

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
American Academy of Physician Assistants Political Action Committee (PA PAC)

ADDRESS (number and street) 2318 Mill Road
Suite 1300
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00122499 3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2018 through 09 / 30 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
DORN, JENNIFER, Ms.,
Type or Print Name of Treasurer

Signature of Treasurer DORN, JENNIFER, Ms., [Electronically Filed] Date 11 / 16 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

American Academy of Physician Assistants Political Action Committee (PA PAC)

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="2018"/>		132374.52
(b) Cash on Hand at Beginning of Reporting Period.....	109113.53	
(c) Total Receipts (from Line 19)	14205.73	93613.45
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	123319.26	225987.97
7. Total Disbursements (from Line 31).....	61839.58	116849.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	61479.68	109138.53
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a 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

American Academy of Physician Assistants Political Action Committee (PA PAC)

Report Covering the Period: From: 07 / 01 / 2018 To: 09 / 30 / 2018

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).....	2230.49	25592.82
(ii) Unitemized	11975.24	68020.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14205.73	93613.45
(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)	14205.73	93613.45
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)).....▶	14205.73	93613.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14205.73	93613.45

DETAILED SUMMARY PAGE

of Disbursements

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	1639.58	2449.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1639.58	2449.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	60000.00	114000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	200.00	400.00
(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)).....	200.00	400.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	61839.58	116849.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61839.58	116849.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	14205.73	93613.45
34. Total Contribution Refunds (from Line 28(d))	200.00	400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14005.73	93213.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1639.58	2449.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1639.58	2449.44

**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 39
<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Baker, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 W 25th St
 Apt 4D
 City New York State NY Zip Code 10001-6541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Laser Treatment Center Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 07 / 2018
Transaction ID : A52C0B0165B204684B77
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Butterfield Vickery, Kristin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 City Alexandria State VA Zip Code 22314-6833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Grassroots Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.50

Date of Receipt 07 / 27 / 2018
Transaction ID : A6EBF4A7879DC4BA0844
 Amount of Each Receipt this Period 31.00
 Memo Item

C. Butterfield Vickery, Kristin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 City Alexandria State VA Zip Code 22314-6833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Grassroots Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 263.50

Date of Receipt 08 / 24 / 2018
Transaction ID : A353C7B6EE7D9435F88F
 Amount of Each Receipt this Period 31.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	162.00
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 7 OF 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Butterfield Vickery, Kristin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 City Alexandria State VA Zip Code 22314-6833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Grassroots Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.50

Date of Receipt 09 / 30 / 2018
Transaction ID : AECDB0D96251843CE981
 Amount of Each Receipt this Period 31.00
 Memo Item

B. Dobbs, Lauren, Grace, , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 Bearclaw Cir
 City Aledo State TX Zip Code 76008-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNT HSC Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.25

Date of Receipt 07 / 08 / 2018
Transaction ID : A26475470394D433C9FA
 Amount of Each Receipt this Period 85.00
 Memo Item

c. Dobbs, Lauren, Grace, , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 Bearclaw Cir
 City Aledo State TX Zip Code 76008-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNT HSC Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 295.25

Date of Receipt 08 / 08 / 2018
Transaction ID : A9AB6BE88CB3146E1980
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	201.00
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 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Dobbs, Lauren, Grace, , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 Bearclaw Cir
 City Aledo State TX Zip Code 76008-1245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNT HSC Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.25

Date of Receipt 09 / 08 / 2018
Transaction ID : A21D769BA5E874DF8A69
 Amount of Each Receipt this Period 85.00
 Memo Item

B. DORN, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 27 / 2018
Transaction ID : AB5D9CF7133974C87BD9
 Amount of Each Receipt this Period 50.00
 Memo Item

