

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Friends of Medical Research Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="167570.00"/>	<input type="text" value="167570.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="167570.00"/>	<input type="text" value="167570.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="63937.47"/>	<input type="text" value="63937.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="103632.53"/>	<input type="text" value="103632.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Friends of Medical Research Political Action Committee

Report Covering the Period: From: 07 / 01 / 2014 To: 09 / 30 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	166500.00	166500.00
(ii) Unitemized	1070.00	1070.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	167570.00	167570.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	167570.00	167570.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))..... ▶	167570.00	167570.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	167570.00	167570.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2037.47	2037.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2037.47	2037.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	61900.00	61900.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	63937.47	63937.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	63937.47	63937.47

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	167570.00	167570.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	167570.00	167570.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2037.47	2037.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2037.47	2037.47

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 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)
Friends of Medical Research Political Action Committee

A. James Travis Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 2323 Victory Drive
#1200

City Dallas State TX Zip Code 75210

FEC ID number of contributing federal political committee. **C**

Name of Employer UFF, Inc. Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 20 / 2014
Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
1000.00

Individual Contribution to FOMR PAC

B. Kenneth Aschendorf
Full Name (Last, First, Middle Initial)

Mailing Address 28 W 44th Street

City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C**

Name of Employer APF Properties, LLC Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 15 / 2014
Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
1000.00

Individual Contribution to FOMR PAC

C. Nathan Berman
Full Name (Last, First, Middle Initial)

Mailing Address 525 E 80th Street
Apt. 4F

City New York State NY Zip Code 10075

FEC ID number of contributing federal political committee. **C**

Name of Employer Metro Loft Management LLC Occupation Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 09 / 2014
Transaction ID : SA11AI.4184

Amount of Each Receipt this Period
5000.00

Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Dilip Choudhuri
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 Stanford Street
 City Houston State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Walter P Moore Engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014
Transaction ID : SA11AI.4155
 Amount of Each Receipt this Period
 1000.00
 Individual Contribution to FOMR PAC

B. Sanford G Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Greenway Plaza Suite 1400
 City Houston State TX Zip Code 77046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Weycer, Kaplan, Pulaski & Zube Attorney
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : SA11AI.4183
 Amount of Each Receipt this Period
 5000.00
 Individual Contribution to FOMR PAC

C. Alexander Fisher
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 277
 City Bridgewater State CT Zip Code 06752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 A. Fisher Co., Inc. Self-Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2014
Transaction ID : SA11AI.4152
 Amount of Each Receipt this Period
 2500.00
 Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Mark Gibson
Full Name (Last, First, Middle Initial)

Mailing Address 4009 Grassmere Lane

City Dallas State TX Zip Code 75205

FEC ID number of contributing federal political committee. **C**

Name of Employer HFF Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 06 / 2014
Transaction ID : SA11AI.4159

Amount of Each Receipt this Period 5000.00

Individual Contribution to FOMR PAC

B. Paul D Grossbard
Full Name (Last, First, Middle Initial)

Mailing Address 49 Briar Hollow Lane #1502

City Houston State TX Zip Code 77027

FEC ID number of contributing federal political committee. **C**

Name of Employer Miller Grossbard Advisors, LLP Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2014
Transaction ID : SA11AI.4182

Amount of Each Receipt this Period 5000.00

Individual Contribution to FOMR PAC

C. Keith Hamlin
Full Name (Last, First, Middle Initial)

Mailing Address 46 Westchester Avenue

City Pound Ridge State NY Zip Code 10576

FEC ID number of contributing federal political committee. **C**

Name of Employer Pan Am Equities, Inc. Occupation Private Equity

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4144

Amount of Each Receipt this Period 5000.00

Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional).....▶ 15000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)
A. Anastasios Kokoris

Mailing Address PO Box 2479

City Westport State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
B. Jack G Lee

Mailing Address 109 North Post Oak Lane Suite 525

City Houston State TX Zip Code 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Oakmont Group, Inc. Occupation Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period
5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
C. Dan Levy

Mailing Address 9250 Wilshire Blvd. Suite 200

City Beverly Hills State CA Zip Code 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Real Estate Investors

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11AI.4166

Amount of Each Receipt this Period
5000.00

Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Avinash K Malhotra
 Full Name (Last, First, Middle Initial)
 Mailing Address 32-03 161 Street
 City Flushing State NY Zip Code 11358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Architect
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **08 / 06 / 2014**
Transaction ID : SA11AI.4156
 Amount of Each Receipt this Period **500.00**
 Individual Contribution to FOMR PAC

