Purpose of Disbursement	NM 87107			
2012 General Contribution		011	Amount of Each Disbursemer	at this Dariad
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Rep. Michelle Lujan Grisham		Type		4000.00
Senate President	sement For: 2012 Primary ☐ General Other (specify) ▼			
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TOTAL This Period (last page this line number or	nly)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 198 OF 210
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
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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)			Data of Dishamourant
A. MULVANEY FOR CONGRESS			Date of Disbursement
Mailing Address P.O. Box 1975			08 08 2012
City	State Zip Code		Transaction ID - D425250
Lancaster	SC 29721		Transaction ID : D135358
Purpose of Disbursement 2012 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Mick Mulvaney		Type	2000.00
Office Sought: House Disbut Senate President	rsement For: 2012 Primary ☐ General Other (specify) ▼		
State: SC District: 05			
Full Name (Last, First, Middle Initial)			
B. MO BROOKS FOR CONGRESS	5		Date of Disbursement
Mailing Address 7610 FOXFIRE DR.			08 15 2012
City HUNTSVILLE	State Zip Code AL 35802		Transaction ID : D135500
Purpose of Disbursement 2012 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Mo Brooks		Type	2500.00
Office Sought:    House   Disbute	rsement For: 2012 Primary		
Full Name (Last, First, Middle Initial)  C. PAUL GOSAR FOR CONGRES	S		Date of Disbursement
			M M / D D / Y Y Y
Mailing Address 2222 E. Cedar Ave.			08 15 2012
City Flagstaff	State Zip Code AZ 86004		Transaction ID : D135501
Purpose of Disbursement			
2012 Primary Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Paul Gosar  Office Sought:  House Disbu	was week Fam. 2010	Type	2000.00
Office Sought: House Disbut Senate President	rsement For: 2012  Primary General  Other (specify)		
State: AZ District: 04			
SUBTOTAL of Disbursements This Page (options	al)	······	6500.00
TOTAL This Period (last page this line number of	nly)		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 199	OF 210	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)		
	Detailed Summary Page	21b	22 X 23 24 25 28a 28b 28c 29	26	
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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 Anesthesiolo	gists Political Action	Committee			
<u> </u>					
Full Name (Last, First, Middle Initial)			Data of Dishuraament		
A. HUDSON FOR CONGRESS			Date of Disbursement		
Mailing Address PO BOX 5053			08 08 2012	" Y	
City	State Zip Code		Transaction ID : D135356		
CONCORD Purpose of Disbursement	NC 28027		Transaction ID 1 D 100000		
2012 General Contribution		011	Amount of Each Disbursement this	Period	
Candidate Name		Category/			
Rep. Richard Hudson		Type	500	00.00	
Office Sought: House Disburs	ement For: 2012				
Senate	Primary General				
State: NC District: 08	Other (specify) ▼				
State: NC District: 08  Full Name (Last, First, Middle Initial)					
B. HOYER FOR CONGRESS			Date of Disbursement		
HOTEKTOK CONCRESS			M = M / D = D / Y = Y = Y	Y	
Mailing Address 700 13th Street, NW			08 29 2012		
City Washington	State Zip Code DC 20005		Transaction ID : D135735		
Purpose of Disbursement	20003				
2012 General Contribution		011	Amount of Each Disbursement this	Period	
Candidate Name		Category/	500	00.00	
Rep. Steny H. Hoyer		Туре	300	00.00	
	ement For: 2012				
Senate   President	Primary				
State: MD District: 05	Cirici (opcony)				
Full Name (Last, First, Middle Initial)					
C. SOUTHERLAND FOR CONGRES	SS		Date of Disbursement		
			M M / D D / Y Y Y	Y	
Mailing Address PO BOX 1692			08 01 2012		
City	State Zip Code				
LYNN HAVEN	FL 32444		Transaction ID : D135257		
Purpose of Disbursement 2012 General Contribution					
		011	Amount of Each Disbursement this	Period	
Candidate Name  Rep. Steve Southerland II		Category/	250	00.00	
	ement For: 2012	Туре			