C. DORN, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 08 / 24 / 2018
Transaction ID : A1D93E58F1FE84840937
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
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 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. DORN, JENNIFER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 09 / 30 / 2018
Transaction ID : A8E918D973288451AA33
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Fowler, Tillie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) SVP, Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2018
Transaction ID : A1AE1573CBC3E4E8BA81
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Fowler, Tillie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) SVP, Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 24 / 2018
Transaction ID : A5B53A029DBE54676950
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
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 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Fowler, Tillie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) SVP, Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2018
Transaction ID : AD4E165FE05AC44058BB
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Gottschalk MPAS PA-C, Melinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3935 Haleys Way
 City Round Rock State TX Zip Code 78665-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baylor Scott & White Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2018
Transaction ID : A5283727021B844A59BC
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Gottschalk MPAS PA-C, Melinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3935 Haleys Way
 City Round Rock State TX Zip Code 78665-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baylor Scott & White Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 23 / 2018
Transaction ID : A5D378621B0BF46B6A4D
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
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 11 OF 39
<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Gottschalk MPAS PA-C, Melinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3935 Haleys Way
 City Round Rock State TX Zip Code 78665-1166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baylor Scott & White Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **09 / 23 / 2018**
Transaction ID : A1BEBF290E35A4410888
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Heuer, William, Tate, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) VP, Federal Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt **07 / 27 / 2018**
Transaction ID : AC67AFFE040BF64EDA848
 Amount of Each Receipt this Period 90.00
 Memo Item

C. Heuer, William, Tate, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) VP, Federal Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt **08 / 24 / 2018**
Transaction ID : A15E66C4D49864759822
 Amount of Each Receipt this Period 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
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 12 OF 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Heuer, William, Tate, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) VP, Federal Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : A6BC1A05CFCF64F47996
 Amount of Each Receipt this Period
 90.00
 Memo Item

B. Manley, Gary, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9336 Sienna Ridge Dr
 City Las Vegas State NV Zip Code 89117-7015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nevada Family Care Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2018
Transaction ID : A4D63C7E6AC6D4365AB5
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Miller, Erika, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, State Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2018
Transaction ID : AC3174A039500473191A
 Amount of Each Receipt this Period
 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
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 13 OF 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Miller, Erika, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, State Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 24 / 2018
Transaction ID : A59A8AC4DD84E49ADA31
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Miller, Erika, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, State Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2018
Transaction ID : AFE15240EDA33456D86F
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Mithoefer, James, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 Sugar House Ln
 City Manchester Center State VT Zip Code 05255-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dartmouth Hitchcock Medical Center Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 24 / 2018
Transaction ID : A07212E29F273400DB50
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
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 14 OF 39
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Mithoefer, James, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 Sugar House Ln
 City Manchester Center State VT Zip Code 05255-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dartmouth Hitchcock Medical Center Occupation (for Individual) Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2018
Transaction ID : A0BE22F596BC148CE93F
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Sheehan, James, M., , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Paseos Dr Apt 804
 City Rochester State NY Zip Code 14618-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Highland Hospital Occupation (for Individual) Emergency Medicine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 07 / 24 / 2018
Transaction ID : A0B6DB1ED996148A1864
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Sheehan, James, M., , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Paseos Dr Apt 804
 City Rochester State NY Zip Code 14618-5661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Highland Hospital Occupation (for Individual) Emergency Medicine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 24 / 2018
Transaction ID : ABB8085EF2B4E4A5FAFF
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
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 15 OF 39
<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Sheehan, James, M., , PA-C
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 Paseos Dr
Apt 804

City Rochester State NY Zip Code 14618-5661

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

Name of Employer (for Individual) Highland Hospital Occupation (for Individual) Emergency Medicine

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 24 / 2018
Transaction ID : A475568F9B3934E96916

Amount of Each Receipt this Period 35.00

Memo Item

B. Smith, Noel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2318 Mill Rd
Ste 1300

City Alexandria State VA Zip Code 22314-6868

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

Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2018
Transaction ID : A80FF0A22236348628C3

