

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 Podiatric Medical Association Political Action Committee

ADDRESS (number and street) 9312 Old Georgetown Road
Check if different than previously reported. (ACC) Bethesda MD 20814-1698

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00008839 3. IS THIS REPORT NEW (N) OR 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 11 / 13 / 2018 in the State of MD
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2018 through 10 / 17 / 2018

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

Signature of Treasurer *Simon, Janet, , Dr.,* [Electronically Filed] Date 02 / 28 / 2019

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 Podiatric Medical Association 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="2018"/>	<input type="text" value="444296.26"/>	<input type="text" value="444296.26"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="551085.07"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8838.33"/>	<input type="text" value="303727.14"/>
(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="559923.40"/>	<input type="text" value="748023.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="289000.00"/>	<input type="text" value="477100.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="270923.40"/>	<input type="text" value="270923.40"/>
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

American Podiatric Medical Association Political Action Committee

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

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).....	5938.33	203952.14
(ii) Unitemized	2900.00	99775.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8838.33	303727.14
(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)	8838.33	303727.14
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)).....▶	8838.33	303727.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8838.33	303727.14

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	289000.00	476500.00
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	0.00	600.00
(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	600.00
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)) ..	289000.00	477100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	289000.00	477100.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	8838.33	303727.14
34. Total Contribution Refunds (from Line 28(d))	0.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8838.33	303127.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 68
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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 Podiatric Medical Association Political Action Committee

A. Ajlouny, Martha, Jullie, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Greensboro Podiatry Associates, P.
530 N. Elam Ave. #A

City Greensboro State NC Zip Code 27403-1139

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

Name of Employer (for Individual) Instride Greensboro Podiatry Associate Occupation (for Individual) Podiatric Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 10 / 2018
Transaction ID : AA0F655CA2C5E42F58AD

Amount of Each Receipt this Period 30.00

Memo Item

B. Anderson, John, Joseph, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Alamogordo Orthopaedics
2301 Indian Wells Rd. #A

City Alamogordo State NM Zip Code 88310-4611

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

Name of Employer (for Individual) Alamogordo Orthopaedics Occupation (for Individual) Podiatric Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 05 / 2018
Transaction ID : A11F88A4EDAF8493FB59

Amount of Each Receipt this Period 1000.00

Memo Item

C. Blumfield, David, L., Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6699 Chimney Rock Rd. #102

City Houston State TX Zip Code 77081-5339

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

Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatric Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 10 / 2018
Transaction ID : A46CE5BA6D7E64954982

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1530.00

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 68
	<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 Podiatric Medical Association Political Action Committee

A. Cadena, Carlos, A., Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Carlos A. Cadena, DPM, PC
 2800 Doral Ct. #A
 City Las Cruces State NM Zip Code 88011-8616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carlos A. Cadena, DPM, PC Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2018
Transaction ID : A4CE5522AF87A4F5192F
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Chapel, Charles, P., Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12084 Cortez Blvd.
 City Brooksville State FL Zip Code 34613-7371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 04 / 2018
Transaction ID : A5224F3AD381D4190864
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Dabdoub, William, H., Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1150 Robert Blvd. #190
 City Slidell State LA Zip Code 70458-2064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 17 / 2018
Transaction ID : A84F36BEC84A5459891C
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
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 68
<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 Podiatric Medical Association Political Action Committee

A. D'Amico, Joseph, C., Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 W. 57th St. #1G

City New York	State NY	Zip Code 10019-3115
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Podiatric Physician
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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
10	/	05	/	2018

Transaction ID : AF054AFB2194547DFA44

Amount of Each Receipt this Period
300.00

Memo Item

B. Dumitrache, Nelida, , Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8300 Wyoming Blvd. N.E. #1223

City Albuquerque	State NM	Zip Code 87113-2168
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Podiatric Physician
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2018

Transaction ID : A2727C53BC22043CEA70

Amount of Each Receipt this Period
300.00

Memo Item

C. Frimmel, Robert, , Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Sarasota Footcare Center
1921 Waldemere St. #106

City Sarasota	State FL	Zip Code 34239-2941
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Sarasota Footcare Center	Occupation (for Individual) Podiatric Physician
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2018

Transaction ID : ACD24C640D42745DFBD4

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
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 68
<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 Podiatric Medical Association Political Action Committee

A. Grizzaffi, Jeffery, Ryan, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 W. St. Mary Blvd. #106

City Lafayette	State LA	Zip Code 70506-3560
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Podiatric Physician
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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
10	/	15	/	2018

Transaction ID : ADCD08EFA6AD042BA905

Amount of Each Receipt this Period
100.00

Memo Item

B. King, Michael, J., Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Upperline Healthcare, Inc.
102 Woodmont Blvd. #450

City Nashville	State TN	Zip Code 37205-5202
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Upperline Healthcare, Inc.	Occupation (for Individual) Podiatric Physician
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2018

Transaction ID : A78F045AEBFA64C00AF9

Amount of Each Receipt this Period
250.00

Memo Item

C. Koshimune, Diane, Miye, Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Kaiser Permanente - San Jose
270 International Cir. POD. DEPT.

City San Jose	State CA	Zip Code 95119-1130
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Podiatric Physician
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2018

Transaction ID : A1225180815A346BDB75

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 68
	<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 Podiatric Medical Association Political Action Committee

A. Lepoer, Krysia, L., Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address University Foot & Ankle Center Inc
 235 Plain St. #201
 City Providence State RI Zip Code 02905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University Foot Center Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 01 / 2018
Transaction ID : AB81A5D6B92F64F839AB
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Lockwood, Melissa, Jomarie, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Heartland Foot & Ankle Assn., P.C.
 10 Heartland Dr. #B
 City Bloomington State IL Zip Code 61704-7775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.30

Date of Receipt 10 / 16 / 2018
Transaction ID : AFA9F474BF6EC41F6A51
 Amount of Each Receipt this Period 83.33
 Memo Item

C. Nguyen, Justin, Thu Cao, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1617 N. Beach St.
 City Fort Worth State TX Zip Code 76111-6617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2018
Transaction ID : A44751C96C24F43BB918
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	633.33
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 68
	<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 Podiatric Medical Association Political Action Committee

A. Pinsky, Todd, N., Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Family Foot Center
9980 Central Park Blvd. N. #208

City Boca Raton State FL Zip Code 33428

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

Name of Employer (for Individual) Family Foot Center Occupation (for Individual) Podiatric Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 03 / 2018
Transaction ID : A2FA8D0A1301242B684A

Amount of Each Receipt this Period 250.00

Memo Item

B. Thompson, Michael, B., Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 68th Pl.

City Kenosha State WI Zip Code 53143-5137

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

Name of Employer (for Individual) Self-Employed Occupation (for Individual) Podiatric Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 05 / 2018
Transaction ID : A6F917DDFB96444AA961

Amount of Each Receipt this Period 125.00

Memo Item

C. Vander Wilt, Darlo, G., Dr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Applewood Ln.

City Albuquerque State NM Zip Code 87107

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

Name of Employer (for Individual) Family Foot Health Specialists Occupation (for Individual) Podiatric Physician

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 05 / 2018
Transaction ID : ACF94C391F8CD4623910

Amount of Each Receipt this Period 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1875.00

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 68
	<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 Podiatric Medical Association Political Action Committee

A. Venegas, Luis, Ramon, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Marsella Blvd.
 City Brownsville State TX Zip Code 78521-3579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2018
Transaction ID : A8B042D37945B4EB7A14
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Woelffer, Kirk, Eliel, Dr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Raleigh Foot & Ankle Center P.O. Box 98209
 City Raleigh State NC Zip Code 27624-8209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Raleigh Foot Center Occupation (for Individual) Podiatric Physician
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 05 / 2018
Transaction ID : AA2835957736B4AE9ACF
 Amount of Each Receipt this Period 50.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	5938.33

**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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. AL LAWSON FOR CONGRESS

Mailing Address 400 NORTH ADAMS ST.

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement
2018 General Election Support

Candidate Name
Lawson, Alfred, J., Rep., Jr.

