

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American College of Radiology Association

ADDRESS (number and street)

1891 Preston White Drive

Check if different than previously reported. (ACC)

Reston

VA

20191

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00343459

3. IS THIS REPORT

NEW (N) OR

X

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 Quarterly 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)

X 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)

Convention (12C)

General (12G)

Special (12S)

Runoff (12R)

Election on

in the State of

(d) 30-Day

Post-Election

Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

02

01

2005

through

02

28

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Milton Guiberteau

Signature of Treasurer

Electronically Filed by Milton Guiberteau

Date

06

27

2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

American College of Radiology Association

Report Covering the Period: From: ^M02 [:]01 ^Y2005 To: ^M02 [:]28 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		255166.29
(b) Cash on Hand at Beginning of Reporting Period	292764.64	
(c) Total Receipts (from Line 19)	38966.49	108413.91
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	331751.33	363580.20
<hr/>		
7. Total Disbursements (from Line 31)	25162.56	56991.43
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	306588.77	306588.77
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American College of Radiology Association

Report Covering the Period: From: ^M02 ⁻01 ⁻2005 To: ^M02 ⁻28 ⁻2005

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)	26256.33	81491.67
(ii) Unitemized	10337.78	26290.79
(iii) TOTAL (add Lines 11(a)(i) and (ii))	38596.11	107782.46
(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)	38596.11	107782.46
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.)	370.38	631.45
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 Transfer (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))	38966.49	108413.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	38596.49	108413.91

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	662.56	1741.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	662.56	1741.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	55250.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 ActMty (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))..	25162.56	56991.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	25162.56	56991.43

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)	38596.11	107782.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38596.11	107782.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	662.56	1741.43
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	662.56	1741.43

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

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

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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 College of Radiology Association

Full Name (Last, First, Middle Initial) A. Bibb Allen		Date of Receipt MM / DD / YYYY 02 / 16 / 2005
Mailing Address 3245 E Briarcliff Road		Transaction ID: 43887-41288393735886
City	State	Zip Code
Birmingham	AL	35223-1304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Montclair Baptist Medical Center	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. John Aufderheide		Date of Receipt MM / DD / YYYY 02 / 10 / 2005
Mailing Address 2816 A Fond Du Lac Road		Transaction ID: 44545-37885683774948
City	State	Zip Code
Oshkosh	WI	54902-7221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Radiology Assoc of Fox Va- ley	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Daniel Becker		Date of Receipt MM / DD / YYYY 02 / 16 / 2005
Mailing Address 6081 Woodway Dr.		Transaction ID: 02497-29488772153854
City	State	Zip Code
Memphis	TN	38120
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Diagnostic Imaging, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 7 / 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. George Behobek		Date of Receipt M / D / Y Y Y Y 02 / 07 / 2005
Mailing Address 27850 Fiammount Boulevard		Transaction ID: 90740-88169497251511
City State Zip Code Pepper Pike OH 44121-4618	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Cleveland Clinic Hospital	Occupation Diagnostic Radiologist	Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Linda Brown		Date of Receipt M / D / Y Y Y Y 02 / 10 / 2005
Mailing Address 3360 Bridle Run Trail Northwest		Transaction ID: 44545-0498620867281
City State Zip Code Marietta GA 30064-1788	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Quantum Radiology	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. W. Cloud		Date of Receipt M / D / Y Y Y Y 02 / 10 / 2005
Mailing Address 25 Bennett Road		Transaction ID: 44545-80703371783230
City State Zip Code Wilbraham MA 01065-2325	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00
Name of Employer Radiology and Imaging Inc.	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Burton Cohen		Date of Receipt M / D / Y 02 / 03 / 2005
Mailing Address 98 Bayview Avenue		Transaction ID: 06602-07387942075729
City State Zip Code Great Neck NY 11021-1032	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Mt Sinai School of Medicine Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Thomas Cunningham		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 3900 Aspen Place		Transaction ID: 43887-23575991392135
City State Zip Code Casper WY 82604-4566	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer Casper Medical Imaging Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	Visa

Full Name (Last, First, Middle Initial) C. E. Donner		Date of Receipt M / D / Y 02 / 02 / 2005
Mailing Address 499 Beau Chene Drive		Transaction ID: 76021-91677492858980
City State Zip Code Mandeville LA 70471-1765	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer Northshore Imaging Assoc, LLC Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00	Amex