Amount of Each Receipt this Period 40.00

Memo Item

C. Smith, Noel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2318 Mill Rd
Ste 1300

City Alexandria State VA Zip Code 22314-6868

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

Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Research

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 24 / 2018
Transaction ID : A42ABEE9E521A46FAB32

Amount of Each Receipt this Period 40.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 39
<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Smith, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Research
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 07 / 2018
Transaction ID : A125B40BF241D4033A82
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Smith, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 Ste 1300
 City Alexandria State VA Zip Code 22314-6868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Research
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 12 / 2018
Transaction ID : AA24FE0785D644BC9B92
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Sobel, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94 Sherman Ave
 City Rockville Centre State NY Zip Code 11570-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwell Health Occupation (for Individual) Senior Director PA Services
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 13 / 2018
Transaction ID : A651F3F8F9B514C21BAC
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
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 17 OF 39
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Sobel, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 94 Sherman Ave
 City Rockville Centre State NY Zip Code 11570-3136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwell Health Occupation (for Individual) Senior Director PA Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2018
Transaction ID : A46F99FCFA0E84BCD963
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Somers, Jay, Clark, , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8545 W Warm Springs Rd Ste A
 City Las Vegas State NV Zip Code 89113-3676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nevada Family Psychiatry Occupation (for Individual) Psychiatry Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 483.32

Date of Receipt 07 / 23 / 2018
Transaction ID : AF1B9F3972E3C4551848
 Amount of Each Receipt this Period 12.50
 Memo Item

C. Somers, Jay, Clark, , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8545 W Warm Springs Rd Ste A
 City Las Vegas State NV Zip Code 89113-3676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nevada Family Psychiatry Occupation (for Individual) Psychiatry Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 483.32

Date of Receipt 07 / 23 / 2018
Transaction ID : A89932DEF52BD45D6A17
 Amount of Each Receipt this Period 83.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.83
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 18 OF 39
	<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Somers, Jay, Clark, , PA-C

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8545 W Warm Springs Rd
Ste A

City Las Vegas State NV Zip Code 89113-3676

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

Name of Employer (for Individual) Nevada Family Psychiatry Occupation (for Individual) Psychiatry Physician Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 579.15

Date of Receipt 08 / 23 / 2018

Transaction ID : AA0E4822B7660435CB62

Amount of Each Receipt this Period 83.33

Memo Item

B. Somers, Jay, Clark, , PA-C

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8545 W Warm Springs Rd
Ste A

City Las Vegas State NV Zip Code 89113-3676

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

Name of Employer (for Individual) Nevada Family Psychiatry Occupation (for Individual) Psychiatry Physician Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 579.15

Date of Receipt 08 / 23 / 2018

Transaction ID : A845C3F4A988440459A1

Amount of Each Receipt this Period 12.50

Memo Item

C. Somers, Jay, Clark, , PA-C

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8545 W Warm Springs Rd
Ste A

City Las Vegas State NV Zip Code 89113-3676

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

Name of Employer (for Individual) Nevada Family Psychiatry Occupation (for Individual) Psychiatry Physician Assistant

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 674.98

Date of Receipt 09 / 23 / 2018

Transaction ID : AB5803149FF64429EB42

Amount of Each Receipt this Period 83.33

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 179.16

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 19 OF 39
<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)
American Academy of Physician Assistants Political Action Committee (PA PAC)

A. Somers, Jay, Clark, , PA-C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8545 W Warm Springs Rd
 Ste A
 City Las Vegas State NV Zip Code 89113-3676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nevada Family Psychiatry Occupation (for Individual) Psychiatry Physician Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 674.98

Date of Receipt 09 / 23 / 2018
Transaction ID : A0C42E3486BD44498BA4
 Amount of Each Receipt this Period 12.50
 Memo Item