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

State: FL District: 05

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00460261

Transaction ID : BB4C056C81

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ALAN LOWENTHAL FOR CONGRESS

Mailing Address 6380 WILSHIRE BLVD., #1612

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement
2018 General Election Support

Candidate Name
Lowenthal, Alan, S., Rep.,

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

State: CA District: 47

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00498212

Transaction ID : B55F95C1D3I

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ANGUS KING FOR US SENATE CAMPAIGN

Mailing Address 114 MAINE STREET SUITE 1A
PO BOX 368

City BRUNSWICK State ME Zip Code 04011

Purpose of Disbursement
2018 General Election Support

Candidate Name
King, Angus, S., Sen., Jr.

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

State: ME District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00516047

Transaction ID : B92A18681C

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. BELIEF IN LIFE AND LIBERTY POLITICAL ACTION COMMITTEE (BILL'S PAC)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

Mailing Address PO BOX 906

FEC Identification Number

C	C00545079
---	-----------

Transaction ID : B714722984A

Amount of Each Disbursement this Period

5000.00

Memo Item

City

MARIETTA

State

OH

Zip Code

45750

Purpose of Disbursement

LPAC 2018 Support (Rep. Bill Johnson)

Category/
Type

Candidate Name

BELIEF IN LIFE AND LIBERTY POLITICAL ACTION COMMITTEE (BILL'S PAC)

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State:

District:

Other

Full Name (Last, First, Middle Initial)

B. BERGMANFORCONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

Mailing Address N5070 CISCO LAKE ROAD

FEC Identification Number

C	C00614214
---	-----------

Transaction ID : B14764F69C1

Amount of Each Disbursement this Period

1000.00

Memo Item

City

WATERSMEET

State

MI

Zip Code

49969

Purpose of Disbursement

2018 General Election Support

Category/
Type

Candidate Name

Bergman, Jack, W., Rep.,

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	/	D	D	/	Y	Y	Y	Y
10			03			2018			

Mailing Address PO Box 606

FEC Identification Number

C	C00408534
---	-----------

Transaction ID : BF0DB7116E

Amount of Each Disbursement this Period

1000.00

Memo Item

City

Tarpon Springs

State

FL

Zip Code

34688

Purpose of Disbursement

2018 General Election

Category/
Type

Candidate Name

Bilirakis, Gus, M., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: FL

District: 12

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

7000.00

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"/> 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 Podiatric Medical Association Political Action Committee

A. BILL CASSIDY FOR US SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 80505

City: BATON ROUGE State: LA Zip Code: 70898

Purpose of Disbursement: 2020 General Election Support

Candidate Name: Cassidy, Bill, , Sen.,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: LA District:

Date of Disbursement: 10 / 07 / 2018

FEC Identification Number: C C00543983
Transaction ID : B645485354C
Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Bill Foster For Congress Committee

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 703

City: Geneva State: IL Zip Code: 60134

Purpose of Disbursement: 2018 General Election Support

Candidate Name: Foster, Bill, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IL District: 11

Date of Disbursement: 10 / 07 / 2018

FEC Identification Number: C C00435099
Transaction ID : B691B785BCI
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Bill Nelson For U S Senate

Full Name (Last, First, Middle Initial)
Mailing Address 972 W Whitmire Drive

City: Melbourne State: FL Zip Code: 32935

Purpose of Disbursement: 2018 General Election Support

Candidate Name:

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2018

FEC Identification Number: C
Transaction ID : B07A65B503
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)..... ▶

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial) A. BILLY LONG FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address 3246 E. RIDGEVIEW STREET		FEC Identification Number C 000460063 Transaction ID : B0D6B16218 Amount of Each Disbursement this Period 1000.00
City SPRINGFIELD	State MO	Zip Code 65804
Purpose of Disbursement 2018 General Election Support		Category/ Type
Candidate Name Long, Billy, , Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BLUM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address 2728 ASBURY ROAD SUITE 400		FEC Identification Number C 000543926 Transaction ID : BE31D0FF99 Amount of Each Disbursement this Period 1000.00
City DUBUQUE	State IA	Zip Code 52001
Purpose of Disbursement 2018 General Election Support		Category/ Type
Candidate Name Blum, Rodney, L., Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Blumenauer For Congress		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018
Mailing Address 830 Ne Holladay, #105		FEC Identification Number C 000307314 Transaction ID : BFEC167EC1 Amount of Each Disbursement this Period 2000.00
City Portland	State OR	Zip Code 97232
Purpose of Disbursement 2018 General Election Support		Category/ Type
Candidate Name Blumenauer, Earl, , Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 03	<input type="checkbox"/> 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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Boozman For Arkansas

Mailing Address PO Box 671

City
Rogers

State
AR

Zip Code
72757

Purpose of Disbursement
2020 Primary Election Support

Candidate Name

Boozman, John, N., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: AR District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00476317

Transaction ID : B6E77F3B6B

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Butterfield For Congress

Mailing Address PO Box 2571

City
Wilson

State
NC

Zip Code
27894

Purpose of Disbursement
2018 General Election Support

Candidate Name

Butterfield, G.K., , Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NC District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00401190

Transaction ID : B27E5613E6L

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Carol Shea-Porter For Congress

Mailing Address PO Box 453

City
Rochester

State
NH

Zip Code
03866

Purpose of Disbursement
2018 General Election Support

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C

Transaction ID : B1C3DB96A

Amount of Each Disbursement this Period

500.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cathy McMorris Rodgers For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2018

Mailing Address Box 137

FEC Identification Number

C	C00390476
---	-----------

Transaction ID : B4CC7DD321

Amount of Each Disbursement this Period

1000.00

Memo Item

City Spokane State WA Zip Code 99210

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
McMorris Rodgers, Cathy, A., Rep.,

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

State: WA District: 05

Full Name (Last, First, Middle Initial)

B. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2018

Mailing Address P.O. BOX 11091

FEC Identification Number

C	C00461822
---	-----------

Transaction ID : B99C8C6530f

Amount of Each Disbursement this Period

1000.00

Memo Item

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
Fleischmann, Chuck, J., Rep.,

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

State: TN District: 03

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR JOHN RUTHERFORD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

Mailing Address 3030 HARTLEY RD
STE 120

FEC Identification Number

C	C00615294
---	-----------

Transaction ID : B0AD3336B1

Amount of Each Disbursement this Period

1000.00

Memo Item

City JACKSONVILLE State FL Zip Code 32257

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
Rutherford, John, , Rep.,

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

State: FL District: 04

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

3000.00

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"/> 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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Citizens For Rush		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address P. O. Box 7292		FEC Identification Number C H2IL01042 Transaction ID : BB447E2AD8
City Chicago	State IL	Zip Code 60680
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 3000.00
Candidate Name Rush, Bobby, L., Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 01	

Full Name (Last, First, Middle Initial) B. Citizens For Waters		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 555 So.Flower St.,Suite 4210		FEC Identification Number C C00167585 Transaction ID : B36CC5B8BC
City Los Angeles	State CA	Zip Code 90071
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 2000.00
Candidate Name Waters, Maxine, , Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: CA	District: 43	

Full Name (Last, First, Middle Initial) C. Citizens To Elect Rick Larsen		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018
Mailing Address PO Box 326		FEC Identification Number C C00345546 Transaction ID : BC35F08D1F
City Everett	State WA	Zip Code 98206
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 1000.00
Candidate Name Larsen, Rick, R., Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WA	District: 02	

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

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

6000.00

**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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. COFFMAN FOR CONGRESS 2018

Mailing Address 4950 S YOSEMITE STREET F2 #511

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement
2018 General Election Support

Candidate Name
Coffman, Mike, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00629287

Transaction ID : B0B6A9AEF7
Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cole For Congress

Mailing Address P.O. Box 722256

City Norman State OK Zip Code 73070

Purpose of Disbursement
2018 General Election Support

Candidate Name
Cole, Tom, J., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: OK District: 04

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00379735

Transaction ID : B4BB2FBEF5
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Committee To Reelect Congressman Chris Smith