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Susan Edwards		Date of Receipt M / D / Y 02 / 04 / 2005
Mailing Address 131 D1 Waterrack Lane		Transaction ID: 52577-62365359067917
City Arcadia	State OK	Zip Code 73007-7631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Oklahoma Radiology Group	Occupation Diagnostic Radiologist	Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Paul Ellenbogen		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 8612 Cliffbrook Drive		Transaction ID: 44545-95055788755417
City Dallas	State TX	Zip Code 75254-8613
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Southwest Imaging & Inter-ven specialts	Occupation Diagnostic Radiologist	MC
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Hugo Faleon		Date of Receipt M / D / Y 02 / 20 / 2005
Mailing Address 2304 Valley Brook Way Northeast		Transaction ID: 43887-68778017759323
City Atlanta	State GA	Zip Code 30319-5241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Diagnostic Imaging Specia-llists	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. David Golden		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 411 Happy Trail		Transaction ID: 45155-92786806821824
City San Antonio	State TX	Zip Code 78231-1440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Group	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. David Graumlich		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 5422 Pine Springs Court		Transaction ID: 44545-52581423521042
City Conroe	State TX	Zip Code 77304-4052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Tomball Community Hospital	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Carl Hardin		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address South Texas Radiology Group 7950 Floyd Curl Dr. Suite SI 1-21		Transaction ID: 45155-88385114827292
City San Antonio	State TX	Zip Code 78229-3519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Group	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Jay Harold		Date of Receipt M / D / Y 02 / 16 / 2005
Mailing Address 14421 Wilson Road		Transaction ID: 02497-00570315122804
City Edmond	State OK	Zip Code 73013-1510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Baptist Medical Center	Occupation Diagnostic Radiologist	M/C
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Russell Harvey		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 2736 Southwest Macvickar Avenue		Transaction ID: 44545-77938479185105
City Topeka	State KS	Zip Code 66611-1703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RNM	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mark Healy		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 207 Blackjack Oak		Transaction ID: 45155-52038210830417
City San Antonio	State TX	Zip Code 78230-5617
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. William Jones		Date of Receipt M / D / Y Y Y Y 02 / 04 / 2005
Mailing Address 2344 Prince Albert Drive		Transaction ID: 43887-45246523618698
City Riverside	State CA	Zip Code 92507-5893
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Arlington Rad Medical Gp Inc	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Sanjeev Kabal		Date of Receipt M / D / Y Y Y Y 02 / 18 / 2005
Mailing Address 8409 Nicholson Street		Transaction ID: 02497-64387148618698
City Pittsburgh	State PA	Zip Code 15217
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Univ of Pittsburgh Med Ctr	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Paul Kettle		Date of Receipt M / D / Y Y Y Y 02 / 10 / 2005
Mailing Address 792 Village Trail		Transaction ID: 44545-77141970398042
City Gates Mills	State OH	Zip Code 44040-9880
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hill & Thomas Corp.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. John Knotz		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 205 Rosebank Lane		Transaction ID: 44545-64023989439011
City West Lafayette	State IN	Zip Code 47906-8614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Clarion Health Partners	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Walter Kuhren		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 219 Quaker Hill Road		Transaction ID: 44545-81153506040573
City Warren	State PA	Zip Code 16265-1462
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Warren Radiology Associates	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Visa

Full Name (Last, First, Middle Initial) C. Michael Lane		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 608 Garraty Road		Transaction ID: 45155-71372822251511
City San Antonio	State TX	Zip Code 78209-6149
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Group	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Jay Lichman		Date of Receipt M / D / Y Y Y Y 02 / 02 / 2005
Mailing Address 810 Kings Road		Transaction ID: 76021-48635500669479
City Newport Beach	State CA	Zip Code 92663-5712
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Radiology Associates	Occupation Diagnostic Radiologist	Amerx
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Frank Macaluso		Date of Receipt M / D / Y Y Y Y 02 / 03 / 2005
Mailing Address 22802 Avenue 298		Transaction ID: 06602-49770754575729
City Exeter	State CA	Zip Code 93221-9465
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Joseph McGolley		Date of Receipt M / D / Y Y Y Y 02 / 11 / 2005
Mailing Address 314 Post Oak Way		Transaction ID: 45155-30515888657780
City San Antonio	State TX	Zip Code 78230-5623
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Group, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 College of Radiology Association

Full Name (Last, First, Middle Initial) A. Raymond Mencini		Date of Receipt M / D / Y 02 / 23 / 2005
Mailing Address 5585 Preserve Drive		Transaction ID: 55124-85091799497805
City Greenwood Village	State CO	Zip Code 80121-2114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Colorado Imaging Associates, P.C.	Occupation Diagnostic Radiologist	Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Barry Manick		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 40 Wesbalm Circle		Transaction ID: 45155-16488809751510
City San Antonio	State TX	Zip Code 78220-2638
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Group, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Brian Mott		Date of Receipt M / D / Y 02 / 02 / 2005
Mailing Address 501 Washington Street Suite 510		Transaction ID: 76021-88522280454836
City San Diego	State CA	Zip Code 92103-2238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 College of Radiology Association