B. Stewart, Christopher, John, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 City Alexandria State VA Zip Code 22314-6833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Congressional Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 27 / 2018
Transaction ID : AF612C96F4E4140B2B9F
 Amount of Each Receipt this Period 80.00
 Memo Item

C. Stewart, Christopher, John, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2318 Mill Rd
 City Alexandria State VA Zip Code 22314-6833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Academy of Physician Assistan Occupation (for Individual) Director, Congressional Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 24 / 2018
Transaction ID : AD23A0DCEFB014548912
 Amount of Each Receipt this Period 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	172.50
TOTAL This Period (last page this line number only).....	2230.49

**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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Aristotle fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	8

FEC Identification Number

C [Redacted]
Transaction ID : BA7C63782A
Amount of Each Disbursement this Period
[Redacted] 1369.15

Memo Item

Full Name (Last, First, Middle Initial)

B. Aristotle

Mailing Address 205 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Aristotle fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	8

FEC Identification Number

C [Redacted]
Transaction ID : B9C885A342f
Amount of Each Disbursement this Period
[Redacted] 43.90

Memo Item

Full Name (Last, First, Middle Initial)

C. Aristotle

Mailing Address 205 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Aristotle CC fees - Accrued

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	8

FEC Identification Number

C [Redacted]
Transaction ID : BEF7BCE36f
Amount of Each Disbursement this Period
[Redacted] 35.90

Memo Item

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

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

1	4	4	8	.	9	5
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. Aristotle

Mailing Address 205 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-1164

Purpose of Disbursement
Aristotle CC fees - Accrued

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2018

FEC Identification Number

C []

Transaction ID : B616D30024f

Amount of Each Disbursement this Period

[] 34.90

Memo Item

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 600 N Washington St

City
Alexandria

State
VA

Zip Code
22314-1914

Purpose of Disbursement
Bank of America fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2018

FEC Identification Number

C []

Transaction ID : BC9246ABC5

Amount of Each Disbursement this Period

[] 155.73

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

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

[] 190.63

[] 1639.58

**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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. 4 MA PAC

Mailing Address PO BOX 590-464

City NEWTON State MA Zip Code 02459

Purpose of Disbursement Ldrshp PAC Rep. Kennedy

Candidate Name
4 MA PAC

Office Sought: House Senate President
 Disbursement For: 2018
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2018

FEC Identification Number

C C00543504

Transaction ID : BEB96F0DA2

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ANNA ESHOO FOR CONGRESS

Mailing Address 555 CAPITOL MALL, SUITE 1425

City Sacramento State CA Zip Code 95814-4602

Purpose of Disbursement General Re-election 2018

Candidate Name
Eshoo, Anna, G., ,

Office Sought: House Senate President
 Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 18

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2018

FEC Identification Number

C C00258475

Transaction ID : B13FE1F3715

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BADGERPAC

Mailing Address 1831 Bay Street, SE

City Washington State DC Zip Code 20003-2510

Purpose of Disbursement Ldrshp PAC Rep Ron Kind

Candidate Name
BADGERPAC

Office Sought: House Senate President
 Disbursement For: 2018
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2018

FEC Identification Number

C C00382242

Transaction ID : BB2282656C

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. BEN CARDIN FOR SENATE, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

Mailing Address P.O. BOX 21093

City Catonsville State MD Zip Code 21228-0593

FEC Identification Number

C C00411587

Transaction ID : BDB7D8A6E1
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement
General Re-election 2018

Candidate Name

Cardin, Ben, L., ,

Category/
Type

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: MD District:

Full Name (Last, First, Middle Initial)

B. BERGMAN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

Mailing Address 3585 BUNKER HILL RD, #434

City Acme State MI Zip Code 49610-5004

FEC Identification Number

C C00614214

Transaction ID : BD3119FAB4
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement
General Re-election 2018

Candidate Name

Bergman, John, W., ,

Category/
Type

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: MI District: 01

Full Name (Last, First, Middle Initial)