Mailing Address P.O. Box 3184

City Hamilton State NJ Zip Code 08619

Purpose of Disbursement
2018 General Election Support

Candidate Name
Smith, Chris, H., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: NJ District: 04

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2018

FEC Identification Number

C C00096412

Transaction ID : B79167E38E
Amount of Each Disbursement this Period

1000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee To Re-Elect Henry Hank Johnson

Mailing Address 6440 Old Hillandale Drive
Suite 262

City Lithonia State GA Zip Code 30058

Purpose of Disbursement
2018 General Election Support

Candidate Name
Johnson, Hank, C., Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: GA District: 04

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00418293

Transaction ID : B435CDE694

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Committee To Re-Elect Trent Franks To Congress

Mailing Address PO Box 8105

City Glendale State AZ Zip Code 85312

Purpose of Disbursement
2018 General Election Support

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C

Transaction ID : B0559D90107

Amount of Each Disbursement this Period

1000.00

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

Purpose of Disbursement
2018 General Election Support

Candidate Name
Comstock, Barbara, J., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: VA District: 10

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00554261

Transaction ID : B51BAA870c

Amount of Each Disbursement this Period

2000.00

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 Podiatric Medical Association Political Action Committee

A. CONNOLLY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 3706 PRADO PLACE

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
2018 General Election Support

Candidate Name
Connolly, Gerry, E., Rep.,

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

State: VA District: 11

Date of Disbursement: 10 / 17 / 2018

FEC Identification Number: C00445452
Transaction ID : B18B2B2F78
Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Courtney For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 38 Risley Road

City Vernon State CT Zip Code 06066

Purpose of Disbursement
2018 General Election Support

Candidate Name
Courtney, Joe, , Rep.,

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

State: CT District: 02

Date of Disbursement: 10 / 03 / 2018

FEC Identification Number: C00410233
Transaction ID : B89A77B6C0
Amount of Each Disbursement this Period: 3000.00

Memo Item

C. CRAWFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 16956

City JONESBORO State AR Zip Code 72403

Purpose of Disbursement
2018 General Election Support

Candidate Name
Crawford, Rick, , Rep.,

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

State: AR District: 01

Date of Disbursement: 10 / 03 / 2018

FEC Identification Number: C00462374
Transaction ID : B9390D4A47
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial) A. DARREN SOTO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 03 / 2018
Mailing Address 338 N MAGNOLIA AVENUE SUITE D		FEC Identification Number C00581074 Transaction ID : B4873A7D3C Amount of Each Disbursement this Period 1000.00
City ORLANDO	State FL	Zip Code 32801
Purpose of Disbursement 2018 General Election		Category/ Type
Candidate Name Soto, Darren, M., Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 09	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. David Scott For Congress		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address P.O. Box 960821		FEC Identification Number C00369801 Transaction ID : B198F6E6AF Amount of Each Disbursement this Period 1500.00
City Riverdale	State GA	Zip Code 30296
Purpose of Disbursement 2018 General Election Support		Category/ Type
Candidate Name Scott, David, A., Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 13	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Davis for Congress		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address 5630 W. Division St.		FEC Identification Number C00172619 Transaction ID : B0142E9E8C Amount of Each Disbursement this Period 1000.00
City Chicago	State IL	Zip Code 60651
Purpose of Disbursement 2018 General Election Support		Category/ Type
Candidate Name Davis, Danny, K., Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 07	<input type="checkbox"/> 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**

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. DEBBIE DINGELL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2018

Mailing Address PO BOX 746

FEC Identification Number

C	C00558213
Transaction ID : B9355C34AC	
Amount of Each Disbursement this Period	
	2000.00

City DEARBORN State MI Zip Code 48121

Purpose of Disbursement
2018 General Election Support

Category/ Type

Candidate Name
Dingell, Debbie, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MI District: 12

Memo Item

Full Name (Last, First, Middle Initial)

B. Debbie Wasserman Schultz For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2018

Mailing Address 1071 Twin Branch Ln

FEC Identification Number

C	C00385773
Transaction ID : BEF6F9CBAC	
Amount of Each Disbursement this Period	
	1000.00

City Weston State FL Zip Code 33326

Purpose of Disbursement
2018 General Election Support

Category/ Type

Candidate Name
Wasserman Schultz, Debbie, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: FL District: 23

Memo Item

Full Name (Last, First, Middle Initial)

C. Denny Heck For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	17	/	2018

Mailing Address PO Box 235

FEC Identification Number

C	C00472159
Transaction ID : BA9D8C9F5E	
Amount of Each Disbursement this Period	
	2000.00

City Olympia State WA Zip Code 98507

Purpose of Disbursement
2018 General Election Support

Category/ Type

Candidate Name
Heck, Denny, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: WA District: 10

Memo Item

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

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

5000.00

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

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. DIANE BLACK FOR CONGRESS

Mailing Address PO BOX 1437

City
GALLATIN

State
TN

Zip Code
37066-1437

Purpose of Disbursement
2018 General Election Support

Candidate Name

Black, Diane, L., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00472878

Transaction ID : BB90668ADF

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Dina Titus For Congress

Mailing Address PO Box 50614

City
Henderson

State
NV

Zip Code
89016

Purpose of Disbursement
2018 General Election Support

Candidate Name

Titus, Dina, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NV District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C H8NV03036

Transaction ID : B94988DCAF

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DONALD M PAYNE JR FOR CONGRESS

Mailing Address PO BOX 2406

City
NEWARK

State
NJ

Zip Code
07114

Purpose of Disbursement
2018 General Election Support

Candidate Name

Payne, Donald, M., Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C C00519355

Transaction ID : BD104A94A2

Amount of Each Disbursement this Period

1000.00

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**

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Doyle For Congress Committee

Mailing Address 205 Hawthorne Court

City Pittsburgh State PA Zip Code 15221

Purpose of Disbursement
2018 General Election Support

Candidate Name
Doyle, Mike, F., Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: PA District: 14

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00290064
Transaction ID : B19B0D8FC3
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DR. RAUL RUIZ FOR CONGRESS

Mailing Address PO BOX 3433

City PALM DESERT State CA Zip Code 92261

Purpose of Disbursement
2018 General Election Support

Candidate Name
Ruiz, Raul, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: CA District: 36

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00502575
Transaction ID : BDF5E9B0671
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Dutch Ruppensberger For Congress

Mailing Address 22 West Padonia Road Suite C-141

City Timonium State MD Zip Code 21093

Purpose of Disbursement
2018 General Election Support

Candidate Name
Ruppensberger, Dutch, , Rep., III

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: MD District: 02

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00376673
Transaction ID : BA76656681
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

6000.00

**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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ed Royce For Congress

Mailing Address P.O. Box 2525

City
Orange

State
CA

Zip Code
92859

Purpose of Disbursement
2018 General Election Support

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C []
Transaction ID : B9DB6ACC01
Amount of Each Disbursement this Period
[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Engel For Congress

Mailing Address 462 California Road

City
Bronxville

State
NY

Zip Code
10708

Purpose of Disbursement
2018 General Election Support

Candidate Name

Engel, Eliot, L., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NY District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00236513
Transaction ID : B6E98621582
Amount of Each Disbursement this Period
[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Enzi For Us Senate

Mailing Address PO Box 2775

City
Cody

State
WY

Zip Code
82414

Purpose of Disbursement
2020 Primary Election

Candidate Name

Enzi, Mike, B., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: WY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C S6WY00126
Transaction ID : BEE39CB3B1
Amount of Each Disbursement this Period
[] 2000.00

Memo Item

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

[]	4000.00
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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"/> 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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. FREDERICA S. WILSON FOR CONGRESS

Mailing Address 19821 NW 2ND AVENUE
BOX 354

City MIAMI GARDENS State FL Zip Code 33169

Purpose of Disbursement
2018 General Election Support

Candidate Name
Wilson, Frederica, S., Rep.,

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

State: FL District: 24

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00460055

Transaction ID : BF6D0EEEC7

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CHERI BUSTOS

Mailing Address P.O. BOX 77

City EAST MOLINE State IL Zip Code 61244

Purpose of Disbursement
2018 General Election Support

Candidate Name
Bustos, Cheri, L., Rep.,

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

State: IL District: 17

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00498568

Transaction ID : BA393225980

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Chris Murphy

Mailing Address PO Box 127

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
2018 General Election

Candidate Name
Murphy, Chris, S., Sen.,

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

State: CT District:

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00492645

Transaction ID : B3CDABE1D

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Dan Kildee

Mailing Address P.O. Box 248

City
Flint

State
MI

Zip Code
48501

Purpose of Disbursement
2018 General Election Support

Candidate Name

Kildee, Dan, T., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00499947

Transaction ID : BB50676AF5
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Dick Durbin Committee

Mailing Address PO Box 1949

City
Springfield

State
IL

Zip Code
62705

Purpose of Disbursement
2020 Primary Election Support

Candidate Name

Durbin, Dick, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00148999

Transaction ID : B678A7FDCB
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ELIZABETH ESTY

Mailing Address PO BOX 61

City
CHESHIRE

State
CT

Zip Code
06410

Purpose of Disbursement
2018 General Election Support

Candidate Name

Esty, Elizabeth, H., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CT District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00494203

Transaction ID : B6B16F7B2C
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**

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ERIK PAULSEN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

FEC Identification Number

C C00439661

Transaction ID : B0056F261C1
Amount of Each Disbursement this Period

1000.00

Memo Item

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
Paulsen, Erik, , Rep.,

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

State: MN District: 03

Full Name (Last, First, Middle Initial)

B. Friends Of Jim Inhofe Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2018

Mailing Address PO Box 13300

FEC Identification Number

C C00207993

Transaction ID : BDBE4D03CC
Amount of Each Disbursement this Period

1000.00

Memo Item

City Oklahoma City State OK Zip Code 73113

Purpose of Disbursement
2020 Primary Election Support

Category/Type

Candidate Name
Inhofe, James, M., Sen.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: OK District:

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN DELANEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

Mailing Address PO BOX 70835

FEC Identification Number

C C00508416

Transaction ID : B57F1B91D6
Amount of Each Disbursement this Period

1000.00

Memo Item

City BETHESDA State MD Zip Code 20813

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
Delaney, John, K., Rep.,

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

State: MD District: 06

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of John Sarbanes

Mailing Address PO Box 6854

City
Towson

State
MD

Zip Code
21285

Purpose of Disbursement
2018 General Election Support

Candidate Name

Sarbanes, John, P., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00415182

Transaction ID : BD7E4257D0

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John Thune

Mailing Address 200 North Phillips Avenue Ste L101

City
Sioux Falls

State
SD

Zip Code
57104

Purpose of Disbursement
2022 Primary Election Support

Candidate Name

Thune, John, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: SD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00409581

Transaction ID : B35D8EE84F'

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Maria

Mailing Address PO Box 12740

City
Seattle

State
WA

Zip Code
98111

Purpose of Disbursement
2018 General Election Support

Candidate Name

Cantwell, Maria, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00349506

Transaction ID : BFFD3A5B1;

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)..... ▶

5000.00

**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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF NEAL DUNN

Mailing Address 2640A MITCHAM DRIVE

City
TALLAHASSEE

State
FL

Zip Code
32308

Purpose of Disbursement
2018 General Election Support

Candidate Name

Dunn, Neal, P., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2018

FEC Identification Number

C C00582304

Transaction ID : B84EA0E4C8

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Rosa DeLauro

Mailing Address 12 Trumbull Street

City
New Haven

State
CT

Zip Code
06511

Purpose of Disbursement
2018 General Election Support

Candidate Name

DeLauro, Rosa, L., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CT District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	03	/	2018

FEC Identification Number

C C00238865

Transaction ID : B78244A8B62

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SCOTT DESJARLAIS

Mailing Address PO. BOX 90133

City
NASHVILLE

State
TN

Zip Code
37209

Purpose of Disbursement
2018 General Election Support

Candidate Name

DesJarlais, Scott, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	17	/	2018

FEC Identification Number

C C00464073

Transaction ID : B280F3C482

Amount of Each Disbursement this Period

3000.00

Memo Item

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

7000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Sherrod Brown

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2018

Mailing Address PO Box 76187

FEC Identification Number

C C00264697

Transaction ID : B9735F9C51!

Amount of Each Disbursement this Period

2000.00

Memo Item

City
Washington

State
DC

Zip Code
20013

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name

Brown, Sherrod, C., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District:

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SUSAN BROOKS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

Mailing Address 9425 N MERIDIAN STREET
237

FEC Identification Number

C C00500207

Transaction ID : B182471F20D

Amount of Each Disbursement this Period

2000.00

Memo Item

City
INDIANAPOLIS

State
IN

Zip Code
46260-1308

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name

Brooks, Susan, W., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: IN District: 05

Full Name (Last, First, Middle Initial)

C. FRIENDS OF TAMMY DUCKWORTH

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

Mailing Address 1841 W Henderson
Apt. 2

FEC Identification Number

C C00418525

Transaction ID : B6FC3B7744

Amount of Each Disbursement this Period

2000.00

Memo Item

City
Chicago

State
IL

Zip Code
60657

Purpose of Disbursement
2022 Primary Election Support

Category/Type

Candidate Name

Duckworth, Tammy, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: IL District:

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

6000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Garamendi For Congress

Mailing Address C/O California Political Law, Inc.
3605 Long Beach Blvd., Ste. 426

City Long Beach State CA Zip Code 90807

Purpose of Disbursement
2018 General Election Support

Candidate Name

Garamendi, John, R., Rep.,

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

State: CA District: 03

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00462697

Transaction ID : B401CDA31D

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gillibrand For Senate

Mailing Address 236 Massachusetts Ave Suite 110

City Washington State DC Zip Code 20002

Purpose of Disbursement
2018 General Election Support

Candidate Name

Gillibrand, Kirsten, E., Sen.,

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

State: NY District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00413914

Transaction ID : BEE330925Df

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Grassley Committee Inc

Mailing Address PO Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement
2022 Primary Election Support

Candidate Name

Grassley, Chuck, , Sen.,

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

State: IA District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C S01A00028

Transaction ID : B2BF0E23D2

Amount of Each Disbursement this Period

2000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. GREGG HARPER FOR CONGRESS

Mailing Address POST OFFICE BOX 54344

City
PEARL

State
MS

Zip Code
39288

Purpose of Disbursement
2018 General Election Support

Candidate Name

Harper, Gregg, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MS District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

FEC Identification Number

C C00441295

Transaction ID : B196A91A72I

Amount of Each Disbursement this Period

1000.00

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
2018 General Election Support

Candidate Name

Guthrie, Brett, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

FEC Identification Number

C C00445023

Transaction ID : BDFD6BD9A4

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Gutierrez For Congress

Mailing Address 5310 W. Cullom Ave

City
Chicago

State
IL

Zip Code
60641

Purpose of Disbursement
2018 General Election Support

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

FEC Identification Number

C

Transaction ID : B7A78DAB9I

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

5000.00

**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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Hal Rogers For Congress		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address P.O. Box 1214		FEC Identification Number C 000116632 Transaction ID : B2FC4C5302
City Somerset	State KY	Zip Code 42502
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 2000.00
Candidate Name Rogers, Hal, D., Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KY	District: 05	

Full Name (Last, First, Middle Initial) B. Hastings For Congress		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address P.O. Box 100277		FEC Identification Number C 000269837 Transaction ID : BD411F6E52
City Ft. Lauderdale	State FL	Zip Code 33310
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 1500.00
Candidate Name Hastings, Alcee, L., Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: FL	District: 20	

Full Name (Last, First, Middle Initial) C. Hawkeye PAC, The		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address PO Box 7255		FEC Identification Number C Transaction ID : B7B8959510
City Des Moines	State IA	Zip Code 50309
Purpose of Disbursement 2018 LPAC Support (Grassley)		Amount of Each Disbursement this Period 5000.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	Other