Senate	Primary Seneral				
President	Other (specify)				
State: FL District: 02					
				0.00	
SUBTOTAL of Disbursements This Page (optional)		·············	1250	0.00	
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SC	HEDULE B (FEC Form 3X)		FOR II	INE NUMBER: PAGE 200 OF 2
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		for each category of the Detailed Summary Page		21b 22 X 23 24 25 3
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	y information copied from such Reports and Staten			
$\vdash$	for commercial purposes, other than using the name	ne and address of any poin	icai committe	ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	viota Dalitiaal Aatian	Commit	#00
/	American Society of Anesthesiolog	isis Political Action	Commit	llee
	Full Name (Last, First, Middle Initial)			
A.	CLAY JR. FOR CONGRESS			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address P.O. BOX 4544			08 22 2012
	City	State Zip Code		
	ST. LOUIS	MO 63108		Transaction ID : D135660
	Purpose of Disbursement			
	2012 General Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		Category	5000.00
	Rep. William Lacy Clay  Office Sought: Y House Disburser	mont For: 0040	Туре	355555
		nent For: 2012 Primary		
	President	Other (specify)		
	State: MO District: 01	(-  ), <b>\</b>		
	Full Name (Last, First, Middle Initial)			
B.	BECERRA FOR CONGRESS			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address P.O. Box 261060			08 01 2012
	City	State Zip Code		
	Los Angeles	CA 90026		Transaction ID : D135262
	Purpose of Disbursement			
	2012 General Contribution		011	Amount of Each Disbursement this Period
	Candidate Name		Category	y/ 1500.00
	Rep. Xavier Becerra  Office Sought:	nent For: 2012	Type	
	Senate Dispulser	Primary Seneral		
	President	Other (specify) ▼		
	State: CA District: 31	•		
	Full Name (Last, First, Middle Initial)			
C.	BEN CARDIN FOR SENATE			Date of Disbursement
				M M / D D / Y Y Y Y Y
	Mailing Address P.O. BOX 21093			08 01 2012
	City	State Zip Code		
	-	MD 21228		Transaction ID : D135363
	Purpose of Disbursement 2012 General Contribution			
			011	Amount of Each Disbursement this Period
	Candidate Name		Category	y/ 2500.00
	Sen. Benjamin L. Cardin  Office Sought: House Disburser	ment For: 2012	Туре	
		Primary General		
	President	Other (specify) ▼		
	State: MD District: 00	· 		
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 201 OF 210
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBETT.
	for each category of the Detailed Summary Page	21b	22 🗶 23 🔲 24 🔲 25 🖂 26
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Any information copied from such Reports and Staten	nents may not be sold or us	sed by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any politi	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		•	
American Society of Anesthesiolog	ists Political Action	Committee	
Full Name (Last, First, Middle Initial)			
A. BEN CARDIN FOR SENATE			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 21093			08 22 2012
City	State Zip Code		
CATONSVILLE	MD 21228		Transaction ID: D135661
Purpose of Disbursement			
2012 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Sen. Benjamin L. Cardin	_	Туре	2300.00
	nent For: 2012		
	Primary		
State: MD District: 00	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. FRIENDS OF JOHN BARRASSO			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO BOX 52008			08 15 2012
Oth	75.0.4.		
•	State Zip Code WY 82605		Transaction ID: D135503
Purpose of Disbursement	02000		
2012 General Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Sen. John Barrasso		Туре	2300.00
	nent For: 2012		
	Primary		
State: WY District: 00	Other (specify)		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address			
Otto	7. 0. 1.		
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	
Office Sought: House Disbursen			
	Primary General		
State: District:	Other (specify) ▼		
otato. District.			