C. BILIRAKIS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2018

Mailing Address PO BOX 606

City Tarpon Springs State FL Zip Code 34688-0606

FEC Identification Number

C C00408534

Transaction ID : BAACC23681
Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement
General Re-election 2018

Candidate Name

Bilirakis, Gus, M., ,

Category/
Type

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: FL District: 12

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

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

3000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. BONAMICI FOR CONGRESS

Mailing Address 2236 SE 10TH AVE

City
Portland

State
OR

Zip Code
97214-4660

Purpose of Disbursement
General Re-election 2018

Candidate Name

Bonamici, Suzanne, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OR District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

C C00500421

Transaction ID : BD9FCECD6

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BOOZMAN FOR ARKANSAS

Mailing Address PO BOX 671

City
Rogers

State
AR

Zip Code
72757-0671

Purpose of Disbursement
General Re-election 2018

Candidate Name

Boozman, John, N., ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: AR District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	8

FEC Identification Number

C C00476317

Transaction ID : B6800B07C4

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BRIAN HIGGINS FOR CONGRESS

Mailing Address P.O. BOX 28

City
Buffalo

State
NY

Zip Code
14220-0028

Purpose of Disbursement
General Re-election 2018

Candidate Name

Higgins, Brian, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NY District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

FEC Identification Number

C C00401034

Transaction ID : B9D92E492F

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. CATHY MCMORRIS RODGERS FOR CONGRESS

Mailing Address Box 137

City
Spokane

State
WA

Zip Code
99210-0137

Purpose of Disbursement
General Re-election 2018

Candidate Name

McMorris Rodgers, Cathy, A., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

FEC Identification Number

C C00390476

Transaction ID : BBA93C0C8C

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City
Bangor

State
ME

Zip Code
04402-1096

Purpose of Disbursement
Primary Re-election 2020

Candidate Name

Collins, Susan, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: ME District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	8

FEC Identification Number

C C00314575

Transaction ID : B70AC89712C

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COMSTOCK FOR CONGRESS

Mailing Address PO BOX 831

City
Mc Lean

State
VA

Zip Code
22101-0831

Purpose of Disbursement
General Re-election 2018

Candidate Name

Comstock, Barbara, J., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

FEC Identification Number

C C00554261

Transaction ID : B8847817E4;

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. FASO FOR CONGRESS

Mailing Address PO BOX 448

City
Kinderhook

State
NY

Zip Code
12106-0448

Purpose of Disbursement
General Re-election 2018

Candidate Name

Faso, John, J., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

C C00580415

Transaction ID : B791DC4E17

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CHRIS MURPHY

Mailing Address PO BOX 127

City
Cheshire

State
CT

Zip Code
06410-0127

Purpose of Disbursement
General Re-election 2018

Candidate Name

Murphy, Chris, S., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

FEC Identification Number

C C00492645

Transaction ID : BBE088A7D8

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ERIK PAULSEN

Mailing Address P.O. BOX 44369

City
Eden Prairie

State
MN

Zip Code
55344-1369

Purpose of Disbursement
General Re-election 2018

Candidate Name

Paulsen, Erik, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

C C00439661

Transaction ID : B59529A331;

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN BARRASSO

Mailing Address PO BOX 52008

City
Casper

State
WY

Zip Code
82605-2008

Purpose of Disbursement
General Re-election 2018

Candidate Name

Barrasso, John, A., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	8

FEC Identification Number

C C00436386

Transaction ID : B17622B8591

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF NEAL DUNN

Mailing Address PO BOX 16088

City
Panama City

State
FL

Zip Code
32406-6088

Purpose of Disbursement
General Re-election 2018

Candidate Name

Dunn, Neal, P., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: FL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

C C00582304

Transaction ID : BBCFDD9C1/

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GRANITE VALUES PAC

Mailing Address 105 N STATE STREET

City
Concord

State
NH

Zip Code
03301-4334

Purpose of Disbursement
Ldrshp PAC Sen Maggie Hassan 2018

Candidate Name

GRANITE VALUES PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District: Other

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	8

FEC Identification Number

C C00629311

Transaction ID : B6A35C38D/

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. GRAVES FOR CONGRESS

Mailing Address 2345 GRAND BLVD

City Kansas City State MO Zip Code 64108-2663

Purpose of Disbursement
General Re-election 2018

Candidate Name
Graves, Sam, B., , Jr.