Full Name (Last, First, Middle Initial) A. Paul Parsons		Date of Receipt M / D / Y 02 / 03 / 2005
Mailing Address Sacramento Radial Med Group 3291 Ramos Circle		Transaction ID: 06602-93294924497605
City Sacramento	State CA	Zip Code 95827-2516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Sacramento Rad Med Group	Occupation Diagnostic Radiologist	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. John Patti		Date of Receipt M / D / Y 02 / 07 / 2005
Mailing Address 11 Willard Lane		Transaction ID: 30740-56803530454636
City Lynnfield	State MA	Zip Code 01940-1735
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer John A. Patti, M.D., Inc.	Occupation Diagnostic Radiologist	M/C 2500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Gary Podgorak		Date of Receipt M / D / Y 02 / 02 / 2005
Mailing Address Maury Regional Hospital 1224 Trotwood Avenue		Transaction ID: 76021-76301211118698
City Columbia	State TN	Zip Code 38401-4802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Southern Radiology Associates	Occupation Diagnostic Radiologist	M/C 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts TN's Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 17 / 26

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Kevin Quinn		Date of Receipt M / D / Y 02 / 02 / 2005
Mailing Address 89 McAfee Farm Road		Transaction ID: 43887-52198427915573
City Bedford	State NH	Zip Code 03110-4655
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SNHRC	Occupation Diagnostic Radiologist	Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Alvaro Ramos		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 801B Ocean Dr.		Transaction ID: 44545-12838381528854
City Corpus Christi	State TX	Zip Code 78412-2862
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Corpus Christi Radiology Ctr	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Michael Reskin		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 144 N Sewalls Point Road		Transaction ID: 43887-56864875474167
City Stuart	State FL	Zip Code 34968-6502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Michael M. Reskin, P.A.	Occupation Diagnostic Radiologist	Amex
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Stephen Rice		Date of Receipt M / D / Y 02 / 02 / 2005
Mailing Address 3704 North Boulevard Suite A		Transaction ID: 29056-83425539731980
City Alexandria	State Zip Code LA 71301-3806	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer Central Louisiana Imaging	Occupation Diagnostic Radiologist	416.66
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. Alfred Shaplin		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 910 Kimswick Manor Lane		Transaction ID: 44545-30888684263229
City Ballwin	State Zip Code MO 63011-5115	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Scott Radiological Group, Inc.	Occupation Diagnostic Radiologist	1500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. Ezequiel Sims		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 422 Normandy Avenue		Transaction ID: 45155-37768191099167
City San Antonio	State Zip Code TX 78209-4543	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer South Texas Radiology Group, P.A.	Occupation Diagnostic Radiologist	500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	2208.33
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Geoffrey Smith		Date of Receipt M / D / Y 02 / 23 / 2005
Mailing Address PD Box 670		Transaction ID: 43887-28998537778854
City Casper	State WY	Zip Code 82602-0670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Casper Medical Imaging	Occupation Diagnostic Radiologist	Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. John Stall		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 110 Cherokee Lane		Transaction ID: 45155-544368892271042
City San Antonio	State TX	Zip Code 78232-2902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South TX Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Janet Storella		Date of Receipt M / D / Y 02 / 10 / 2005
Mailing Address 6515 Fallwind Lane		Transaction ID: 44545-53286379575728
City Bethesda	State MD	Zip Code 20817-4541
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Drs Grover, Christie & Merritt	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Carrera-Lea Terrel		Date of Receipt M / D / Y 02 / 16 / 2005
Mailing Address PD Box 1259		Transaction ID: 02497-97101992968899
City	State	Zip Code
Taos	NM	87571
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Taos Medical Imaging	Occupation Diagnostic Radiologist	M/C
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Alvin Thaggard		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 104 Cross Lane		Transaction ID: 45155-08135622739791
City	State	Zip Code
San Antonio	TX	78209-5809
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. John Thomas		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 4 Vineyard Drive		Transaction ID: 45155-87504519224187
City	State	Zip Code
San Antonio	TX	78257-1235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 21 / 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Smari Thorderson		Date of Receipt M / D / Y Y Y Y 02 / 10 / 2005
Mailing Address 325 N Timber Ridge Road		Transaction ID: 44545-07389487954835
City State Zip Code Laporte IN 46350-7856	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Laporte Radiology Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Julie Timins		Date of Receipt M / D / Y Y Y Y 02 / 07 / 2005
Mailing Address 20 Forbes Lane		Transaction ID: 30584-32413882017135
City State Zip Code Morristown NJ 07960-6356	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Bill Warren		Date of Receipt M / D / Y Y Y Y 02 / 10 / 2005
Mailing Address 13042 42nd Avenue Northeast		Transaction ID: 43887-15881257505417
City State Zip Code Seattle WA 98125-4825	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer University of Washington	Occupation Diagnostic Radiologist	Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 22 / 26