B. Barbara Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 Central Park West Apt. 6N
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Real Estate
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 20 / 2014**
Transaction ID : SA11AI.4175
 Amount of Each Receipt this Period **1000.00**
 Individual Contribution to FOMR PAC

C. Bernice Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 Central Park West #9NC
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Semi-Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **08 / 15 / 2014**
Transaction ID : SA11AI.4164
 Amount of Each Receipt this Period **5000.00**
 Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Caroline Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 Westchester Avenue
 City Pound Ridge State NY Zip Code 10576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan Am Equities, Inc. Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4147
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

B. Fraydun Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 E 50th Street
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan Am Equities, Inc. Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4148
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

C. Greg Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 S. Bedford Road
 City Pound Ridge State NY Zip Code 10576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4140
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional).....▶ 15000.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Jed Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 E 50th Street
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Woodbranch Investments Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4138
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

B. Jennifer Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Griffen Avenue
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Theater Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4145
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

C. John Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 Central Park West
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan Am Equities, Inc. Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4141
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Jonathan Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 E 50th Street
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 15 / 2014
Transaction ID : SA11AI.4161
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

B. Joshua Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 145 W 67th Street Apt. 47E
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Student
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2014
Transaction ID : SA11AI.4181
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

C. Judith Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 Central Park West
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4142
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional).....▶ 15000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

A. Kim L Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 S. Bedford Road
 City Pound Ridge State NY Zip Code 10576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4139
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

B. Kim D Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 Central Park West
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pan Am Equities, Inc. Occupation Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 30 / 2014
Transaction ID : SA11AI.4146
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

C. Robert Manocherian
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 E 58th Street
 City New York State NY Zip Code 10155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 20 / 2014
Transaction ID : SA11AI.4176
 Amount of Each Receipt this Period 5000.00
 Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)
A. Yael Manocherian

Mailing Address 18 E 50th Street

City State Zip Code
 New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 N/A N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period
 5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
B. Michael T Meagher

Mailing Address 3931 Williamsburg Road

City State Zip Code
 Dallas TX 75220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Woodbranch Investments Corp. Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
 2500.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
C. Raymond F Messer

Mailing Address 5114 Beech Street

City State Zip Code
 Bellaire TX 77401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Walter P. Moore & Assoc., Inc. Engineer/Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
 1000.00

Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial) A. H Dan Miller		Date of Receipt MM / DD / YYYY 08 / 06 / 2014 Transaction ID : SA11AI.4160
Mailing Address 9 Greenway Plaza Suite 700		Amount of Each Receipt this Period 5000.00 Individual Contribution to FOMR PAC
City Houston	State TX	Zip Code 77046
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 5000.00	
Name of Employer HFF	Occupation Real Estate Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joseph Moinian		Date of Receipt MM / DD / YYYY 07 / 30 / 2014 Transaction ID : SA11AI.4151
Mailing Address 3 Columbus Circle 23rd Floor		Amount of Each Receipt this Period 5000.00 Individual Contribution to FOMR PAC
City New York	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 5000.00	
Name of Employer The Moinian Group	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Shahzad Mossanen		Date of Receipt MM / DD / YYYY 09 / 23 / 2014 Transaction ID : SA11AI.4200
Mailing Address 40 Whitney Phipps Drive		Amount of Each Receipt this Period 5000.00 Individual Contribution to FOMR PAC
City Old Westbury	State NY	Zip Code 11568
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 5000.00	
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)
A. Stephen Rocher

Mailing Address 2800 Post Oak Blvd.
 #2300

City State Zip Code
 Houston TX 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 CBRE Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 08 / 20 / 2014
Transaction ID : SA11AI.4179

Amount of Each Receipt this Period
 5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
B. Andrew Sabin

Mailing Address 300 Pantigo Place

City State Zip Code
 East Hampton NY 11937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Sabin Metal Corporation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 07 / 30 / 2014
Transaction ID : SA11AI.4149

Amount of Each Receipt this Period
 5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
C. Philip Schneidau

Mailing Address 3515 Newcastle Drive

City State Zip Code
 Houston TX 77027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Carlyle Management Commercial Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 08 / 06 / 2014
Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
 5000.00

Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 18 OF 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mark Seruya

Mailing Address 914 E 9th Street

City State Zip Code
 Brooklyn NY 11230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Morgan Stanley Money Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2014

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
 5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
B. Scott Solomon

Mailing Address 18 E 50th Street

City State Zip Code
 New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Pan Am Equities, Inc. President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period
 2500.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
C. Scott Solomon

Mailing Address 18 E 50th Street

City State Zip Code
 New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Pan Am Equities, Inc. President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period
 2500.00

Individual Contribution to FOMR PAC

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 19 OF 28
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)
A. Michael Stephens