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: MO District: 06

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2018

FEC Identification Number

C C00359034
Transaction ID : BEAE9747C4
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GUTHRIE FOR CONGRESS

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102-9639

Purpose of Disbursement
General Re-election 2018

Candidate Name
Guthrie, Brett, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: KY District: 02

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2018

FEC Identification Number

C C00445023
Transaction ID : BEDA1E0323I
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City Bismarck State ND Zip Code 58502-1577

Purpose of Disbursement
General Re-election 2018

Candidate Name
Heitkamp, Heidi, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: ND District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2018

FEC Identification Number

C C00505552
Transaction ID : B95A508834I
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

2500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. IMPACT PAC

Mailing Address 155 POLIFLY ROAD

City Hackensack State NJ Zip Code 07601-1758

Purpose of Disbursement
Ldrshp PAC Sen Chuck Schumer

Candidate Name
IMPACT PAC

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2018

FEC Identification Number

C C00389163
Transaction ID : BD809C9AC7
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JULIA BROWNLEY FOR CONGRESS

Mailing Address PO BOX 2018

City Thousand Oaks State CA Zip Code 91358-2018

Purpose of Disbursement
General Re-election 2018

Candidate Name
Brownley, Julia, , ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 26

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2018

FEC Identification Number

C C00513077
Transaction ID : BACD0D6187
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KENNY MARCHANT FOR CONGRESS

Mailing Address PO BOX 110187

City Carrollton State TX Zip Code 75011-0187

Purpose of Disbursement
General Re-election 2018

Candidate Name
Marchant, Kenny, E., ,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify)

State: TX District: 24

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2018

FEC Identification Number

C C00393348
Transaction ID : B95DACC74:
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

3000.00

**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)

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<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City
Saint Paul

State
MN

Zip Code
55104-0146

Purpose of Disbursement
General Re-election 2018

Candidate Name

Klobuchar, Amy, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MN District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2018

FEC Identification Number

C C00431353

Transaction ID : B6577BFB5F
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KUSTER FOR CONGRESS, INC

Mailing Address PO BOX 1498

City
Concord

State
NH

Zip Code
03302-1498

Purpose of Disbursement
General Re-election 2018

Candidate Name

Kuster, Ann, McLane, ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NH District: 02

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2018

FEC Identification Number

C C00462861

Transaction ID : B0FDCF2E60
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LARSON FOR CONGRESS

Mailing Address 330 Main Street

City
Hartford

State
CT

Zip Code
06106-1860

Purpose of Disbursement
Gen Re-election 2018

Candidate Name

Larson, John, B., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2018

FEC Identification Number

C C00330142

Transaction ID : B1795D73F6
Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

3500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address PO BOX 298

City
Concord

State
NH

Zip Code
03302-0298

Purpose of Disbursement
Re-election 2022

Candidate Name

Hassan, Maggie, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	0		2	0	1	8

FEC Identification Number

C C00588772

Transaction ID : B9622231C2E

Amount of Each Disbursement this Period

- 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MAKING AMERICA PROSPEROUS PAC

Mailing Address PO BOX 2485

City
Springfield

State
VA

Zip Code
22152-0485

Purpose of Disbursement
Ldrshp PAC Rep Kevin Brady 2018

Candidate Name

MAKING AMERICA PROSPEROUS PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	8