SUBTOTAL of Disbursements This Page (optional)			5000.00
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TOTAL This Period (last page this line number only)			93500.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 202 OF 210	<del>_</del>
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only		_
	for each category of the Detailed Summary Page	21b	22 23 24 25 26	i
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Any information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	to and address of any pointed	ar committee to	Solicit Contributions from Such Committee.	_
	icte Political Action (	Committee		
American Society of Anesthesiolog	ists Political Action (	Committee		
Full Name (Last, First, Middle Initial)			D (D)	
A. Joe Anderson M.D.			Date of Disbursement	
Mailing Address 707 SW Washington St., Suite 700			08 31 2012	
Oregon Anesthesiology Group, P.C	State Zip Code			_
Portland	OR 97205		Transaction ID: D135796	
Purpose of Disbursement	07200			
Refund of Contribution		010	Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	500.00	
Office Sought: House Disbursen	nent For: 2012	.,,,,,		
Senate	Primary General			
President	Other (specify) ▼			
State: District:	Refund of 2/29/20	012		
Full Name (Last, First, Middle Initial)				
B. Jerry Y. Chao M.D.			Date of Disbursement	
55 <b>y</b> 555.			M M / D D / Y Y Y Y	
Mailing Address Albert Einstein Montefiore Medical			08 31 2012	
111 E 210th St, Department of And	S			
City	State Zip Code		Transaction ID : D135797	
Bronx	NY 10467			
Purpose of Disbursement Refund of Contribution		040	Amount of Fook Diskursons at this David	
Candidate Name		010	Amount of Each Disbursement this Period	
Candidate Name		Category/	75.00	
Office Sought: House Disbursen	nent For: 2012	Туре		
	Primary General			
	Other (specify)			
State: District:	Refund of 2/29/20	012		
Full Name (Last, First, Middle Initial)	. (0.0.1.0 0. 2/20/20	· · -		_
C. David R. Duval D.O.			Date of Disbursement	
David N. Duvai D.O.			M M / D D / Y Y Y Y	
Mailing Address 21 Spartan Dr			08 31 2012	
5 January 21 Spanan 21				
City	State Zip Code		Transaction ID - D425700	_
	NH 03110-4229		Transaction ID: D135799	
Purpose of Disbursement Refund of Contribution		242		
		010	Amount of Each Disbursement this Period	
			100.00	
Candidate Name		Category/	100.00	
	posit For 2010	Category/ Type	100.00	
Office Sought: House Disburser	nent For: 2012		100.00	
Office Sought: House Disburser Senate	Primary General		100.00	
Office Sought:  House Senate President  Disburser	Primary General Other (specify) ▼	Туре	100.00	
Office Sought: House Disburser Senate	Primary General	Туре	100.00	_
Office Sought:  House Senate President State: District:	Primary General Other (specify) ▼ Refund of 2/29/20	Type	675.00	
Office Sought:  House Senate President  Disburser	Primary General Other (specify) ▼ Refund of 2/29/20	Type		

SCHEDULE B (FEC Form 3X)		FOD !	LINE NUMBER: PAGE 203 OF 2
ITEMIZED DISBURSEMENTS	Use separate schedule(s	\ <b>I</b> -	LINE NUMBER: PAGE 203 OF 29 k only one)
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Any information copied from such Reports and State			
or for commercial purposes, other than using the na	me and address of any politi	cal committe	tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Society of Anesthesiology	gists Political Action	Commit	ttee
Full Name (Last, First, Middle Initial)			
Anthony Dye M.D.			Date of Disbursement
Additions by twi.b.			M M / D D / Y Y Y Y
Mailing Address 401 N 31st St Ste 1020			08 31 2012
City	State Zip Code		Transaction ID : D135800
Billings Purpose of Disbursement	MT 59101		
Refund of Contribution			Amount of Each Disbursement this Period
Candidate Name		Category	N/
		Type	250.00
Office Sought: House Disburse	ment For: 2012		
Senate	Primary General		
State: District:	Other (specify) ▼ Refund of 2/29/3	2012	
	Neturiu di 2/29/	LU 1 L	
Full Name (Last, First, Middle Initial)  6. Cheryl I Gaughen M D			Date of Disbursement
3. Cheryl L. Gaughen M.D.			M M / D D / Y Y Y Y
Mailing Address 3420 Cesford Grange			08 31 2012
City	State Zip Code		Transaction ID : D135801
Keswick Purpose of Disbursement	VA 22947-9126		
Refund of Contribution		010	Amount of Each Disbursement this Period
Candidate Name		Category	W.