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial) A. Steven Wegert		Date of Receipt M / D / Y 02 / 11 / 2005
Mailing Address 307 Branch Oak Way		Transaction ID: 45155-10662234067917
City San Antonio	State TX	Zip Code 78230-5607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer South Texas Radiology Group	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jerald Weinberg		Date of Receipt M / D / Y 02 / 07 / 2005
Mailing Address 1259 Williamsburg Drive		Transaction ID: 30740-54743583631198
City Northbrook	State IL	Zip Code 60062-1548
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Elmhurst Hospital	Occupation Diagnostic Radiologist	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

M/C

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	28258.33

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

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

FOR LINE NUMBER: PAGE 23 / 26
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) American College of Radiology Association	
Full Name (Last, First, Middle Initial) A. Vanguard	Date of Receipt M / D / Y U U / Y Y Y Y 02 / 28 / 2005
Mailing Address PD Box 13750	Transaction ID: 23390-99092653989792
City State Zip Code Philadelphia PA 19101-9897	Amount of Each Receipt this Period 370.38
FEC ID number of contributing federal political committee. C	Interest
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 631.45

SUBTOTAL of Receipts This Page (optional)	▶	370.38
TOTAL This Period (last page this line number only)	▶	370.38

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American College of Radiology Association

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 27025

City Richmond State VA Zip Code 23201-7025

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: 23390-155B648943801D

Date of Disbursement

02 / 28 / 2005

Amount of Each Disbursement this Period

662.56

SUBTOTAL of Disbursements This Page (optional) ▶

662.56

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

662.56

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

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

FOR LINE NUMBER:
(check only one)

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

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 College of Radiology Association

Full Name (Last, First, Middle Initial)
A. Bilirakis for Congress

Mailing Address 610 S Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement
Contribution

Candidate Name
Gus Bilirakis

Office Sought: House
Senate
President
State: FL District: D9

Disbursement For: 2006
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: 29050-902B436541657
Date of Disbursement

02 / 05 / 2005

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)
B. Bill Thomas Campaign Committee

Mailing Address PO Box 395

City Bakersfield State CA Zip Code 93302

Purpose of Disbursement
February 2005 Contribution

Candidate Name
William Thomas

Office Sought: House
Senate
President
State: CA District: 22

Disbursement For: 2006
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: 95816-5827295184135
Date of Disbursement

02 / 01 / 2005

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)
C. Congressional Majority Committee

Mailing Address PO Box 746

City Bakersfield State CA Zip Code 93302

Purpose of Disbursement
February 2005 Contribution

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: 95816-9709741473198
Date of Disbursement

02 / 01 / 2005

Amount of Each Disbursement this Period

2500.00

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:
(check only one)

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

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 College of Radiology Association

Full Name (Last, First, Middle Initial)
A. National Republican Congressional Committee

Transaction ID: 74254-8541864275832
Date of Disbursement

Mailing Address 320 First Street

02 / 15 / 2005

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

15000.00

Candidate Name

Category/
Type

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

State: District

Full Name (Last, First, Middle Initial)

Transaction ID: 04281-7579767107983

B. Rogers for Congress

Date of Disbursement

Mailing Address Post Office Box 581
Post Office Box 581

02 / 16 / 2005

City Brighton State MI Zip Code 48116

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

2000.00

Candidate Name

Category/
Type

Mike Rogers

Office Sought: House Senate President
Disbursement For: 2006
 Primary General Other (specify) ▼

State: MI District 08

Full Name (Last, First, Middle Initial)

Transaction ID: 74254-4187280535697

C. Sue Myrick for Congress

Date of Disbursement

Mailing Address PO Box 37091

02 / 16 / 2005

City Charlotte State NC Zip Code 28237

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

1000.00

Candidate Name

Category/
Type

Sue Myrick

Office Sought: House Senate President
Disbursement For: 2006
 Primary General Other (specify) ▼

State: NC District 09

SUBTOTAL of Disbursements This Page (optional) ▶

18000.00

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

24500.00