FEC Identification Number

C C00445379

Transaction ID : B788AF15DA

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARKEY COMMITTEE, THE

Mailing Address PO Box 526

City
Medford

State
MA

Zip Code
02155-0006

Purpose of Disbursement
General Re-election 2020

Candidate Name

Markey, Ed, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	8

FEC Identification Number

C C00196774

Transaction ID : B89B2857E1

Amount of Each Disbursement this Period

2500.00

Memo Item

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

4000.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. MATSUI FOR CONGRESS

Mailing Address PO BOX 1738

City
Sacramento

State
CA

Zip Code
95812-1738

Purpose of Disbursement
General Re-election 2018

Candidate Name

Matsui, Doris, O., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

FEC Identification Number

C C00409219

Transaction ID : BEA4EF8928
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MCCASKILL FOR MISSOURI

Mailing Address PO BOX 300077

City
Saint Louis

State
MO

Zip Code
63130-0338

Purpose of Disbursement
General Re-election 2018

Candidate Name

McCaskill, Claire, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MO District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	8

FEC Identification Number

C C00431304

Transaction ID : BC5E8DE5FD
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE CRAPO FOR US SENATE

Mailing Address PO BOX 1948

City
Boise

State
ID

Zip Code
83701-1948

Purpose of Disbursement
Primary Re-election 2022

Candidate Name

Crapo, Mike, D., ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: ID District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	8

FEC Identification Number

C C00330886

Transaction ID : BCA9DC155;
Amount of Each Disbursement this Period

2500.00

Memo Item

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

4500.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. MOOLENAAR FOR CONGRESS

Mailing Address 5915 EASTMAN AVENUE

City Midland State MI Zip Code 48640-6824

Purpose of Disbursement
General Re-election 2018

Candidate Name
Moolenaar, John, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: MI District: 04

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2018

FEC Identification Number

C C00561530

Transaction ID : BEE4365FB1
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NANCY PELOSI FOR CONGRESS

Mailing Address 607 14th Street, NW

City Washington State DC Zip Code 20005-2000

Purpose of Disbursement
General Re-election 2018

Candidate Name
Pelosi, Nancy, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: CA District: 12

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2018

FEC Identification Number

C C00213512

Transaction ID : BEC133C2CD
Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NEW PIONEERS PAC

Mailing Address 228 S WASHINGTON ST STE 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Ldrshp PAC Rep Greg Walden 2018

Candidate Name
NEW PIONEERS PAC

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
Other

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2018

FEC Identification Number

C C00459123

Transaction ID : B027CA3A44
Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

4000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. OLSON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 16381

City
Sugar Land

State
TX

Zip Code
77496-6381

Purpose of Disbursement
General Re-election 2018

Candidate Name

Olson, Pete, G., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	10	/	2018

FEC Identification Number

C C00437913

Transaction ID : B74A188EA2

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR BEN

Mailing Address PO BOX 31129

City
Santa Fe

State
NM

Zip Code
87594-1129

Purpose of Disbursement
General Re-election 2018

Candidate Name

Lujan, Ben, Ray, , Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	20	/	2018

FEC Identification Number

C C00443689

Transaction ID : B4EDCC9566

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR DEREK KILMER

Mailing Address PO BOX 1381

City
Tacoma

State
WA

Zip Code
98401-1381

Purpose of Disbursement
General Re-election 2018

Candidate Name

Kilmer, Derek, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2018

FEC Identification Number

C C00514893

Transaction ID : BFBE97AF1E

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. PORTMAN FOR SENATE COMMITTEE

Mailing Address 9856 ARCHER LANE

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement
Primary Re-election 2022

Candidate Name
Portman, Rob, J., ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
07 / 18 / 2018

FEC Identification Number

C C00458463
Transaction ID : BAA9A0CBE
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PRESERVING AMERICA'S TRADITIONS (PATPAC)