SUBTOTAL of Disbursements This Page (optional).....▶	8500.00
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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. HELLER FOR SENATE

Mailing Address PO BOX 371907

City
LAS VEGAS

State
NV

Zip Code
89137

Purpose of Disbursement
2018 General Election Support

Candidate Name

Heller, Dean, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2018

FEC Identification Number

C C00494229

Transaction ID : BC7FE2B75C

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Higgins For Congress

Mailing Address PO Box 28

City
Buffalo

State
NY

Zip Code
14220

Purpose of Disbursement
2018 General Election Support

Candidate Name

Higgins, Brian, M., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NY District: 26

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00401034

Transaction ID : B19DF3A0C1

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HIMES FOR CONGRESS

Mailing Address 857 POST ROAD, #312

City
FAIRFIELD

State
CT

Zip Code
06824

Purpose of Disbursement
2018 General Election Support

Candidate Name

Himes, Jim, A., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CT District: 04

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00434191

Transaction ID : BAE0F62B8E

Amount of Each Disbursement this Period

1000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. HOOPS PAC

Mailing Address PO BOX 3314

City
PORTLAND

State
OR

Zip Code
97208

Purpose of Disbursement
2018 LPAC Support (Sen. Ron Wyden)

Candidate Name

HOOPS PAC

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00392738

Transaction ID : B5E56887778

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOOSIERS FOR ROKITA, INC.

Mailing Address 314 ARSENAL AVE.

City
INDIANAPOLIS

State
IN

Zip Code
46201

Purpose of Disbursement
2018 General Election Support

Candidate Name

Rokita, Todd, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: IN District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00476192

Transaction ID : BFE60097C

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JAIME FOR CONGRESS

Mailing Address PO BOX 1614

City
RIDGEFIELD

State
WA

Zip Code
98642-0020

Purpose of Disbursement
2018 General Election Support

Candidate Name

Herrera Beutler, Jaime, L., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: WA District: 03

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00472704

Transaction ID : BC557A79F8

Amount of Each Disbursement this Period

1000.00

Memo Item

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

7000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. JEANNE SHAHEEN FOR SENATE

Mailing Address PO BOX 1510

City
Manchester

State
NH

Zip Code
03105-1510

Purpose of Disbursement
2020 Primary Election Support

Candidate Name

Shaheen, Jeanne, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 16 / 2018

FEC Identification Number

C C00439075

Transaction ID : BC0944B6C5

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jeff Merkley for Oregon

Mailing Address PO Box 29136

City
Portland

State
OR

Zip Code
97296

Purpose of Disbursement
2020 Primary Election Support

Candidate Name

Merkley, Jeff, A., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: OR District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

FEC Identification Number

C C00437277

Transaction ID : B78329CDB5I

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. JIM BANKS FOR CONGRESS, INC.

Mailing Address P.O. BOX 11431

City
FORT WAYNE

State
IN

Zip Code
46858

Purpose of Disbursement
2018 General Election Support

Candidate Name

Banks, Jim, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 07 / 2018

FEC Identification Number

C C00577999

Transaction ID : BB2CCC70C

Amount of Each Disbursement this Period

2000.00

Memo Item

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

6000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joe Donnelly For Congress

Mailing Address PO Box 1961

City
South Bend

State
IN

Zip Code
46634

Purpose of Disbursement
2018 General Election Support

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C []
Transaction ID : B9E50FD042I
Amount of Each Disbursement this Period
[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JOE KENNEDY FOR CONGRESS

Mailing Address PO BOX 590464

City
NEWTON

State
MA

Zip Code
02459

Purpose of Disbursement
2018 General Election Support

Candidate Name

Kennedy, Joe, P., Rep., III

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MA District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00512970
Transaction ID : B58D5CCB1E
Amount of Each Disbursement this Period
[] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Joe Wilson For Congress Committee

Mailing Address PO Box 2145

City
West Columbia

State
SC

Zip Code
29171

Purpose of Disbursement
2018 General Election Support

Candidate Name

Wilson, Joe, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00368522
Transaction ID : B617D76222I
Amount of Each Disbursement this Period
[] 2000.00

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 Podiatric Medical Association Political Action Committee

A. John Lewis For Congress

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2323

City Atlanta State GA Zip Code 30301

Purpose of Disbursement
2018 General Election Support

Candidate Name
Lewis, John, R., Rep.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: GA District: 05

Date of Disbursement: 10 / 07 / 2018

FEC Identification Number: C00202416
Transaction ID : B44E0E7283f

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. JONI FOR IOWA

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement
2020 Primary Election Support

Candidate Name
Ernst, Joni, K., Sen.,

Office Sought: House Senate President

Disbursement For: 2020
 Primary General Other (specify)

State: IA District:

Date of Disbursement: 10 / 07 / 2018

FEC Identification Number: C00546788
Transaction ID : BF60ED7231f

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. JULIA BROWNLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2018

City THOUSAND OAKS State CA Zip Code 91358

Purpose of Disbursement
2018 General Election Support

Candidate Name
Brownley, Julia, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: CA District: 26

Date of Disbursement: 10 / 03 / 2018

FEC Identification Number: C00513077
Transaction ID : B65F3E3738f

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**

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(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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ken Calvert For Congress Committee

Mailing Address PO Box 20123

City
Riverside

State
CA

Zip Code
92516

Purpose of Disbursement
2018 General Election Support

Candidate Name

Calvert, Ken, S., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 42

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00257337

Transaction ID : BBA8D45F69

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kind For Congress Committee

Mailing Address 205 5th Avenue South

City
La Crosse

State
WI

Zip Code
54601

Purpose of Disbursement
2018 General Election Support

Candidate Name

Kind, Ron, J., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00312017

Transaction ID : B68860BA51f

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. King For Congress

Mailing Address 116 N Main St.
PO Box 400

City
Early

State
IA

Zip Code
50535

Purpose of Disbursement
2018 General Election Support

Candidate Name

King, Steve, A., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IA District: 04

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00373563

Transaction ID : BF1EFC3D8f

Amount of Each Disbursement this Period

1000.00

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:
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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial) A. KINZINGER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018
Mailing Address PO BOX 2365		FEC Identification Number C 000458877 Transaction ID : B77D5B7A20
City OTTAWA	State IL	Zip Code 61350-6965
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 1000.00
Candidate Name Kinzinger, Adam, D., Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 16	

Full Name (Last, First, Middle Initial) B. Kurt Schrader For Congress		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018
Mailing Address PO Box 3314		FEC Identification Number C 000446906 Transaction ID : BF93E862D51
City Oregon City	State OR	Zip Code 97045
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 2000.00
Candidate Name Schrader, Kurt, , Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OR	District: 05	

Full Name (Last, First, Middle Initial) C. KUSTER FOR CONGRESS, INC.		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address P.O. BOX 1498		FEC Identification Number C 000462861 Transaction ID : B3743DEE48
City CONCORD	State NH	Zip Code 03302
Purpose of Disbursement 2018 General Election Support		Amount of Each Disbursement this Period 2000.00
Candidate Name Kuster, Ann, McLane, Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NH	District: 02	

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:
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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. LANCE FOR CONGRESS

Mailing Address PO BOX 225

City
COLONIA

State
NJ

Zip Code
07067

Purpose of Disbursement
2018 General Election Support

Candidate Name

Lance, Leonard, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 16 / 2018

FEC Identification Number

C C00444224

Transaction ID : B3F4FB80B5

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Larson For Congress

Mailing Address 330 Main Street

City
Hartford

State
CT

Zip Code
06106

Purpose of Disbursement
2018 General Election Support

Candidate Name

Larson, John, B., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CT District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 03 / 2018

FEC Identification Number

C C00330142

Transaction ID : B52EED2A7F

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lofgren For Congress

Mailing Address C/O Contribution Solutions, Llc
123 E. San Carlos St., #531

City
San Jose

State
CA

Zip Code
95112

Purpose of Disbursement
2018 General Election Support

Candidate Name

Lofgren, Zoe, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 19

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 03 / 2018

FEC Identification Number

C C00289603

Transaction ID : B2DF54FC77

Amount of Each Disbursement this Period

2000.00

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**

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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. LOIS FRANKEL FOR CONGRESS