Mailing Address 1024 S Oakcrest Road

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 30 / 2014
Transaction ID : SA11AI.4154

Amount of Each Receipt this Period
1000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
B. Steven Wise

Mailing Address 10 Brodwood Drive

City State Zip Code
Stamford CT 06902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Roeco, LLC Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 22 / 2014
Transaction ID : SA11AI.4199

Amount of Each Receipt this Period
5000.00

Individual Contribution to FOMR PAC

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	166500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of Georgetown

Mailing Address 1115 30th Street NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Bank Account Check Order

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4308

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Cornerstone Government Affairs, LLC

Mailing Address 300 Independence Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Payment for rent & management fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4311

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Perkins Coie LLP

Mailing Address 1201 Third Avenue
Suite 4900

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Legal Services related to corporate document preparation

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4314

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Stephens

Mailing Address 1024 S Oakcrest Road

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Administrative Expense Reimbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4306

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. ALEXANDER FOR SENATE 2014 INC

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution to Federal Candidate

011

Candidate Name

ALEXANDER FOR SENATE 2014 INC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2014

Transaction ID : SB23.4187

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. ALEXANDER FOR SENATE 2014 INC

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Political Contribution

011

Candidate Name

ALEXANDER FOR SENATE 2014 INC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SB23.4222

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C. CHARLIE DENT FOR CONGRESS

Mailing Address PO BOX 442

City ALLENTOWN State PA Zip Code 18105

Purpose of Disbursement
Political Contribution

011

Candidate Name

CHARLIE DENT FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SB23.4236

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5700.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR COCHRAN

Mailing Address PO BOX 7183

City TUPELO State MS Zip Code 38802

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: MS District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4226

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE FOR A DEMOCRATIC FUTURE

Mailing Address 7240 EVANS MILL RD

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SB23.4303

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C. DIANA DEGETTE FOR CONGRESS

Mailing Address P.O. BOX 61337

City DENVER State CO Zip Code 80206

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4228

Amount of Each Disbursement this Period

2600.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7800.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. EYE OF THE TIGER POLITICAL ACTION COMMITTEE; THE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address PO BOX 2485

Transaction ID : SB23.4220

City Springfield State VA Zip Code 22152

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement Political Contribution

011

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FREE STATE PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address P.O. BOX 2712

Transaction ID : SB23.4225

City TOPEKA State KS Zip Code 66601

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement Political Contribution

011

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DICK DURBIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Mailing Address PO BOX 1949

Transaction ID : SB23.4233

City SPRINGFIELD State IL Zip Code 62705

Amount of Each Disbursement this Period

2600.00

Purpose of Disbursement Political Contribution

011

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: IL District: 00

SUBTOTAL of Disbursements This Page (optional)..... ▶

12600.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ROSA DELAURO

Mailing Address 129 CHURCH ST, STE 818

City NEW HAVEN State CT Zip Code 06510

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: CT District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SB23.4227

Amount of Each Disbursement this Period

2600.00

B. MORAN FOR KANSAS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1151

City HAYS State KS Zip Code 67601

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: KS District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SB23.4223

Amount of Each Disbursement this Period

2600.00

C. MORAN FOR KANSAS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1151

City HAYS State KS Zip Code 67601

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: KS District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SB23.4224

Amount of Each Disbursement this Period

2600.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7800.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. MPAC NY PAC

Mailing Address 77 SAINT NICHOLAS AVE

City NEW YORK State NY Zip Code 10026

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4232

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PATTY MURRAY

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4229

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR PATTY MURRAY

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4231

Amount of Each Disbursement this Period

2600.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

10200.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. PRAIRIE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 2002

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4234

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City JEFFERSON State LA Zip Code 70183

Purpose of Disbursement
Political Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District: 01

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : SB23.4221

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C. SCOTT PETERS FOR CONGRESS

Mailing Address PO BOX 70980

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement
Contribution to Candidate

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : SB23.4203

Amount of Each Disbursement this Period

2600.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

10200.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Friends of Medical Research Political Action Committee

Full Name (Last, First, Middle Initial)

A. TRUST PAC TEAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

Mailing Address 228 S. WASHINGTON STREET
SUITE 115

Transaction ID : SB23.4218

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Political Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. UPTON FOR ALL OF US

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

Mailing Address P.O. BOX 490

Transaction ID : SB23.4219

City ST. JOSEPH State MI Zip Code 49085

Amount of Each Disbursement this Period

2600.00

Purpose of Disbursement
Political Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: MI District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
	/		/	

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7600.00

61900.00