		Type	50.00
Office Sought: House Disburse	ment For: 2012		
Senate	Primary General		
	Other (specify)	0040	
State: District:	Refund of 2/29/	2012	
Full Name (Last, First, Middle Initial)  C. Donald W. Graves M.D.			Date of Disbursement
Donaid vv. Graves W.D.			M M / D D / Y Y Y Y
Mailing Address 1301 Indiana St # 302			08 31 2012
City	State Zip Code		Transaction ID : D135802
San Francisco Purpose of Disbursement	CA 94107-3485		
Refund of Contribution		010	Amount of Each Disbursement this Period
Candidate Name			
		Category Type	<sup>y/</sup> 250.00
Office Sought: House Disburse	ment For: 2012		
Senate	Primary General		
President	Other (specify) ▼		
State: District:	Refund of 2/29/2	2012	
			550.00
SUBTOTAL of Disbursements This Page (optional).			550.00
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$\vdash$	NAME OF COMMITTEE (In Full)	71										
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	Full Name (Last, First, Middle Initial)											
A.	Michael G. Hernandez M.D.					Date o	f Dis	burse	ment			
						M = M	/	D	D /	Y	Y	1
	Mailing Address 209 Linden Ln					08		31		2012		
	Otto	Otata					· ·					
		State Zip Code CA 94901-1343				Trans	sactio	on ID	: D13580	03		
	San Rafael Purpose of Disbursement	CA 94901-1343										
	Refund of Contribution		(	010	7	Amoun	t of I	Fach	Disburse	ment thi	s Pei	riod
	Candidate Name				_   _	ATTOUT	. 01 1		- 10.0 UI 30		J 1 G	150
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	Office Sought: House Disburser	ment For: 2012	'	, PG	-			1	- 7			
	Senate	Primary General										
	President	Other (specify) ▼										
	State: District:	Refund of 2/29/2	2012									
_	Full Name (Last, First, Middle Initial)											
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	. COOK E. HOREKA MID.					M = M	/	D	D /	Y	/	
	Mailing Address PO Box 1018				$\neg$	08		3.		2012		
					_							
	City	State Zip Code				Trans	sacti	on ID	: D1358	04		
	Rancho Santa Fe	CA 92067-1018				uii	Jaou	ر ال	. 2			
	Purpose of Disbursement Refund of Contribution			242	7	A		Га-!- <sup>-</sup>	Dialares	.ma.a	. D.	ام دا
	Candidate Name			010		Amoun	ı ot l	⊏acn	Disburse	ment thi	s Pei	100
	Candidate Name			egory	'/		_				200.00	0
	Office Sought: House Disburser	ment For: 2012	I.	уре				7	7			
	Senate Disburser	nent For: 2012  Primary General										
	State: District:	Other (specify) ▼ Refund of 2/29/2	2012									
_	Full Name (Last, First, Middle Initial)	ixciuliu di 2/23//	-012		+							
C	Robert M. Jarka M.D.					Date o	f Dis	burse	ment			
J.	NUDER W. Jarka W.D.									v	/   17	
	Mailing Address 6571 Butterfield Way				$\dashv$	08	/	31		2012	■ Y	
						30				_5,12		4
	City	State Zip Code				Tu	2024	or in	. D4250	n <i>E</i>		
	Placerville	CA 95667-8796				irans	sacti(	טוו ווט	: D1358	ບວ		
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	Senate	Primary General										
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SCHEDULE B	(FEC Form 3X)		. ,	FOR LINE	NUMBER	R:	PAGE	205 O	F 210
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			d Summary Page	21b	22 X 28a	23 28b	24 28c	25 29	26 30b
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American So	ociety of Anesthesiolog	jists Po	olitical Action	Committe	е				
Full Name (Last, I	•								
A. Randhir Kab	000 M.D.					of Disburser			
Mailing Address 1	9220 Catalina Rd				08	31		012	Y
City		State	Zip Code		Tran	saction ID :	D135806		
Apple Valley	aamant	CA	92308-6798			Saction ib	D133000		
Purpose of Disbur Refund of Contrib				010	Amou	nt of Each I	Disbursemen	t this P	eriod
Candidate Name				Category/				100.	00
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Office Sought:	House Disburser Senate	ment For: Primary	2012 General						
	President	Other (sp							
State:	District:	` '	Refund of 2/29/20	012					
•	First, Middle Initial)								
B. Peter P. Kol	oilsek M.D.				Date	of Disburser	nent		
Mailing Address (	2818 Jefferson Avenue				08			2012	Y
Mailing Address 2	2010 Jenerson Avenue				00	31		.012	
City		State	Zip Code		Tran	saction ID	: D135807		
Joplin  Purpose of Disbur	sement	МО	64804-1433		_				
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Candidate Name				Category/				50	00
				Type		- 1	7	50.	.00
Office Sought:	House Disburser Senate	ment For:	2012 General						
		Primary Other (sp							
State:	District:	(-)	Refund of 2/29/2	012					
Full Name (Last, I	First, Middle Initial)								
C. Erika L. Law	rence M.D.				Date	of Disburser	ment		
Mailing Address 4	929 W Manguita Ct					31		012	Y
Mailing Address	828 W Mesquite St				00	31		012	
City	,	State	Zip Code		Tran	saction ID	· D135808		
Phoenix Purpose of Disbur	comont	AZ	85086-8776		_	Saction ID	. 5133000		