Mailing Address PO BOX 812421

City
BOCA RATON

State
FL

Zip Code
33481

Purpose of Disbursement
2018 General Election Support

Candidate Name

Frankel, Lois, J., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00494856

Transaction ID : B79CEDBAC
Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LOU CORREA FOR CONGRESS

Mailing Address 420 N TWIN OAKS VALLEY RD #2229

City
SAN MARCOS

State
CA

Zip Code
92079

Purpose of Disbursement
2018 General Election Support

Candidate Name

Correa, Lou, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 46

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00578302

Transaction ID : B70056A6E71
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MANCHIN FOR WEST VIRGINIA

Mailing Address PO BOX 5202

City
CHARLESTON

State
WV

Zip Code
25361

Purpose of Disbursement
2018 General Election Support

Candidate Name

Manchin, Joe, , Sen., III

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00486563

Transaction ID : B114B074F7
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**

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FOR LINE NUMBER:
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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. MARK TAKANO FOR CONGRESS

Mailing Address PO BOX 5214

City
RIVERSIDE

State
CA

Zip Code
92517

Purpose of Disbursement
2018 General Election Support

Candidate Name

Takano, Mark, A., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 41

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00498667

Transaction ID : BF0A3B8ACz

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARSHA FOR SENATE

Mailing Address 4916 THOROUGHbred LN

City
BRENTWOOD

State
TN

Zip Code
37027

Purpose of Disbursement
2018 General Election Support

Candidate Name

Blackburn, Marsha, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: TN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00376939

Transaction ID : B8CA654DE1

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Matsui For Congress

Mailing Address PO Box 1738

City
Sacramento

State
CA

Zip Code
95812

Purpose of Disbursement
2018 General Election Support

Candidate Name

Matsui, Doris, O., Rep.,

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
10			03			2018			

FEC Identification Number

C C00409219

Transaction ID : B744D51B79

Amount of Each Disbursement this Period

2000.00

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**

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. MCCASKILL FOR MISSOURI

Mailing Address 700 13TH STREET NW SUITE 600

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
2018 General Election Support

Candidate Name

McCaskill, Claire, , Sen.,

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
10			07			2018			

FEC Identification Number

C C00414961

Transaction ID : B51E144C20!

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mccollum For Congress

Mailing Address P.O. Box 14131

City
St. Paul

State
MN

Zip Code
55114

Purpose of Disbursement
2018 General Election Support

Candidate Name

McCollum, Betty, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: MN District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00354688

Transaction ID : B4FCD3D1F2

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MCCONNELL VICTORY COMMITTEE

Mailing Address PO BOX 75103

City
WASHINGTON

State
DC

Zip Code
20013

Purpose of Disbursement
2018 LPAC Support

Candidate Name

MCCONNELL VICTORY COMMITTEE

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
10			07			2018			

FEC Identification Number

C C00365759

Transaction ID : B9ADD29B7;

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mcnerney For Congress

Mailing Address 6250 Village Parkway
Second Floor

City Dublin State CA Zip Code 94568

Purpose of Disbursement
2018 General Election Support

Candidate Name
McNerney, Jerry, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: CA District: 09

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00398644

Transaction ID : B9B817916F!

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Menendez For Senate

Mailing Address One Gateway Center Suite 520

City Newark State NJ Zip Code 07102

Purpose of Disbursement
2018 General Election Support

Candidate Name
Menendez, Bob, , Sen.,

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

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2018

FEC Identification Number

C C00264564

Transaction ID : BB7120C86D:

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Burgess For Congress

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202

Purpose of Disbursement
2018 General Election Support

Candidate Name
Burgess, Michael, C., Rep.,

Office Sought: House Senate President
Disbursement For: 2022
 Primary General
 Other (specify) ▼
State: TX District: 26

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00372532

Transaction ID : B3BB9B166C

Amount of Each Disbursement this Period

4000.00

Memo Item

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

7000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. MIKE BOST FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1212

City
MURPHYSBORO

State
IL

Zip Code
62966

Purpose of Disbursement
2018 General Election Support

Candidate Name

Bost, Mike, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IL District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00546499

Transaction ID : B10F8934CFI

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MIKE KELLY FOR CONGRESS

Mailing Address PO BOX 476

City
LYNDORA

State
PA

Zip Code
16045

Purpose of Disbursement
2018 General Election Support

Candidate Name

Kelly, Mike, , Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00474189

Transaction ID : BEE548F8025

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Rogers For Congress

Mailing Address 123 East 13th Street

City
Anniston

State
AL

Zip Code
36201

Purpose of Disbursement
2018 General Election Support

Candidate Name

Rogers, Mike, D., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: AL District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00367862

Transaction ID : B762E583EA

Amount of Each Disbursement this Period

2000.00

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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
2018 General Election Support

Candidate Name
Thompson, Mike, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: CA District: 05

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00326363
Transaction ID : B380BFBFA1
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Moore For Congress

Mailing Address PO Box 16646

City Milwaukee State WI Zip Code 53216

Purpose of Disbursement
2018 General Election Support

Candidate Name
Moore, Gwen, S., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: WI District: 04

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00397505
Transaction ID : BE21396297A
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Moran For Kansas

Mailing Address P.O. Box 1151

City Hays State KS Zip Code 67601

Purpose of Disbursement
2022 Primary Election Support

Candidate Name
Moran, Jerry, , Sen.,

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

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00458315
Transaction ID : BE3470DCC1
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)..... ▶

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 Podiatric Medical Association Political Action Committee

A. MORGAN GRIFFITH FOR CONGRESS

Full Name (Last, First, Middle Initial)
MORGAN GRIFFITH FOR CONGRESS

Date of Disbursement: 10 / 17 / 2018

Mailing Address: PO BOX 361

City: CHRISTIANBURG, State: VA, Zip Code: 24068

Purpose of Disbursement: 2018 General Election Support

Candidate Name: Griffith, Morgan, , Rep.,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: VA, District: 09

FEC Identification Number: C00477240
Transaction ID: BE60AFEA16
Amount of Each Disbursement this Period: 2000.00

Memo Item

B. MULLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
MULLIN FOR CONGRESS

Date of Disbursement: 10 / 17 / 2018

Mailing Address: PO BOX 2156

City: CLAREMORE, State: OK, Zip Code: 74018

Purpose of Disbursement: 2018 General Election Support

Candidate Name: Mullin, Markwayne, , Rep.,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: OK, District: 02

FEC Identification Number: C00498345
Transaction ID: B203D70507E
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Napolitano For Congress

Full Name (Last, First, Middle Initial)
NAPOLITANO FOR CONGRESS

Date of Disbursement: 10 / 03 / 2018

Mailing Address: 555 Capitol Mall, Suite 1425

City: Sacramento, State: CA, Zip Code: 95814

Purpose of Disbursement: 2018 General Election Support

Candidate Name: Napolitano, Grace, F., Rep.,

Office Sought: House, Senate, President

Disbursement For: 2018, Primary, General, Other (specify) ▼

State: CA, District: 32

FEC Identification Number: C00334706
Transaction ID: B05C67FD67
Amount of Each Disbursement this Period: 1000.00

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**

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<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 Podiatric Medical Association Political Action Committee

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
2018 General Election Support

Candidate Name

Olson, Pete, G., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TX District: 22

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00437913

Transaction ID : BAB6B3CF9

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PAC to the Future

Mailing Address 430 South Capitol Street, SE
First Floor

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
2018 LPAC Support (Leader Pelosi)

Candidate Name

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
10			03			2018			

FEC Identification Number

C

Transaction ID : B61D8F702D

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Pallone For Congress

Mailing Address PO Box 3176

City
Long Branch

State
NJ

Zip Code
07740

Purpose of Disbursement
2018 General Election

Candidate Name

Pallone, Frank, J., Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00226928

Transaction ID : BD0AE0ECF

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12000.00

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

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(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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAT MEEHAN FOR CONGRESS