Mailing Address 610 S. BOULEVARD

City Tampa State FL Zip Code 33606-2647

Purpose of Disbursement
Ldrshp PAC of Sen Pat Roberts 2018

Candidate Name
PRESERVING AMERICA'S TRADITIONS (PATPAC)

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2018

FEC Identification Number

C C00383869
Transaction ID : B27E9033D6C
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RECLAIM AMERICA PAC

Mailing Address 228 S WASHINGTON ST STE 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Ldrshp PAC Sen Marco Rubio 2018

Candidate Name
RECLAIM AMERICA PAC

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2018

FEC Identification Number

C C00500025
Transaction ID : BBD5BEFC6
Amount of Each Disbursement this Period
1500.00

Memo Item

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

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

3500.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. SHORE PAC

Mailing Address PO. Box 3157

City
Long Branch

State
NJ

Zip Code
07740-3157

Purpose of Disbursement
Ldrshp PAC Rep Frank Pallone

Candidate Name

SHORE PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) **Other**

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C C00410308

Transaction ID : BB8EA37DAI

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER ROAD

City
Charleston

State
SC

Zip Code
29407-5305

Purpose of Disbursement
Primary Re-election 2022

Candidate Name

Scott, Tim, E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: SC District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2018

FEC Identification Number

C C00540302

Transaction ID : BFEF9F14EEI

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TOM REED FOR CONGRESS

Mailing Address PO BOX 10847

City
Rochester

State
NY

Zip Code
14610-0847

Purpose of Disbursement
General Re-election 2018

Candidate Name

Reed, Tom, W., , II

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NY District: 23

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2018

FEC Identification Number

C C00464032

Transaction ID : B6DDD29A7

Amount of Each Disbursement this Period

1500.00

Memo Item

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

5000.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. UPTON FOR ALL OF US

Mailing Address P.O. Box 490

City
Saint Joseph

State
MI

Zip Code
49085-0490

Purpose of Disbursement
General Re-election 2018

Candidate Name
Upton, Fred, S., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

C C00200584

Transaction ID : B9D16376B6
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WALBERG FOR CONGRESS

Mailing Address PO Box 1362

City
Jackson

State
MI

Zip Code
49204-1362

Purpose of Disbursement
General Re-election 2018

Candidate Name
Walberg, Tim, L., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MI District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

C C00390724

Transaction ID : BEF5F718CFI
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WICKER FOR SENATE

Mailing Address PO BOX 64

City
Jackson

State
MS

Zip Code
39205-0064

Purpose of Disbursement
General Re-election 2018

Candidate Name
Wicker, Roger, F., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MS District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	8

FEC Identification Number

C C00443218

Transaction ID : BE4F02F5D7
Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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"/> 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. YOUNG FOR IOWA, INC.

Mailing Address PO BOX 162

City
Van Meter

State
IA

Zip Code
50261-0162

Purpose of Disbursement
General Re-election 2018

Candidate Name

Young, David, E., ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	3		2	0	1	8		

FEC Identification Number

C C00545616

Transaction ID : BA858826EE!

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

2500.00

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

60000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

American Academy of Physician Assistants Political Action Committee (PA PAC)

Full Name (Last, First, Middle Initial)

A. Anderson, Christopher, Jon, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

Mailing Address 545 1st Ave
Gree C-124

City New York State NY Zip Code 10016-6401

FEC Identification Number

C
Transaction ID : BC3A8B3F46
Amount of Each Disbursement this Period

Purpose of Disbursement Refund

Candidate Name

Category/Type

100.00

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. Burke, Phil, Joseph, ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2018

Mailing Address 2809 NW 26th St

City Oklahoma City State OK Zip Code 73107-2235

FEC Identification Number

C
Transaction ID : B3DFC61449!
Amount of Each Disbursement this Period

Purpose of Disbursement Refund

Candidate Name

Category/Type

100.00

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C
Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Memo Item

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

200.00

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

200.00