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Candidate Name					Amoul	nt of Each t	Disbursemen	t this P	eriod
				Category/ Type	Н.			250.	00
Office Sought:		ment For:							
	Senate	Primary	General						
State:	President District:	Other (sp	Refund of 2/29/20	112					
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	ny information copied from such Reports and Staten for commercial purposes, other than using the name												
Ĺ	NAME OF COMMITTEE (In Full)	110 21 2 <b>, po</b>											
$  \rangle$	American Society of Anesthesiolog	ists Political Action	Con	nm	itte	е							
$\angle$	,					_							
Δ	Full Name (Last, First, Middle Initial)  Kenneth R. Moran M.D.						Date 4	of Di	isburse	ment			
, · · ·	REHITELLI R. MUTALI M.D.						M		, D			YY	Y
	Mailing Address 4029 Hidden Hill Ct						08			1	Ĺ	2012	
	City	State 7in Code				-							
	City S Powell	State Zip Code OH 43065-7112					Tran	sact	tion ID	: D1	35809	)	
	Purpose of Disbursement	.5550 1 112			_	$\dashv$							
	Refund of Contribution		(	010			Amou	nt of	Each	Disb	ursen	nent this	s Period
	Candidate Name			ego			Г.					5	00.00
	Office Sought: House Disburser	nent For: 2012	Т	уре		+			7	_	7		
	Senate Disburser	Primary General											
	President	Other (specify) ▼											
_	State: District:	Refund of 2/29/2	2012			_							
В.	Full Name (Last, First, Middle Initial)						Data	of D	isburse	mon			
Β.	Gerald D. Pacelli Jr., M.D.						Date					YYY	V
	Mailing Address 7184 Ludlow Dr						08		3	31	′ <b> </b>	2012	- 1
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C.	Eugene S. Prokopyschyn D.O.								isburse				
	Mailing Address 16789 W 67th Cir					+	08	VI /	3	1	/ Y	2012	Y
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, · · ·	Lynn M. Rogers M.D.						M = N		D		V	YY	Y
	Mailing Address 11104 Kuertzmill Dr.						08		3		Ĺ	2012	
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	City S Cincinnati	State Zip Code OH 45249					Tran	sact	ion ID	: D13	5812		
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В.	Jonathan R. Sadler M.D.								sburse				
	Mailing Address 221 Devon Dr					-	M = N	/	3	D /	Y	2012	Y
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	Mailing Address 14 Burning Tree Ln						08	_	3	1	L	2012	
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Mailir	ng Address 260 Crescent Rd.				$\dashv$	08	1 /	3	D /	2012		
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	vinder Singh M.D.					Date o	of Dis	sburse	ment			
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
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Any information copied from such Reports and Statem	ents may not be sold or us			
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NAME OF COMMITTEE (In Full)				
American Society of Anesthesiolog	sts Political Action	Committee		
Full Name (Last, First, Middle Initial)		T		
A. Robert G. Sugar M.D.			Date of Disburser	ment
			M M / D	
Mailing Address 14500 Castlerock Rd.			08 31	2012
City	tate Zip Code		Transaction	- D425040
	CA 93908-9438		Transaction ID	: אואפגוע
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	ent For: 2012			
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Full Name (Last, First, Middle Initial)				
B. Daniel J. Yousif M.D.			Date of Disburser	ment
Mailing Address 67 Marywood Trail			08 3	
Mailing Address 6/ Marywood Irall			00 3	2012
· · ·	tate Zip Code		Transaction ID	: D135820
Wheaton Purpose of Disbursement	IL 60187-8181			
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	ent For: 2012 Primary General			
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Full Name (Last, First, Middle Initial)				
C. John F. Zeiger M.D.			Date of Disburser	
Mailing Address 10705 Monte Vista Ct			08 31	
•	tate Zip Code IN 46814-9068		Transaction ID	: D135821
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NAME OF COMMITTEE (In Full)			
American Society of Anesthesiolog	ists Political Action	Committee	
Full Name (Last, First, Middle Initial)			
A. Republican Governors Association			Date of Disbursement
Mailing Address 1747 Pennsylvania Ave, NW			08 30 2012
•	State Zip Code		Transaction ID : D135734
Washington Purpose of Disbursement	DC 20006		Transaction id . D133734
2012 Membership Dues			Amount of Each Disbursement this Period
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Senate	Primary General		
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Republican State Leadership Com	mittee		Date of Disbursement
Mailing Address 1800 Diagnole Rd Suite 230			08 23 2012
	State Zip Code VA 22314		Transaction ID : D137169
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