Mailing Address 50 S. PROVIDENCE ROAD

City MEDIA State PA Zip Code 19063

Purpose of Disbursement
2018 General Election Support

Candidate Name
Meehan, Patrick, L., Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: PA District: 07

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00466870
Transaction ID : BD02B143A8
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Pat Roberts For U S Senate Inc

Mailing Address PO Box 433

City Great Bend State KS Zip Code 67530

Purpose of Disbursement
2020 Primary Election Support

Candidate Name
Roberts, Pat, , Sen.,

Office Sought: House Senate President
Disbursement For: 2020
 Primary General Other (specify)
State: KS District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00128876
Transaction ID : B380485E3BI
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Pat Toomey For Senate Committee

Mailing Address 2720 Jordan Road
2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement
2022 Primary Election Support

Candidate Name
Toomey, Pat, J., Sen.,

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

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C S4PA00121
Transaction ID : B4CB45308F
Amount of Each Disbursement this Period
4000.00

Memo Item

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

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

7000.00

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

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAUL TONKO FOR CONGRESS

Mailing Address 911 CENTRAL AVENUE
PO BOX 221

City ALBANY State NY Zip Code 12206

Purpose of Disbursement
2018 General Election Support

Candidate Name
Tonko, Paul, D., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: NY District: 20

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00450049

Transaction ID : B543E895286

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

Purpose of Disbursement
2018 General Election Support

Candidate Name
Lujan, Ben, Ray, Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: NM District: 03

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2018

FEC Identification Number

C C00443689

Transaction ID : BCEB867DAF

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 1574

City GIG HARBOR State WA Zip Code 98335

Purpose of Disbursement
2018 General Election Support

Candidate Name
Kilmer, Derek, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: WA District: 06

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00514893

Transaction ID : B71A037B5C

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

5500.00

**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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pete King For Congress Committee

Mailing Address Post Office Box 1428

City
Seaford

State
NY

Zip Code
11783

Purpose of Disbursement
2018 General Election Support

Candidate Name

King, Pete, T., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NY District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00272211

Transaction ID : BC07D3E256

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Peters For Congress

Mailing Address PO Box 226

City
Bloomfield Hills

State
MI

Zip Code
48303

Purpose of Disbursement
2020 Primary Election Support

Candidate Name

Peters, Gary, C., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: MI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00437889

Transaction ID : BACC38F97D

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Peterson For Congress

Mailing Address 26192 Floyd Lake Point Road

City
Detroit Lakes

State
MN

Zip Code
56501

Purpose of Disbursement
2018 General Election Support

Candidate Name

Peterson, Collin, C., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MN District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00253187

Transaction ID : B2563F1518I

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)..... ▶

4000.00

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

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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. POLIQUIN FOR CONGRESS

Mailing Address PO BOX 50

City
OAKLAND

State
ME

Zip Code
04963

Purpose of Disbursement
2018 General Election Support

Candidate Name

Poliquin, Bruce, L., Rep.,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: ME District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00518654

Transaction ID : B8EA9F3949:

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. QUIGLEY FOR CONGRESS

Mailing Address PO BOX 13040

City
CHICAGO

State
IL

Zip Code
60613

Purpose of Disbursement
2018 General Election Support

Candidate Name

Quigley, Mike, , Rep.,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: IL District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00457556

Transaction ID : BFF058B435C

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RALPH ABRAHAM FOR CONGRESS

Mailing Address P.O. BOX 270

City
ARCHIBALD

State
LA

Zip Code
71218

Purpose of Disbursement
2018 General Election Support

Candidate Name

Abraham, Ralph, L., Rep., Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: LA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

FEC Identification Number

C C00563940

Transaction ID : B43C4C9DA:

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

5000.00

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

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(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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Burr Committee; The

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

Mailing Address Post Office Box 5928

City Winston-Salem State NC Zip Code 27113

FEC Identification Number

C C00385526

Transaction ID : BD5C31328F
Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2022 Primary Election Support

Category/Type

Candidate Name
Burr, Richard, M., Sen.,

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

State: NC District:

Memo Item

Full Name (Last, First, Middle Initial)

B. Richard E Neal For Congress Committee

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

FEC Identification Number

C C00226522

Transaction ID : BC6041B9E9I
Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
Neal, Richard, E., Rep.,

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

State: MA District: 01

Memo Item

Full Name (Last, First, Middle Initial)

C. RICK ALLEN FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2018			

Mailing Address 3201 1ST AVE A339

City COLUMBUS State GA Zip Code 31904

FEC Identification Number

C C00481101

Transaction ID : BAA835FAC
Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
2018 General Election Support

Category/Type

Candidate Name
Allen, Rick, , ,

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

State: GA District: 02

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:
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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rob Bishop For Congress

Mailing Address PO Box 2010

City
Brigham City

State
UT

Zip Code
84302

Purpose of Disbursement
2018 General Election Support

Candidate Name

Bishop, Rob, W., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: UT District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00374231

Transaction ID : B5165448412

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Rob Wittman For Congress

Mailing Address P.O. Box 999

City
Montross

State
VA

Zip Code
22520

Purpose of Disbursement
2018 General Election Support

Candidate Name

Wittman, Rob, J., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: VA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00441014

Transaction ID : B4049B799EI

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ROBIN KELLY FOR CONGRESS

Mailing Address PO BOX 6953

City
CHICAGO

State
IL

Zip Code
60680

Purpose of Disbursement
Earmarked from Dr. Jondelle Jenkins

Candidate Name

Kelly, Robin, L., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00539866

Transaction ID : BE4B3AE26s

Amount of Each Disbursement this Period

1000.00

Memo Item Earmarked from Dr. Jondelle Jenkins. Conduit's contribution limit not affected

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

4000.00

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

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

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(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
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NAME OF COMMITTEE (In Full)
American Podiatric Medical Association Political Action Committee

A. RODNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568-0344

Purpose of Disbursement
2018 General Election Support

Candidate Name
Davis, Rodney, L., Rep.,

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

State: IL District: 13

Date of Disbursement: 10 / 07 / 2018

FEC Identification Number: C00521948
Transaction ID : BE2B9D0337
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. ROUNDS FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 250
223 E CAPITOL AVENUE

City PIERRE State SD Zip Code 57501

Purpose of Disbursement
2020 Primary Election Support

Candidate Name
Rounds, Mike, , Sen.,

Office Sought: House Senate President
Disbursement For: 2020
 Primary General Other (specify)

State: SD District:

Date of Disbursement: 10 / 17 / 2018

FEC Identification Number: C00532465
Transaction ID : B872EA101F4
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. RYAN COSTELLO FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 89

City Phoenixville State PA Zip Code 19460-0089

Purpose of Disbursement
2018 General Election Support

Candidate Name
Costello, Ryan, A., Rep.,

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

State: PA District: 06

Date of Disbursement: 10 / 17 / 2018

FEC Identification Number: C00465633
Transaction ID : B0255A6F1A
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 Podiatric Medical Association Political Action Committee

A. Sanford Bishop For Congress

Full Name (Last, First, Middle Initial)
Sanford Bishop

Date of Disbursement: 10 / 07 / 2018

Mailing Address: P. O. Box 909

City: Columbus, State: GA, Zip Code: 31902

Purpose of Disbursement: 2018 General Election Support

FEC Identification Number: C00266940
Transaction ID: BB068B3A93
Amount of Each Disbursement this Period: 1000.00

Candidate Name: Bishop, Sanford, D., Rep., Jr.

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

State: GA, District: 02

Memo Item

B. SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Steve Scalise

Date of Disbursement: 10 / 07 / 2018

Mailing Address: PO BOX 23219

City: JEFFERSON, State: LA, Zip Code: 70183-3219

Purpose of Disbursement: 2018 General Election Support

FEC Identification Number: C00394957
Transaction ID: B9521B13C01
Amount of Each Disbursement this Period: 5000.00

Candidate Name: Scalise, Steve, J., Rep.,

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

State: LA, District: 01

Memo Item

C. Schiff For Congress

Full Name (Last, First, Middle Initial)
Adam Schiff

Date of Disbursement: 10 / 03 / 2018

Mailing Address: 777 S. Figueroa St. Suite 4050

City: Los Angeles, State: CA, Zip Code: 90017

Purpose of Disbursement: 2018 General Election Support

FEC Identification Number: C00343871
Transaction ID: B69D46148C
Amount of Each Disbursement this Period: 4000.00

Candidate Name: Schiff, Adam, B., Rep.,

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

State: CA, District: 28

Memo Item

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

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

10000.00

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

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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sensenbrenner Committee

Mailing Address P. O. Box 575

City: Brookfield State: WI Zip Code: 53008

Purpose of Disbursement
2018 General Election Support

Candidate Name
Sensenbrenner, Jim, , Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: WI District: 05

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00083428

Transaction ID : **B75CBDC9BI**
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen F. Lynch For Congress Committee

Mailing Address 105 Farragut Road

City: South Boston State: MA Zip Code: 02127

Purpose of Disbursement
2018 General Election Support

Candidate Name
Lynch, Stephen, F., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MA District: 08

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00366948

Transaction ID : **BD5C7A00F3I**
Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Swalwell For Congress

Mailing Address P.O. Box 2847

City: Dublin State: CA Zip Code: 94568

Purpose of Disbursement
2018 General Election Support

Candidate Name
Swalwell, Eric, M., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CA District: 15

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00502294

Transaction ID : **BC980FC950**
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

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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin For Senate

Mailing Address P.O. Box 696

City
Madison

State
WI

Zip Code
53701

Purpose of Disbursement
2018 General Election

Candidate Name

Baldwin, Tammy, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2018			

FEC Identification Number

C C00326801

Transaction ID : B562359E63E

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Texans For Lamar Smith

Mailing Address PO Box 6155

City
San Antonio

State
TX

Zip Code
78209

Purpose of Disbursement
2018 General Election Support

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C

Transaction ID : B2C12DF61E1

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Texans For Senator John Cornyn Inc

Mailing Address PO Box 13026

City
Austin

State
TX

Zip Code
78711

Purpose of Disbursement
2020 Primary Election Support

Candidate Name

Cornyn, John, , Sen., III

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C C00369033

Transaction ID : B645FB608F

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6500.00

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:
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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. THE BILL KEATING COMMITTEE

Mailing Address P.O. BOX 3065

City BUZZARDS BAY State MA Zip Code 02532

Purpose of Disbursement
2018 General Election Support

Candidate Name
Keating, Bill, R., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: MA District: 09

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00479063
Transaction ID : B954A29B3D
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. THOM TILLIS COMMITTEE

Mailing Address PO BOX 97396

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement
2020 Primary Election Support

Candidate Name
Tillis, Thom, R., Sen.,

Office Sought: House Senate President
Disbursement For: 2020
 Primary General Other (specify) ▼
State: NC District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00545772
Transaction ID : B20B0DC345I
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Tim Ryan For Congress

Mailing Address 1600 Roosevelt Avenue

City Niles State OH Zip Code 44446

Purpose of Disbursement
2018 General Election Support

Candidate Name
Ryan, Tim, J., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: OH District: 17

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2018

FEC Identification Number

C C00373464
Transaction ID : BAAC95439C
Amount of Each Disbursement this Period
2000.00

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**

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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. TONY CARDENAS FOR CONGRESS

Mailing Address 3700 WILSHIRE BLVD SUITE 1050-B

City LOS ANGELES State CA Zip Code 90010

Purpose of Disbursement
2018 General Election Support

Candidate Name
Cardenas, Tony, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: CA District: 29

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00498873

Transaction ID : B5D7900BA4

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TREASURE STATE PAC

Mailing Address 3242 CUMMINS WAY

City MISSOULA State MT Zip Code 59802

Purpose of Disbursement
2018 LPAC Support (Tester)

Candidate Name
TREASURE STATE PAC

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

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00433680

Transaction ID : B76A6E93BC

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Udall For Us All

Mailing Address PO Box 25766

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2020 Primary Election Support

Candidate Name
Udall, Tom, S., Sen.,

Office Sought: House Senate President
Disbursement For: 2020
 Primary General Other (specify) ▼
State: NM District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2018

FEC Identification Number

C C00329896

Transaction ID : B8A53EE2FE

Amount of Each Disbursement this Period

1000.00

Memo Item

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

8000.00

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

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

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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Upton For All Of Us

Mailing Address P.O. Box 490

City St. Joseph State MI Zip Code 49085

Purpose of Disbursement
2018 General Election Support

Candidate Name
Upton, Fred, S., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: MI District: 06

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00200584

Transaction ID : BD36CB1208
Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VAN HOLLEN FOR SENATE

Mailing Address 10605 CONCORD ST SUITE 202

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement
2022 Primary Election Support

Candidate Name
Van Hollen, Chris, J., Sen., Jr.

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

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00573758

Transaction ID : BD52D0EA0A
Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City Sarasota State FL Zip Code 34230

Purpose of Disbursement
2018 General Election Support

Candidate Name
Buchanan, Vern, G., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: FL District: 16

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00412759

Transaction ID : BF52604DD3
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)..... ▶

8000.00

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

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Visclosky For Congress

Mailing Address Post Office Box 10003

City Merrillville State IN Zip Code 46411

Purpose of Disbursement
2018 General Election Support

Candidate Name
Visclosky, Pete, J., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: IN District: 01

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00166504
Transaction ID : B909C51B61:
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Volunteers For Shimkus

Mailing Address PO Box 661

City Collinsville State IL Zip Code 62234

Purpose of Disbursement
2018 General Election Support

Candidate Name
Shimkus, John, M., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: IL District: 15

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00258855
Transaction ID : BBC2D86279I
Amount of Each Disbursement this Period
4500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VOTETIPTON.COM

Mailing Address PO BOX 1582

City CORTEZ State CO Zip Code 81321-1582

Purpose of Disbursement
2018 General Election Support

Candidate Name
Tipton, Scott, R., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: CO District: 03

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2018

FEC Identification Number

C C00470757
Transaction ID : B47411B4CF
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)..... ▶

6500.00

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

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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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Walberg For Congress		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018	
Mailing Address PO Box 1362		FEC Identification Number C00390724 Transaction ID : B73DBEB5C4 Amount of Each Disbursement this Period 4000.00	
City Jackson	State MI	Zip Code 49204-1362	Category/ Type
Purpose of Disbursement 2018 General Election Support			
Candidate Name Walberg, Tim, L., Rep.,		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MI	District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Walden For Congress		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018	
Mailing Address PO Box 1091		FEC Identification Number C00333427 Transaction ID : B27E9DB42D Amount of Each Disbursement this Period 5000.00	
City Hood River	State OR	Zip Code 97031	Category/ Type
Purpose of Disbursement			
Candidate Name Walden, Greg, P., Rep.,		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OR	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Walter Jones Committee		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018	
Mailing Address PO Box 3962		FEC Identification Number C00305052 Transaction ID : BF301FD03D Amount of Each Disbursement this Period 1000.00	
City Greenville	State NC	Zip Code 27836	Category/ Type
Purpose of Disbursement 2018 General Election Support			
Candidate Name Jones, Walter, B., Rep., Jr.		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NC	District: 03	<input type="checkbox"/> Memo Item

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

10000.00

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

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

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FOR LINE NUMBER:
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<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 Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Yarmuth For Congress

Mailing Address 1819 Brownsboro Road

City Louisville State KY Zip Code 40202

Purpose of Disbursement
2018 General Election Support

Candidate Name
Yarmuth, John, A., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: KY District: 03

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00419630

Transaction ID : **B96BD71075I**
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. YOUNG FOR IOWA, INC.

Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261-0162

Purpose of Disbursement
2018 General Election Support

Candidate Name
Young, David, E., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IA District: 03

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2018

FEC Identification Number

C C00545616

Transaction ID : **B0D63533465**
Amount of Each Disbursement this Period

2000.00

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

MM / DD / YYYY

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)..... ▶

3000.00

288000.00